

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)

Department of the Treasury Internal Revenue Service

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

Form 990 header section including: A For the 2005 calendar year, or tax year beginning and ending; B Check if applicable; C Name of organization (The Center for Consumer Freedom); D Employer identification number (26-0006579); E Telephone number (202-463-7112); F Accounting method (Accrual); G Website (See Attached Statement 1); J Organization type (501(c)(3)); K Check here; L Gross receipts (3699155); M Check if required to attach Sch B.

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

Table with 21 rows detailing Revenue (lines 1-12), Expenses (lines 13-17), and Net Assets (lines 18-21). Includes sub-rows for public support, program service revenue, rental income, and special events. Total revenue is 3698122 and total expenses is 3818769.

SCANNED DEC 21 2006

RECEIVED NOV 14 2006

Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u> • If this amount includes foreign grants, check here <input type="checkbox"/> 22				
23 Specific assistance to individuals (attach schedule) 23				
24 Benefits paid to or for members (attach schedule) 24				
25 Compensation of officers, directors, etc. * * 25	19500.	0.	10500.	9000.
26 Other salaries and wages 26				
27 Pension plan contributions 27				
28 Other employee benefits 28				
29 Payroll taxes 29	1620.		810.	810.
30 Professional fundraising fees 30				
31 Accounting fees 31	18827.	7256.	11571.	
32 Legal fees 32	22313.		15920.	6393.
33 Supplies 33	4935.	4701.		234.
34 Telephone 34	334.	271.		63.
35 Postage and shipping 35	21736.	14778.		6958.
36 Occupancy 36				
37 Equipment rental and maintenance 37	537.	537.		
38 Printing and publications 38	55021.	53474.		1547.
39 Travel 39	43055.	24794.		18261.
40 Conferences, conventions, and meetings 40	8790.	21.		8769.
41 Interest 41				
42 Depreciation, depletion, etc. (attach schedule) 42	8817.	8656.	161.	
43 Other expenses not covered above (itemize):				
a _____ 43a				
b _____ 43b				
c _____ 43c				
d _____ 43d				
e _____ 43e				
f _____ 43f				
g <u>See Statement 3</u> 43g	3613284.	3148700.	3992.	460592.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) 44	3818769.	3263188.	42954.	512627.

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

* * See Statement 4

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? Research and education on food, beverage and lifestyle issues	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
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.)	
a See Statement 5	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	2192314.
b Maintained 8 web sites with daily news updates and articles; distributed a daily email newsletter to approximately 30,000 subscribers to further educate the public on food and beverage issues	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	856699.
c Researched and maintained database of foundation grants and funding sources of organizations dealing with food and beverage issues	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	214175.
d	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	3263188.

Part IV Balance Sheets (See the instructions.)

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

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	292853.	45	325794.
	46 Savings and temporary cash investments	1516007.	46	1686471.
	47 a Accounts receivable			
	b Less: allowance for doubtful accounts		47c	
	48 a Pledges receivable	156367.		
	b Less: allowance for doubtful accounts		48c	156367.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees	43.	50	
	51 a Other notes and loans receivable			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a Investments - land, buildings, and equipment: basis			
	b Less: accumulated depreciation		55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	77356.			
b Less: accumulated depreciation Stmt 6	49318.	57c	28038.	
58 Other assets (describe <input type="checkbox"/> See Statement 7)	424.	58	30989.	
59 Total assets (must equal line 74). Add lines 45 through 58	1930033.	59	2227659.	
Liabilities	60 Accounts payable and accrued expenses	304630.	60	426903.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/> See Statement 8)		65	296000.
66 Total liabilities. Add lines 60 through 65)	304630.	66	722903.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	1625403.	67	1504756.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 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)	1625403.	73	1504756.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	1930033.	74	2227659.	

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	3698244.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	0.
c	Subtract line b from line a		c	3698244.
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): <u>LOSS on Asset Disposal</u>	d2		<122.>
	Add lines d1 and d2		d	<122.>
e	Total revenue (Part I, line 12). Add lines c and d		e	3698122.

