

Return of Organization Exempt From Income Tax

2007

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

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

A For the 2007 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization The Center for Consumer Freedom		D Employer identification number 26-0006579
		Number and street (or P O box if mail is not delivered to street address) Room/suite 1090 Vermont Ave. N.W. 800		E Telephone number 202-463-7112
		City or town, state or country, and ZIP + 4 Washington, DC 20005		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

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

H and I are not applicable to section 527 organizations

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

H(b) If "Yes," enter number of affiliates N/A

H(c) Are all affiliates included? N/A Yes No (If "No," attach a list)

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

I Group Exemption Number N/A

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

G Website: See Attached Statement 1

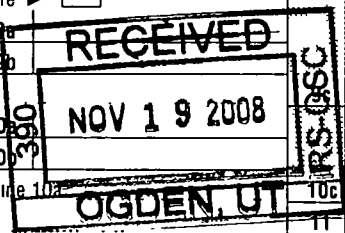
J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 2494564.

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

Revenue	1	Contributions, gifts, grants, and similar amounts received			
	a	Contributions to donor advised funds	1a		
	b	Direct public support (not included on line 1a)	1b	2474520.	
	c	Indirect public support (not included on line 1a)	1c		
	d	Government contributions (grants) (not included on line 1a)	1d		
	e	Total (add lines 1a through 1d) (cash \$ 2474520. noncash \$)	1e	2474520.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	15396.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	4648.	
	5	Dividends and interest from securities	5		
	6a	Gross rents	6a		
	b	Less rental expenses	6b		
c	Net rental income or (loss) Subtract line 6b from line 6a	6c			
7	Other investment income (describe)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b	1449.		
d	Net gain or (loss) Combine line 8c, columns (A) and (B)	8c	<1449.>		
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	9a			
a	Gross revenue (not including \$ of contributions reported on line 1b)	9b			
b	Less direct expenses other than fundraising expenses				
c	Net income or (loss) from special events Subtract line 9b from line 9a				
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c			
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	2493115.		
Expenses	13	Program services (from line 44, column (B))	13	1512340.	
	14	Management and general (from line 44, column (C))	14	72602.	
	15	Fundraising (from line 44, column (D))	15	366811.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses. Add lines 16 and 44, column (A)	17	1951753.	
Net Assets	18	Excess or (deficit) for the year Subtract line 17 from line 12	18	541362.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1603802.	
	20	Other changes in net assets or fund balances (attach explanation)	20	0.	
	21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	21	2145164.	



SCANNED DEC 16 2008

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A	19500.	0.	10500.	9000.
b Compensation of former officers, directors, key employees, etc listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c				
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes	1638.		819.	819.
30 Professional fundraising fees				
31 Accounting fees	46731.		46731.	
32 Legal fees	12060.		10899.	1161.
33 Supplies	2699.	1061.		1638.
34 Telephone	523.	493.		30.
35 Postage and shipping	8853.	7263.		1590.
36 Occupancy				
37 Equipment rental and maintenance				
38 Printing and publications	34133.	18917.		15216.
39 Travel	27260.	7639.		19621.
40 Conferences, conventions, and meetings	2273.			2273.
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	7397.	7345.	52.	
43 Other expenses not covered above (itemize):				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g See Statement 3	1788686.	1469622.	3601.	315463.
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	1951753.	1512340.	72602.	366811.

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A , (ii) the amount allocated to Program services \$ N/A , (iii) the amount allocated to Management and general \$ N/A , and (iv) the amount allocated to Fundraising \$ N/A

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

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

What is the organization's primary exempt purpose? 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 4 	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	887842.
b See Statement 5 	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	380938.
c Maintained 9 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"/>	243560.
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)	1512340.