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

a	Total expenses and losses per audited financial statements		a	3822396.
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): <u>See Statement 9</u>	b4		3788.
	Add lines b1 through b4		b	3788.
c	Subtract line b from line a		c	3818608.
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): <u>Amortization of Organization Costs</u>	d2		161.
	Add lines d1 and d2		d	161.
e	Total expenses (Part I, line 17). Add lines c and d		e	3818769.

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	
Berman and Company 1775 Pennsylvania Ave. NW, Ste. 1200 Washington, DC 20006	Management Company	0.00	1320595.	302591.	0.
Richard Berman 1775 Pennsylvania Ave. NW, Ste. 1200 Washington, DC 20006	Pres., Exec. Dir., Dir.	23.00	18000.	0.	0.
John Doyle 1775 Pennsylvania Ave. NW, Ste. 1200 Washington, DC 20006	Sec., Treas., Director	1.00	0.	0.	0.
Jacob Dweck 1775 Pennsylvania Ave. NW, Ste. 1200 Washington, DC 20006	Director	1.00	500.	0.	0.
David Browne 1775 Pennsylvania Ave. NW, Ste. 1200 Washington, DC 20006	Director	1.00	500.	0.	59334.
Lane Cardwell 1775 Pennsylvania Ave. NW, Ste. 1200 Washington, DC 20006	Director	1.00	500.	0.	0.

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

75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 5
75 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) See Statement 10
75 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 this organization through common supervision or common control? See Statement 11
Note. Related organizations include section 509(a)(3) supporting organizations.
If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization
75 d Does the organization have a written conflict of interest policy? 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.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 contains 'None' in column A.

Part VI Other Information (See the instructions.)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 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. X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X
78 b If "Yes," has it filed a tax return on Form 990-T for this year? N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 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? X
80 b If "Yes," enter the name of the organization N/A and check whether it is [] exempt or [] nonexempt
81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81a 0
81 b Did the organization file Form 1120-POL for this year? X

Part VI Other Information (continued)

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?
82b 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.
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues, assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h 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?
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders
87b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
88 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?
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.
89b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.
89d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.
90 a List the states with which a copy of this return is filed See Statement 12
90b Number of employees employed in the pay period that includes March 12, 2005 1
91 a The books are in care of The Bookkeeper Telephone no. (202) 463-7112
Located at 1775 Pennsylvania Ave. NW, #1200, Washington, DC ZIP + 4 20006
91b 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)?
91c At any time during the calendar year, did the organization maintain an office outside of the United States?
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 0.

Part VII Analysis of Income-Producing Activities (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a Expense Reimb. Income					231,405.
b Honorarium Speaking Fees					4,200.
c Sale of Research Reports					745.
d Opinion Editorial Income					100.
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	9,050.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			01	<122.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a Fee for Dubbing Research					
b Information for News					
c Broadcast					250.
d Advertising Reprint					
e Permission Fee					150.
104 Subtotal (add columns (B), (D), and (E))		0.		8,928.	236,850.
105 Total (add line 104, columns (B), (D), and (E))					245,778.

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 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).
▼	See Statement 13

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

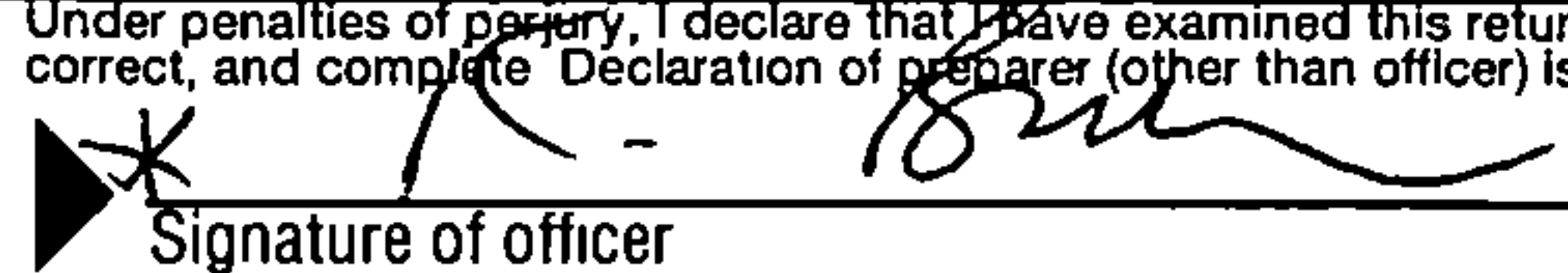
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