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	53531.	127245.	
	46 Savings and temporary cash investments	1188693.	2222697.	
	47 a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48 a Pledges receivable	48a	29000.	
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees Statement 6	319.	50a	814.
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	2857.	53	
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b		
55 a Investments - land, buildings, and equipment: basis	55a			
b Less: accumulated depreciation	55b	55c		
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a	70985.		
b Less: accumulated depreciation Stmt 7	57b	61392.		
58 Other assets, including program-related investments (describe <input type="checkbox"/> See Statement 8)	52.	58	35000.	
59 Total assets (must equal line 74). Add lines 45 through 58	2275839.	59	2424349.	
Liabilities	60 Accounts payable and accrued expenses	609079.	60	258262.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees Stmt 9	62958.	63	20923.
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/>)	0.	65	0.
66 Total liabilities. Add lines 60 through 65	672037.	66	279185.	
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	1603802.	67	2145164.
	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 and column (B) must equal line 21)	1603802.	73	2145164.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	2275839.	74	2424349.	

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	2494564.
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	2494564.
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	<1449.>	
	Add lines d1 and d2		d	<1449.>
e	Total revenue (Part I, line 12). Add lines c and d		e	2493115.

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

a	Total expenses and losses per audited financial statements		a	1953150.
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>LOSS on Asset Disposal</u>	b4	1449.	
	Add lines b1 through b4		b	1449.
c	Subtract line b from line a		c	1951701.
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	52.	
	Add lines d1 and d2		d	52.
e	Total expenses (Part I, line 17). Add lines c and d		e	1951753.

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 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Management Company	0.00	1562280.	0. 0.
Richard Berman 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Pres., Exec. Dir., Dir.	21.00	18000.	0. 0.
Derrek Hofrichter 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Sec., Treas., Director	1.00	0.	0. 0.
Daniel Mindus 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Director	1.00	500.	0. 0.
David Browne 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Director	1.00	500.	0. 4363.
Lane Cardwell 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Director	1.00	500.	0. 0.
Joe Kefauver 1090 Vermont Ave. NW, Ste. 800 Washington, DC 20005	Director	1.00	0.	0. 0.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) Yes No

<p>75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 6</p> <p>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</p> <p>c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization " See Statement 11 If "Yes," attach a statement that includes the information described in the instructions.</p> <p>d Does the organization have a written conflict of interest policy?</p>	75b	X	
	75c	X	
	75d	X	

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

(A) Name and address None	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information (See the instructions.) Yes No

<p>76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change</p> <p>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.</p> <p>78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a tax return on Form 990-T for this year? N/A</p> <p>79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement</p> <p>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? b If "Yes," enter the name of the organization N/A _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt</p> <p>81 a Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0.</p> <p>b Did the organization file Form 1120-POL for this year?</p>	76	X	
	77	X	
	78a	X	
	78b		
	79	X	
	80a	X	
	81a		
	81b	X	

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		
	N/A		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	N/A		
85 a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?		
	N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	N/A		
c	Dues, assessments, and similar amounts from members		
	85c N/A		
d	Section 162(e) lobbying and political expenditures		
	85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	N/A		
85g			
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		
85h			
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12		
	86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b N/A		
87	501(c)(12) organizations Enter: a Gross income from members or shareholders		
	87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	87b N/A		
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
88b			
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 0., section 4912 0., section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
89b			
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
	0.		
d	Enter. Amount of tax on line 89c, above, reimbursed by the organization		
	0.		
89e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
89f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
89g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
90 a	List the states with which a copy of this return is filed See Statement 12		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	1
91 a	The books are in care of The Bookkeeper Telephone no (202) 463-7112 Located at 1090 Vermont Ave. NW, #800, Washington, DC ZIP + 4 20005		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a Expense Reimb. Income					15389.
b Insurance Settlement					7.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	4648.	
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			18	<1449.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		3199.	15396.
105 Total (add line 104, columns (B), (D), and (E))					18595.

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

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

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

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

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

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
Totals						

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

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
Totals						

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

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

Please Sign Here

Signature of officer: *[Signature]* Date: 11/10/08

Richard Berman, Pres, Exec Dir, Dir
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: 11/10/08

Firm's name (or yours if self-employed), address, and ZIP + 4: Berman and Company, 1090 Vermont Ave. N.W., Suite 800, Washington, DC 20005

Check if self-employed:

Preparer's SSN or PTIN (See Gen. Inst. X):

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

2007

Name of the organization

The Center for Consumer Freedom

Employer identification number

26 0006579

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 1090 Vermont Ave. NW, #800, Washington, DC 20005	Management Serv.	1562280.
The New York Times 620 8th Ave., 22nd Floor, New York, NY 10018	Advertising	107575.
U.S. News and World Report 125 Theodore Conrad Drive, Jersey City, NJ 07305	Advertising	105000.
1-2-1 Interactive Media Inc. 25 Whitlock Place, Suite 201, Marietta, GA 30064	Media Brokerage	98435.
WMI (New Yorker) PO Box 15323, Newark, NJ 07191-5323	Advertising	59000.
Total number of other contractors receiving over \$50,000 for other services	0	

Part III Statements About Activities (See page 2 of the instructions)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ <u>20.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) VI-A, line 38b	X	
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit? See Statement 14	X	
c	Furnishing of goods, services, or facilities? See Statement 15	X	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Statement 16	X	
e	Transfer of any part of its income or assets?		X
3	Did the organization make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)		X
b	Did the organization have a section 403(b) annuity plan for its employees?		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966? N/A		
c	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
d	Enter the total number of donor advised funds owned at the end of the tax year ▶		0
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		0.
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year ▶		0.

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

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

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

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

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

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

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	2209004.	3431952.	4316398.	2384317.	12341671.
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, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	8220.	9050.	8250.	5303.	30823.
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.	30496.	507892.	18320.	7865.	564573.
23 Total of lines 15 through 22	2247720.	3948894.	4342968.	2397485.	12937067.
24 Line 23 minus line 17	2247720.	3948894.	4342968.	2397485.	12937067.
25 Enter 1% of line 23	22477.	39489.	43430.	23975.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 258741.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 3312590.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 12937067.
d Add Amounts from column (e) for lines 18 30823. 19 19 22 564573. 26b 3312590.					26d 3907986.
e Public support (line 26c minus line 26d total)					26e 9029081.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 69.7923%
27 Organizations described on line 12. a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year N/A					
(2006) (2005) (2004) (2003)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year N/A					
(2006) (2005) (2004) (2003)					
c Add Amounts from column (e) for lines 15 16 17 20 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 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15					

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

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? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	
<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? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	
<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? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions)

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

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		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	0.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	20.
38	Total lobbying expenditures (add lines 36 and 37)	38	20.
39	Other exempt purpose expenditures	39	1951733.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	1951753.
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	247588.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	61897.
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0.
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0.

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45	247588.	314553.	340938.	312323.	1215402.
46					1823103.
47	20.	0.	0.	0.	20.
48	61897.	78638.	85235.	78081.	303851.
49					455777.
50	0.	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 14 of the instructions)

N/A

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

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

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

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

- a Transfers from the reporting organization to a noncharitable exempt organization of
 - (i) Cash
 - (ii) Other assets
- b Other transactions
 - (i) Sales or exchanges of assets with a noncharitable exempt organization
 - (ii) Purchases of assets from a noncharitable exempt organization
 - (iii) Rental of facilities, equipment, or other assets
 - (iv) Reimbursement arrangements
 - (v) Loans or loan guarantees
 - (vi) Performance of services or membership or fundraising solicitations
- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

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

N/A

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

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

b If "Yes," complete the following schedule N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Schedule A	Other Income			Statement 17
Description	2006 Amount	2005 Amount	2004 Amount	2003 Amount
Speech Honorarium	1000.	4200.	5250.	0.
Expense Reimbursement Income	29396.	502447.	12707.	7865.
Sale of Informational Pamphlets	0.	745.	288.	0.
Opinion Editorial Income	100.	100.	75.	0.
Dubbing Fee	0.	250.	0.	0.
Advertising Reprint Permission Fee	0.	150.	0.	0.
Total to Schedule A, line 22	30496.	507892.	18320.	7865.