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

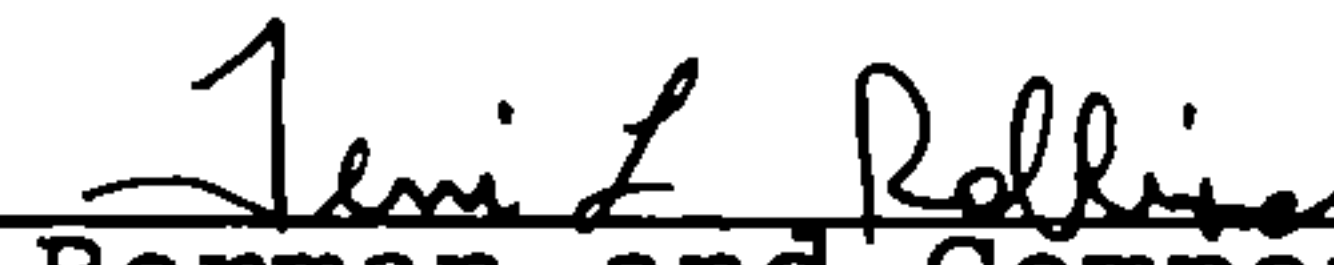
- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

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

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

Please Sign Here:  11/13/06 Richard Berman, Pres, Exec Dir

Signature of officer: _____ Date: 11/13/06 Type or print name and title: Richard Berman, Pres, Exec Dir

Paid Preparer's Use Only: Preparer's signature:  Date: 11/13/06 Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: Berman and Company, 1775 Pennsylvania Ave. N.W., Suite 1200, Washington, DC 20006

EIN: _____ Phone no.: (202) 463-7100

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

2005

Name of the organization The Center for Consumer Freedom	Employer identification number 26 0006579
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

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

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

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

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
Berman and Company 1775 Penn. Ave. NW, #1200, Washington, DC 20006	Management Serv.	1623186.
1-2-1 Interactive Media Inc. 25 Whitlock Place, Suite 201, Marietta, GA 30064	Media Brokerage	752220.
WP Company, LLC P.O. Box A-200, Washington, DC 20071-7100	Advertising	145501.
The New York Times 229 West 43rd St., 8th Floor, New York, NY 10036	Advertising	136750.
Los Angeles Times Communications 202 W. First St., Los Angeles, CA 90012	Advertising	85463.
Total number of other contractors receiving over \$50,000 for other services ▶	8	

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 ► \$ <u>0</u> . \$ <u>0</u> . (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.		X
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?		X
b Lending of money or other extension of credit?	X	
c Furnishing of goods, services, or facilities?	X	
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b Do you have a section 403(b) annuity plan for your employees?		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 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)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 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 6 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	4316398.	2384317.	2710566.		9411281.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	8250.	5303.	7432.		20985.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	18320.	7865.	See Statement 17 1205.		27390.
23 Total of lines 15 through 22	4342968.	2397485.	2719203.	0.	9459656.
24 Line 23 minus line 17	4342968.	2397485.	2719203.		9459656.
25 Enter 1% of line 23	43430.	23975.	27192.		
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 189193.
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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 2945091.
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 9459656.
d Add: Amounts from column (e) for lines: 18 20985. 19 2945091.					26d 2993466.
22 27390. 26b					26e 6466190.
e Public support (line 26c minus line 26d total)					26f 68.3554%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year. N/A					
(2004) (2003) (2002) (2001)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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 7 of the instructions.)

N/A

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

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
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?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement)			
<hr/> <hr/> <hr/>			
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.)			
<hr/> <hr/> <hr/>			
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.)			
<hr/> <hr/> <hr/>			
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?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

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

(To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)		0.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		0.
38	Total lobbying expenditures (add lines 36 and 37)		0.
39	Other exempt purpose expenditures		3818769.
40	Total exempt purpose expenditures (add lines 38 and 39)		3818769.
41	Lobbying nontaxable amount Enter the amount from the following table -		
	If the amount on line 40 is -		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is -		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
41			340938.
42	Grassroots nontaxable amount (enter 25% of line 41)		85235.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36		0.
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38		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 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount	340938.	312323.	287626.		940887.
46 Lobbying ceiling amount (150% of line 45(e))					1411331.
47 Total lobbying expenditures	0.	0.	47.		47.
48 Grassroots nontaxable amount	85235.	78081.	71907.		235223.
49 Grassroots ceiling amount (150% of line 48(e))					352835.
50 Grassroots lobbying expenditures	0.	0.	0.		0.

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.)

N/A

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

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

2005 DEPRECIATION AND AMORTIZATION REPORT
Form 990 Page 2

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	Machinery & Equipment Dell Dimension Series 1L Computer/Monitor	020102200DB	5.00	17	662.	199.	463.	330.	463.	330.		53.
2	(D)Office Equipment	020102200DB	7.00	17	463.	139.	324.	182.	324.	182.		20.
3	Extra RAM for Server	020102200DB	5.00	17	353.	106.	247.	176.	247.	176.		28.
10	Security Equipment	030204200DB	7.00	17	7208.	3604.	3604.	515.	3604.	515.		883.
11	Research Equipment	070704200DB	7.00	17	2457.	1229.	1228.	175.	1228.	175.		301.
12	(D)Research Equipment	092604200DB	7.00	17	553.	277.	276.	39.	276.	39.		34.
13	(D)Research Equipment	092604200DB	7.00	17	1226.	613.	613.	88.	613.	88.		75.
14	(D)Research Equipment	092604200DB	7.00	17	703.	352.	351.	50.	351.	50.		43.
15	Research Equipment	110104200DB	7.00	17	1000.	500.	500.	71.	500.	71.		123.
16	Research Equipment	122304200DB	7.00	17	475.	238.	237.	34.	237.	34.		58.
32	Lighting Equipment	061405200DB	7.00	19C	818.		818.		818.			117.
33	Projector Commercial Production	080405200DB	7.00	19C	1875.		1875.		1875.			268.
34	Equipment Server Tape Backup System	090405200DB	7.00	19C	9250.		9250.		9250.			1321.
35	* 990 Page 2 Total Machinery & Equipment	110905200DB	5.00	19B	753.		753.		753.			151.
6	Program Services 5.0 Pro Win Server Software	020102SL	3.00	16	27796.	7257.	20539.	1660.	20539.	1660.	0.	3475.
					1146.		1146.		1146.			32.

2005 DEPRECIATION AND AMORTIZATION REPORT
Form 990 Page 2

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
7	Web-based Bowling Game	032702SL		3.00	16	33897.			33897.	31072.		2825.
8	High Security Firewall	1122203SL		3.00	16	852.		426.	426.	154.		142.
9	Upgrade Software for Web Server	121503SL		3.00	16	1310.		655.	655.	236.		218.
36	Web-based Madlib Game	082405SL		3.00	16	12400.			12400.			1722.
37	Website Email Software Story Creation	101205SL		3.00	16	1700.			1700.			142.
38	Redevelopment Software	101205SL		3.00	16	1200.			1200.			100.
	* 990 Page 2 Total Program Services					52505.		1081.	51424.	32576.	0.	5181.
	Management and General											
4	Organization Costs	043002248		60M	43	803.			803.	429.		161.
	* 990 Page 2 Total Management and General					803.		0.	803.	429.	0.	161.
	* Grand Total 990 Page 2 Depr & Amort					81104.		8338.	72766.	34665.	0.	8817.

Footnotes

Statement 1

Form 990, Page 1, Item G - Websites include the following:
consumerfreedom.com, activistcash.com, cspiscam.com, animal-
scam.com, fishscam.com, obesitymyths.com, physicianscam.com
petakillsanimals.com

Form 990, Part V - Berman and Company performs management
services for The Center for Consumer Freedom. The services
performed include research, communications and general
and administrative services.