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	Current Year Deduction
	Machinery & Equipment (D)Dell Dimension 1Series L Computer/Monit	020102200DB	5.00	17	662.			199.	463.	436.		27.
	(D)Extra RAM for 3Server	020102200DB	5.00	17	353.			106.	247.	233.		14.
10	Security Equipment	030204200DB	7.00	17	7208.			3604.	3604.	2028.		450.
11	Research Equipment	070704200DB	7.00	17	2457.			1229.	1228.	691.		153.
15	Research Equipment	110104200DB	7.00	17	1000.			500.	500.	281.		63.
16	Research Equipment	122304200DB	7.00	17	475.			238.	237.	133.		30.
32	Lighting Equipment	061405200DB	7.00	17	818.				818.	317.		143.
33	Projector Commercial Production	080405200DB	7.00	17	1875.				1875.	727.		328.
34	Equipment Server Tape Backup	090405200DB	7.00	17	9250.				9250.	3586.		1618.
35	System * 990 Page 2 Total	110905200DB	5.00	17	753.				753.	392.		144.
	Machinery & Equipment				24851.			5876.	18975.	8824.	0.	2970.
	Program Services (D)5.0 Pro Win Server	020102SL	3.00	16	1146.				1146.	1146.		0.
6	Software											
7	Web-based Bowling Game	032702SL	3.00	16	33897.				33897.	33897.		0.
8	High Security Firewall (D)Upgrade Software	122203SL	3.00	16	852.			426.	426.	426.		0.
9	for Web Server	121503SL	3.00	16	1310.			655.	655.	655.		0.
36	Web-based Madlib Game	082405SL	3.00	16	12400.				12400.	5855.		4133.

728102 04-27-07
 (D) - Asset disposed
 * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone
 21

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	Current Year Deduction
37	(D)Website Email Software	101205SL		3.00	16	1700.			1700.	709.		142.
38	(D)Story Creation Redevelopment Software	101205SL		3.00	16	1200.			1200.	500.		100.
	* 990 Page 2 Total Program Services					52505.		1081.	51424.	43188.	0.	4375.
	Management and General											
40	Organization Costs	043002248		60M	43	803.			803.	751.		52.
	* 990 Page 2 Total Management and General					803.		0.	803.	751.	0.	52.
	* Grand Total 990 Page 2 Depr & Amort					78159.		6957.	71202.	52763.	0.	7397.

728102 04-27-07 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Footnotes

Statement 1

Form 990, Page 1, Item G - Websites include the following:
consumerfreedom.com, activistcash.com, cspiscam.com, animal-
scam.com, mercuryfacts.org, obesitymyths.com, physicianscam.
com, petakillsanimals.com, trans-fatfacts.com, spicysprouts.
com, holyveal.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 Gain (Loss) From Sale of Other Assets Statement 2

Description	Date Acquired	Date Sold	Method Acquired
Computer Equipment	02/01/02	03/12/07	PURCHASED

Name of Buyer	Gross Sales Price	Cost or Other Basis	Expense of Sale	Deprec	Net Gain or (Loss)
N/A - Scrapped	0.	1015.	0.	1015.	0.

Description	Date Acquired	Date Sold	Method Acquired
Server Software	12/15/03	03/12/07	PURCHASED

Name of Buyer	Gross Sales Price	Cost or Other Basis	Expense of Sale	Deprec	Net Gain or (Loss)
N/A - Scrapped	0.	2456.	0.	2456.	0.