Form 990, Part VI - No organizations listed in Part V-A,
Line 75c are related through > 50% of common Directors or
Officers. For this reason, Part VI, Line 80a has been
answered as "No".

Form 990, Schedule A, Part VI, Lines 45-50, Columns C and D-
The Center for Consumer Freedom was incorporated in 2002.
It made its first Section 501(h) election in the tax year
ended December 31, 2003. The first election was not revoked
before the start of the organization's tax year that began
in 2005.

Form 990 Gain (Loss) From Sale of Other Assets Statement 2

Description	Date Acquired	Date Sold	Method Acquired
Research Equipment	Various	01/10/05	PURCHASED

Name of Buyer	Gross Sales Price	Cost or Other Basis	Expense of Sale	Deprec	Net Gain or (Loss)
DS Investigative Services	911.	2482.	0.	1571.	0.

Description	Date Acquired	Date Sold	Method Acquired
Office Equipment	02/01/02	02/01/05	PURCHASED

Name of Buyer	Gross Sales Price	Cost or Other Basis	Expense of Sale	Deprec	Net Gain or (Loss)
N/A - Scrapped	0.	463.	0.	341.	<122.>
To Fm 990, Part I, ln 8	911.	2945.	0.	1912.	<122.>

Form 990 Other Expenses Statement 3

Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Media and Message Promotion	2711856.	2554823.		157033.
Marketing	287220.			287220.
Issue Research	464099.	464099.		
Other Professional Services	14881.	10256.		4625.
Casual Labor	4618.	4123.		495.
Merchant Fees on Website				
Contributions	755.	<63.>		818.
Computer Data Base Subscription Service	83839.	82803.		1036.
Photocopy and Facsimile	31084.	22846.		8238.
Taxes, Licenses and Fees	9516.	8656.		860.
Directors' Insurance	2540.		2540.	

The Center for Consumer Freedom

26-0006579

Miscellaneous	85.	40.		45.
Payroll Service	444.		222.	222.
Off-site Records				
Storage	1230.		1230.	
Expensed Assets	1117.	1117.		
Total to Fm 990, ln 43	<u>3613284.</u>	<u>3148700.</u>	<u>3992.</u>	<u>460592.</u>

<u>Name of Officer, etc.</u>	<u>Compensation</u>	<u>Employee Ben. Plans</u>	<u>Expense Accounts</u>	<u>Totals</u>
David Browne	500.		59334.	59834.
A. Program Services			59334.	59334.
B. Management and General	500.			500.
C. Fundraising				
Total Program Services				59334.
Total Management and General				10500.
Total Fundraising				9000.
Total Officer, etc., Compensation included on Parts V-A and V-B				<u>78834.</u>

Form 990 Statement of Program Service Accomplishments Statement 5

Description of Program Service One

Placed 3 educational advertisements in national magazines and 12 educational advertisements in newspapers across the country. Placed 4 regular and 3 mobile billboard advertisements in major metropolitan areas nationally. Ran 3 educational television commercials nationally and 3 radio advertisements in the New York City metropolitan area. Distributed 94 press releases, 34 opinion editorials and 86 letters to the editor to local, regional and national news outlets. CCF spokespersons and/or materials were featured on 62 television news programs and 103 radio shows. Held one educational meeting.

	Grants	Expenses
To Form 990, Part III, line a		2192314.

Form 990 Depreciation of Assets Not Held for Investment Statement 6

Description	Cost or Other Basis	Accumulated Depreciation	Book Value
Dell Dimension Series L Computer/Monitor	662.	582.	80.
Extra RAM for Server	353.	310.	43.
5.0 Pro Win Server Software	1146.	1146.	0.
Web-based Bowling Game	33897.	33897.	0.
High Security Firewall	852.	722.	130.
Upgrade Software for Web Server	1310.	1109.	201.
Security Equipment	7208.	5002.	2206.
Research Equipment	2457.	1705.	752.
Research Equipment	1000.	694.	306.
Research Equipment	475.	330.	145.
Lighting Equipment	818.	117.	701.
Projector	1875.	268.	1607.
Commercial Production Equipment	9250.	1321.	7929.
Server Tape Backup System	753.	151.	602.
Web-based Madlib Game	12400.	1722.	10678.
Website Email Software	1700.	142.	1558.
Story Creation Redevelopment Software	1200.	100.	1100.
Total to Form 990, Part IV, ln 57	77356.	49318.	28038.