Description	Date Acquired	Date Sold	Method Acquired
Website Software	10/12/05	04/09/07	PURCHASED

Name of Buyer	Gross Sales Price	Cost or Other Basis	Expense of Sale	Deprec	Net Gain or (Loss)
N/A - Scrapped	0.	2900.	0.	1451.	<1449.>
To Form 990, Part I, ln 8		6371.	0.	4922.	<1449.>

Form 990 Other Expenses Statement 3

Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Media and Message Promotion	955378.	955378.		
Marketing	297036.			297036.
Issue Research	374940.	374940.		
Other Professional Services	10434.	3558.		6876.
Merchant Fees on Website Contributions	646.			646.

Computer Data Base				
Subscription Service	115490.	114301.		1189.
Photocopy and Facsimile	21092.	15566.		5526.
Taxes, Licenses and Fees	9213.	5405.		3808.
Directors' Insurance	2600.		2600.	
Miscellaneous	40.	40.		
Payroll Service	765.		383.	382.
Off-site Records Storage	549.		549.	
Expensed Assets	473.	404.	69.	
Dues and Memberships	30.	30.		
Total to Fm 990, ln 43	<u>1788686.</u>	<u>1469622.</u>	<u>3601.</u>	<u>315463.</u>

Form 990

Statement of Program Service Accomplishments

Statement 4

Description of Program Service One

Placed educational advertisements in a national magazine and national newspaper. Ran three educational advertisements in regional newspapers and placed a mobile billboard in two cities. Also ran a series of educational online advertising to encourage the public to visit The Center for Consumer Freedom's websites and to promote its self-produced large-scale report on the effects of environmental and societal changes on obesity.

To Form 990, Part III, line a

Grants

Expenses

887842.

Form 990

Statement of Program Service Accomplishments

Statement 5

Description of Program Service Two

Wrote and sent approximately 20 opinion editorials and 95 letters to the editor which were published. Wrote and sent approximately 35 press releases with related information on issues that affect the debate about obesity and animal rights. Media outreach resulted in 16 radio and 14 television interviews. Spokespersons were quoted in a total of 266 news stories during 2007.

To Form 990, Part III, line b

Grants

Expenses

380938.

Form 990 Receivables Due From Officers, Directors, Trustees Statement 6
 and Other Key Employees - Reported Separately

<u>Borrower's Name and Title</u>			<u>Original Loan Amount</u>	
Richard Berman, President			30.	
<u>Date of Note</u>	<u>Maturity Date</u>	<u>Terms of Repayment</u>	<u>Interest Rate</u>	
08/20/07		Demand	.00%	
<u>Security Provided by Borrower</u>		<u>Purpose of Loan</u>		
N/A		Inadvertent Duplicate Expense Reimbursement		
<u>Description of Consideration</u>			<u>FMV of Consideration</u>	<u>Balance Due</u>
Cash			30.	30.

<u>Borrower's Name and Title</u>			<u>Original Loan Amount</u>	
Berman and Company, Management Co.			319.	
<u>Date of Note</u>	<u>Maturity Date</u>	<u>Terms of Repayment</u>	<u>Interest Rate</u>	
Various		Demand	.00%	
<u>Security Provided by Borrower</u>		<u>Purpose of Loan</u>		
N/A		Inadvertent Duplicate Expense Reimbursement		
<u>Description of Consideration</u>			<u>FMV of Consideration</u>	<u>Balance Due</u>
Cash			784.	784.

Total included on Form 990, Part IV, line 50a, Column B 814.

Form 990	Depreciation of Assets Not Held for Investment		Statement	7
Description	Cost or Other Basis	Accumulated Depreciation	Book Value	
Web-based Bowling Game	33897.	33897.	0.	
High Security Firewall	852.	852.	0.	
Security Equipment	7208.	6082.	1126.	
Research Equipment	2457.	2073.	384.	
Research Equipment	1000.	844.	156.	
Research Equipment	475.	401.	74.	
Lighting Equipment	818.	460.	358.	
Projector	1875.	1055.	820.	
Commercial Production Equipment	9250.	5204.	4046.	
Server Tape Backup System	753.	536.	217.	
Web-based Madlib Game	12400.	9988.	2412.	
Total to Form 990, Part IV, ln 57	70985.	61392.	9593.	

Form 990	Other Assets		Statement	8
Description			Beginning of Year	End of Year
Organization Costs			52.	0.
Refund Due from Vendor			0.	35000.
Total to Form 990, Part IV, line 58			52.	35000.

Form 990 Loans Payable to Officer's, Director's, Etc. Statement 9

<u>Lender's Name and Title</u>			<u>Original Loan Amount</u>
Richard Berman, President			17246.
<u>Date of Note</u>	<u>Maturity Date</u>	<u>Terms of Repayment</u>	<u>Interest Rate</u>
Various		Demand	.00%
<u>Security Provided by Borrower</u>		<u>Purpose of Loan</u>	
N/A		Operating Expense Advance	
<u>Description of Consideration</u>			<u>FMV of Consideration</u> <u>Balance Due</u>
Cash			17246. 17246.

<u>Lender's Name and Title</u>			<u>Original Loan Amount</u>
Berman and Company, Management Co.			3677.
<u>Date of Note</u>	<u>Maturity Date</u>	<u>Terms of Repayment</u>	<u>Interest Rate</u>
Various		Demand	.00%
<u>Security Provided by Borrower</u>		<u>Purpose of Loan</u>	
N/A		Operating Expense Advance	
<u>Description of Consideration</u>			<u>FMV of Consideration</u> <u>Balance Due</u>
Cash			3677. 3677.

<u>Lender's Name and Title</u>			<u>Original Loan Amount</u>	
David Browne and Associates, President			3613.	
<u>Date of Note</u>	<u>Maturity Date</u>	<u>Terms of Repayment</u>	<u>Interest Rate</u>	
Various		Demand	.00%	
<u>Security Provided by Borrower</u>		<u>Purpose of Loan</u>		
N/A		Commercial Production Fees		
<u>Description of Consideration</u>			<u>FMV of Consideration</u>	<u>Balance Due</u>
Cash			3613.	0.
Total to Form 990, Part IV, line 63, Column B				<u>20923.</u>

Form 990

Explanation of Relationship
Part V-A, Line 75b

Statement 10

Individual's Name

Title or Role

Richard Berman

Executive Director and President

Individual's Name

Title or Role

Berman and Company

Management Company

Explanation of Relationship

Richard Berman is the Sole Owner of Berman and Company.

Individual's Name

Title or Role

Derrek Hofrichter

Secretary/Treasurer

Individual's Name

Title or Role

Berman and Company

Management Company

Explanation of Relationship

Derrek Hofrichter is an employee of Berman and Company.

Individual's Name

Title or Role

David Browne

Director

Individual's Name

Title or Role

David Browne and Associates

Sole Proprietor

Explanation of Relationship

David Browne solely-owns a commercial production services business providing services to the organization.

Form 990 Part V-A Officer Compensation from Related Organizations Statement 11

Officer's Name

Berman and Company (BAC)

Name of Related Organization

Employer ID Number

Employment Policies Institute Foundation (EPIF)

52-1902264

Relationship Between Organizations

CCF and EPIF are both managed by BAC and share facilities/employee with BAC

Officer's Name

Berman and Company

Name of Related Organization

Employer ID Number

American Beverage Institute (ABI)

52-1730954

Relationship Between Organizations

CCF and ABI are both managed by BAC and share facilities with BAC.

Officer's Name

Richard Berman

Name of Related Organization

Employer ID Number

Employment Policies Institute Foundation (EPIF)

52-1902264

Relationship Between Organizations

CCF and EPIF are both managed by BAC and share facilities/employee with BAC

Officer's Name

Derrek Hofrichter

Name of Related Organization

Berman and Company (BAC)

Employer ID Number

52-1536666

Relationship Between Organizations

CCF is managed by BAC (D Hofrichter-Asst to Pres)/shares facilities/employee

Officer's Name

Berman and Company

Name of Related Organization

Center for Union Facts (CUF)