Form 990	Other Assets	Statement	7
Description		Amount	
Expense Reimbursements Due From Berman and Company		26501.	
Organization Costs		213.	
Refunds Due From Vendors		4275.	
State Refund Receivable		0.	
Total to Form 990, Part IV, line 58, Column B		30989.	

Form 990	Other Liabilities	Statement	8
Description		Amount	
Deferred Expense Reimbursement		296000.	
Total to Form 990, Part IV, line 65, Column B		296000.	

Form 990	Other Expenses Not Included on Form 990	Statement	9
Description		Amount	
Prior Year Difference in Depreciation Taken in the Current Year		3666.	
Loss on Asset Disposal		122.	
Total to Form 990, Part IV-B		3788.	

Form 990	Explanation of Relationship Part V-A, Line 75b	Statement 10
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<u>Individual's Name</u>	<u>Title or Role</u>
Richard Berman	Executive Director and President

<u>Individual's Name</u>	<u>Title or Role</u>
Berman and Company	Management Company

Explanation of Relationship
Richard Berman is the Sole Owner of Berman and Company.

<u>Individual's Name</u>	<u>Title or Role</u>
David Browne	Director

<u>Individual's Name</u>	<u>Title or Role</u>
David Browne and Associates	Video and Advertising Production

Explanation of Relationship
David Browne is a Sole Proprietor doing business as David Browne and Assoc.

<u>Individual's Name</u>	<u>Title or Role</u>
John Doyle	Secretary/Treasurer

<u>Individual's Name</u>	<u>Title or Role</u>
Berman and Company, Inc. (BAC)	Management Company

Explanation of Relationship
John Doyle is an operational Vice President of BAC.

Form 990

Part V-A Officer Compensation from
Related Organizations

Statement 11

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Berman and Company	760874.	109742.	0.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
Employment Policies Institute Foundation (EPIF)	52-1902264

Relationship Between Organizations

Employment Policies Institute Foundation is managed by Berman and Company.

Compensation Description

EPIF is an IRC Sec. 501(c)(3) organization with common Board members - 1) Richard Berman is Exec. Dir. of EPIF and The Center for Consumer Freedom (CCF), and Pres. of EPIF, CCF and American Beverage Institute (ABI), and 2) John Doyle is Dir. of CCF and Exec. Dir. of ABI. Accrual basis EPIF payments are listed above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Berman and Company	1149852.	9344.	0.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
American Beverage Institute (ABI)	52-1730954

Relationship Between Organizations

American Beverage Institute is managed by Berman and Company.

Compensation Description

ABI is an IRC Sec. 501(c)(6) organization with common Board members - 1) Richard Berman is Exec. Director of EPIF and CCF, and Pres. of CCF, EPIF and ABI; and 2) John Doyle is Exec. Director of ABI and Operational VP of Berman and Co. Cash basis ABI payments are listed above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Richard Berman	5000.	0.	0.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
Employment Policies Institute Foundation (EPIF)	52-1902264

Relationship Between Organizations

EPIF is managed by Berman and Company.

Compensation Description

Richard Berman is the sole owner and Pres. of the mgmt. company, BAC. He is also the Exec. Dir. of CCF and EPIF and the Pres. of CCF, EPIF and ABI. Per IRS Ann. 2001-33, all the personal compensation received from BAC by Richard Berman is included in the compensation information reported for BAC in this statement and on Form 990, Part V-A.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Berman and Company	2383.	3843.	0.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
FirstJobs Institute (FJI)	42-1592180

Relationship Between Organizations

FJI is managed by Berman and Company.

Compensation Description

FJI is an IRC Sec. 501(c)(6) organization with a common Board member and officer - 1)Richard Berman is the Pres. of both BAC and FJI, and 2) James Bowers is Secretary/Treasurer of FJI and an Operational VP of BAC. Cash basis FJI payments are listed above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Berman and Company	1177.	2843.	0.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
Family Coalition (FC)	52-2298172

Relationship Between Organizations
FC is managed by Berman and Company.

Compensation Description

FC is an IRC Sec. 501(c)(6) organization with a common Board member and officer - 1) Richard Berman is Pres. of both Berman and Co. and FC, and 2) James Bowers is Secretary/Treasurer of FC and an Operational VP of Berman and Co. Cash basis FC payments are listed above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
David Browne			

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
David Browne and Associates (DBA)	

Relationship Between Organizations
Related orgs. purchase video/ad prod. services from David Browne and Assoc.

Compensation Description

David Browne is a Sole Proprietor offering video/ad production srvcs to CCF, EPIF,ABI, FJI and BAC. For identity protection, his soc. sec. number will not be shown here. Per IRS Ann. 2001-33, all the personal compensation received from DBA by David Browne is included in the comp. info. reported for DBA in this stmt. and on Form 990, Part V-A.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
David Browne (and Associates)	0.	0.	21947.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
Employment Policies Institute Foundation (EPIF)	52-1902264

Relationship Between Organizations

EPIF hired David Browne and Assoc. to produce videos/ads.

Compensation Description

David Browne and Associates produced video and ads for EPIF on a near-cost basis. 2005 accrual-basis payments are shown above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
David Browne (and Associates)	0.	0.	672.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
American Beverage Institute (ABI)	52-1730954

Relationship Between Organizations

ABI hired David Browne and Assoc. to produce videos/ads.

Compensation Description

David Browne and Associates produced video and ads for ABI on a near-cost basis. 2005 accrual-basis payments are shown above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
David Browne (and Associates)	0.	0.	4122.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
FirstJobs Institute (FJI)	42-1592180

Relationship Between Organizations

FJI hired David Browne and Assoc. to produce videos/ads.

Compensation Description

David Browne and Associates produced video and ads for FJI on a near-cost basis. 2005 accrual-basis payments are shown above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
David Browne (and Associates)	0.	0.	402.

<u>Name of Related Organization</u>	<u>Employer ID Number</u>
Berman and Company (BAC)	52-1536666

Relationship Between Organizations

BAC hired David Browne and Assoc. to produce videos/ads.

Compensation Description

David Browne and Associates produced video and ads for BAC on a near-cost basis. BAC inadvertently overpaid David Browne and Associates for 2004 work and was refunded \$6,275 in 2005 for this error. 2005 accrual-basis payments are shown above.

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
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John Doyle

Name of Related Organization

Employer ID Number

Berman and Company (BAC)

52-1536666

Relationship Between Organizations

BAC is the management company for CCF.

Compensation Description

John Doyle is Sec./Treas. of CCF, Exec. Dir. of ABI and an operational VP of the mgmt. company, BAC. Per IRS Ann. 2001-33, all the personal compensation received from BAC by John Doyle is included in the compensation information reported for BAC in this statement and on Form 990, Part V-A.

Form 990	List of States Receiving Copy of Return Part VI, Line 90	Statement 12
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States

AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

Form 990	Part VIII - Relationship of Activities to Accomplishment of Exempt Purposes	Statement 13
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<u>Line</u>	<u>Explanation of Relationship of Activities</u>
93a	Expense reimbursement income is a by-product of the organization's goal of informing the public about research on food, beverage and lifestyle issues. Many organizations wished to assist in this regard; therefore, they reimbursed travel expenses for The Center for Consumer Freedom spokespersons to travel to several national cities to speak to their organizations about The Center's mission.
93b	Honorarium speaking fees are also a by-product of the organization's goal of informing the public about research on food, beverage and lifestyle issues. Several organizations wished to assist in this regard to demonstrate their appreciation for The Center's purpose.
93c	The sale of research reports on a near-cost basis furthers the organization's purpose of informing the public about research on food, beverage and lifestyle issues.
93d	Opinion editorial income is a by-product of informing the public about

- research on food, beverage and lifestyle issues.
- 103c Fees for dubbing research information for news broadcast were helpful in reducing the cost to the organization to place its informational research results in the media.
- 103e Advertising Reprint Permission Fee income is the result of effective previous advertisements disseminating the educational message to the general public.