Employer ID Number

20-4036946

Relationship Between Organizations

CCF and CUF are both managed by BAC and share facilities/employee with BAC

Officer's Name

Richard Berman

Name of Related Organization

Berman and Company (BAC)

Employer ID Number

52-1536666

Relationship Between Organizations

CCF is managed by BAC (Richard Berman 100% owner)/shares facilities/employee

Officer's Name

Richard Berman

Name of Related Organization

Center for Union Facts (CUF)

Employer ID Number

20-4036946

Relationship Between Organizations

CCF and CUF are both managed by BAC and share facilities/employee with BAC

Officer's Name

Joe Kefauver

Name of Related Organization

Employment Policies Institute Foundation (EPIF)

Employer ID Number

52-1902264

Relationship Between Organizations

CCF & EPIF-both managed by BAC/share facilities. EPIF employs Joe Kefauver.

Officer's Name

Joe Kefauver

Name of Related Organization

Berman and Company (BAC)

Employer ID Number

52-1536666

Relationship Between Organizations

BAC paid Joe Kefauver's company, Edgewater Group, for consulting services.

Officer's Name

David Browne

Name of Related Organization

Berman and Company (BAC)

Employer ID Number

52-1536666

Relationship Between Organizations

BAC paid David Browne & Assoc. for commercial production services.

Officer's Name

David Browne

Name of Related Organization

American Beverage Institute (ABI)

Employer ID Number

52-1730954

Relationship Between Organizations

ABI paid David Browne & Assoc. for commercial production services.

Officer's Name

David Browne

Name of Related Organization

Center for Union Facts (CUF)

Employer ID Number

20-4036946

Relationship Between Organizations

CUF paid David Browne & Assoc. for commercial production services.

Officer's Name

David Browne

Name of Related Organization

Employer ID Number

Employment Policies Institute Foundation (EPIF)

52-1902264

Relationship Between Organizations

EPIF paid David Browne & Assoc. for commercial production services.

Form 990

List of States Receiving Copy of Return
Part VI, Line 90

Statement 12

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, VA, WA, WV, WI, DC

Form 990

Part VIII - Relationship of Activities to
Accomplishment of Exempt Purposes

Statement 13

Line Explanation of Relationship of Activities

- 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 A class action settlement returning a portion of the directors' and officers' liability insurance premiums was received by the organization without direct legal action being taken.

Schedule A	Explanation of Transactions Part III, Line 2b	Statement 14
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Berman and Company and Richard Berman were inadvertently repaid \$784 and \$30, respectively, in expense reimbursements made in error. The Center for Consumer Freedom was repaid immediately upon its discovery in 2008.

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.

David Browne and Associates, owned by Director David Browne, provided commercial production services to The Center for Consumer Freedom.

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 on a cash basis: Berman and Company (Mgmt. Co.) - \$91,522, Richard Berman (Exec. Dir.) - \$127,334 and James Bowers (Mgmt. Co. Operational VP) - \$8,634. Also, Berman and Company received \$15,000 in contributions as agent for The Center for Consumer Freedom, which it promptly transferred over to The Center once the funds had cleared the bank.

Depreciation and Amortization 990
(Including Information on Listed Property)

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

The Center for Consumer Freedom

Form 990 Page 2

Identifying number
26-0006579

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	125000.
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	500000.
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 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12	13	

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

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

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	4375.

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	2970.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

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

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

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

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

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	7345.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

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

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

25 Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use: Table with 9 columns for percentage and cost.

27 Property used 50% or less in a qualified business use: Table with 9 columns for percentage and 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.

Table for Section B with 6 main rows (30-33) and 4 columns (a-f) for vehicle types. Includes rows 34-36 for personal use availability.

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.

Table for Section C with 5 rows (37-41) and 2 columns (Yes/No).

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

Table for Part VI with 6 columns: (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 2007 tax year: Table with 6 columns.

43 Amortization of costs that began before your 2007 tax year 43 52.

44 Total. Add amounts in column (f). See the instructions for where to report 44 52.