Schedule A	Explanation of Transactions Part III, Line 2b	Statement 14
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Berman and Company was inadvertently repaid \$26,501 in expense reimbursements made in error. The Center for Consumer Freedom was repaid immediately upon its discovery in 2006.

Schedule A	Explanation of Transactions Part III, Line 2c	Statement 15
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The Center for Consumer Freedom shares office space with Berman and Company on a cost passthrough basis.

Schedule A	Explanation of Transactions Part III, Line 2d	Statement 16
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In addition to compensation amounts provided on Part V-A of Form 990, the following expense reimbursements were paid: Berman and Company (Mgmt. Co.) - \$121,757, Richard Berman (Exec. Dir.) - \$151,202 and James Bowers (Mgmt. Co. Operational VP) - \$10,569.

Schedule A	Other Income			Statement 17
Description	2004 Amount	2003 Amount	2002 Amount	2001 Amount
Speech Honorarium	5250.	0.	500.	0.
Published Article Fee	0.	0.	400.	0.
Sale of Video	0.	0.	20.	0.
Expense Reimbursement Income	12707.	7865.	0.	0.
Sale of Merchandise	0.	0.	285.	0.
Sale of Informational Pamphlets	288.	0.	0.	0.
Opinion Editorial Income	75.	0.	0.	0.
Total to Schedule A, line 22	18320.	7865.	1205.	0.

Depreciation and Amortization 990
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return The Center for Consumer Freedom	Business or activity to which this form relates Form 990 Page 2	Identifying number 26-0006579
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Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	105000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	420000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2004 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2006. Add lines 9 and 10, less line 12	▶ 13	

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

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

14 Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	5181.

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

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2005	17	1618.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B - Assets Placed in Service During 2005 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		753.	5 Yrs.	HY	200DB	151.
c 7-year property		11943.	7 Yrs.	HY	200DB	1706.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (see instructions)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	8656.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No		24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No						
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

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

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

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

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year	
42 Amortization of costs that begins during your 2005 tax year:						
43 Amortization of costs that began before your 2005 tax year					43	161.
44 Total. Add amounts in column (f). See the instructions for where to report					44	161.

If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box

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

If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy. Table with fields: Name of Exempt Organization (The Center for Consumer Freedom), Employer identification number (26-0006579), Address (1775 Pennsylvania Ave. N.W., No. 1200, Washington, DC 20006).

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

- Form 990 (checked), 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.

- The books are in the care of The Bookkeeper, Telephone No (202) 463-7112, FAX No (202) 463-7105. 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).

I request an additional 3-month extension of time until November 15, 2006. For calendar year 2005, or other tax year beginning and ending. 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 information is yet required in order to produce a complete and accurate tax return.

8a 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. 8b 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. 8c 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.

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: Jeni L. Robles, Title: C.P.A., Date: 8/2/06

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 elections 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 a 10-day grace period. We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested. Other

Director: By: Date:

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.

Table with fields: Name, Number and street (include suite, room, or apt no.) or a P.Q. box number, City or town, province or state, and country (including postal or ZIP code). Includes stamp: EXTENSION APPROVED, AUG 2 5 2006, FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN.

523832 05-01-05

Application for Extension of Time To File an Exempt Organization Return

▶ 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
 - 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)

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.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization The Center for Consumer Freedom	Employer identification number 26-0006579
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. 1775 Pennsylvania Ave. N.W., No. 1200	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Washington, DC 20006	

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

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **The Bookkeeper**
 Telephone No. ▶ **(202) 463-7112** FAX No. ▶ **(202) 463-7105**
- 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 **Form 990-T corporation**) extension of time until **August 15, 2006** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2005** or
 ▶ tax year beginning _____, and ending _____

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 \$ _____

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 \$ _____

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 \$ **N/A**

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.