

Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

2014

**Open to Public Inspection**

**A For the 2014 calendar year, or tax year beginning**

and ending

**B** Check if applicable

**C Name of organization**

D Employer identification number

<input type="checkbox"/>	Address change
<input type="checkbox"/>	Name change
<input type="checkbox"/>	Initial return
<input type="checkbox"/>	Final return/terminated
<input checked="" type="checkbox"/>	Amended return
<input type="checkbox"/>	Application pending

CONSUMERS' RESEARCH INC

## Doing business as

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

Room/suite

1801 F STREET, NW

City or town, state or province, country, and ZIP or foreign postal code

WASHINGTON, DC 20006

F Name and address of principal officer: **RUSSELL OUTHUSE**

1801 F STREET, NW, SUITE 304, WASHINGTON, DC

22-1500498

E Telephone number

202-898-0542

G Gross receipts \$	995.383.
---------------------	----------

H(a) Is this a group return  
for subordinates? ☐ Yes ☒ No

**H(b)** Are all subordinates included? ☒ Yes ☐ No  
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**J Website:** ► [WWW.CONSUMERSRESEARCH.ORG](http://WWW.CONSUMERSRESEARCH.ORG)

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other 

L Year of formation: 1937 M State of legal domicile: N.J.

## Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <b>CONSUMERS' RESEARCH IS AN INDEPENDENT EDUCATIONAL ORGANIZATION WHOSE MISSION IS TO INCREASE</b>
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) <b>3</b>
	4	Number of independent voting members of the governing body (Part VI, line 1b) <b>2</b>
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a) <b>7</b>
	6	Total number of volunteers (estimate if necessary) <b>0</b>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 <b>0.</b>
	b	Net unrelated business taxable income from Form 990-T, line 34 <b>0.</b>

		Prior Year	Current Year	
Revenue	8 Contributions and grants (Part VIII, line 1h) .....	420,100.	995,000.	
	9 Program service revenue (Part VIII, line 2g) .....	0.	0.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	297.	341.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	0.	42.	
	12 Total revenue. Add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	420,397.	995,383.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	0.	30,000.	
	14 Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	49,883.	217,760.	
	16a Professional fundraising fees (Part IX, column (A), line 11a) .....	0.	0.	
	b Total fundraising expenses (Part IX, column (D), line 12b) .....	0.	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	65,495.	596,308.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 18) .....	115,378.	844,068.	
19 Revenue less expenses. Subtract line 18 from line 12 .....	305,019.	151,315.		
Net Assets or Fund Balances	TPR BRANCH OGDEN		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16) .....	318,706.	488,307.	
	21 Total liabilities (Part X, line 26) .....	13,687.	31,973.	
	22 Net assets or fund balances. Subtract line 21 from line 20 .....	305,019.	456,334.	

## Part II | Signature Block

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.

Sign \_\_\_\_\_ Date 6/25/19  
Here Russell Outhouse  
RUSSELL OUTHOUSE, BOARD OF DIRECTORS MEMBER

Paid Preparer Use Only	Print/Type preparer's name <b>ALIDA A HAMRICK, CPA</b>	Preparer's signature <i>Alida A Hamrick CPA</i>	Date <b>2/5/19</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00682753</b>
	Firm's name ▶ <b>CAMERON, MOBERLY &amp; HAMRICK, PC</b>	Firm's EIN ▶ <b>54-1062809</b>		Phone no. <b>703-207-9200</b>	
	Firm's address ▶ <b>8500 EXECUTIVE PARK AVE, SUITE 412 FAIRFAX, VA 22031</b>				

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

SEE SCHEDULE C FOR ORGANIZATION MISSION STATEMENT COMMITMENT

634 13

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:

CONSUMERS' RESEARCH IS AN INDEPENDENT EDUCATIONAL ORGANIZATION WHOSE MISSION IS TO INCREASE THE KNOWLEDGE AND UNDERSTANDING OF ISSUES, POLICIES, PRODUCTS, AND SERVICES OF CONCERN TO CONSUMERS AND TO PROMOTE THE FREEDOM TO ACT ON THAT KNOWLEDGE AND UNDERSTANDING.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code ) (Expenses \$ 773,897. Including grants of \$ 30,000. ) (Revenue \$ 0. )  
 THE ORGANIZATION PERFORMS RESEARCH, MAINTAINS A WEBSITE, PUBLISHES A MAGAZINE, AND ENGAGES IN PROGRAMS AND INITIATIVES TO SUPPORT CONSUMER INTERESTS, TO INCREASE THE KNOWLEDGE AND UNDERSTANDING OF ISSUES, POLICIES, PRODUCTS, AND SERVICES OF CONCERN TO CONSUMERS, AND TO PROMOTE THE FREEDOM TO ACT ON THAT KNOWLEDGE AND UNDERSTANDING.

4b (Code ) (Expenses \$ Including grants of \$ ) (Revenue \$ )

4c (Code ) (Expenses \$ Including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O)

(Expenses \$ Including grants of \$ ) (Revenue \$ )

4e Total program service expenses 773,897.

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b> <b>X</b>	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<b>2</b> <b>X</b>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	<b>3</b>	<b>X</b>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>4</b>	<b>X</b>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . . .	<b>5</b>	<b>X</b>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I . . . . .	<b>6</b>	<b>X</b>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . .	<b>7</b>	<b>X</b>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<b>8</b>	<b>X</b>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .	<b>9</b>	<b>X</b>
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	<b>10</b>	<b>X</b>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	<b>11a</b>	<b>X</b>
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	<b>11b</b>	<b>X</b>
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	<b>11c</b>	<b>X</b>
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX . . . . .	<b>11d</b>	<b>X</b>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	<b>11e</b>	<b>X</b>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . .	<b>11f</b>	<b>X</b>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .	<b>12a</b>	<b>X</b>
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .	<b>12b</b>	<b>X</b>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b>	<b>X</b>
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	<b>X</b>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b>	<b>X</b>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .	<b>15</b>	<b>X</b>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . . .	<b>16</b>	<b>X</b>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I . . . . .	<b>17</b>	<b>X</b>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	<b>18</b>	<b>X</b>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	<b>19</b>	<b>X</b>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	<b>X</b>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	

Form 990 (2014)

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>21</b> X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>22</b>	X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	<b>23</b>	X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>	
<b>25a</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<b>25a</b> X	
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	<b>25b</b> X	
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	<b>26</b> X	
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<b>28a</b>	X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<b>28b</b>	X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>	X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<b>35b</b>	
<b>36</b> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<b>38</b> X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2014)

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	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)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	<b>Section 501(c)(7) organizations.</b> Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax exempt interest received or accrued during the year		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Form 990 (2014)

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	3													
b Enter the number of voting members included in line 1a, above, who are independent		2												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2											X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?				3										X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				4										X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?				5										X
6 Did the organization have members or stockholders?				6										X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?				7a										X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				7b										X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?				8a		X								
b Each committee with authority to act on behalf of the governing body?				8b		X								
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9										X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b													
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a	X											
b Describe in Schedule O the process, if any, used by the organization to review this Form 990															
12a Did the organization have a written conflict of interest policy? If "No," go to line 13					12a	X									
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?					12b	X									
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done					12c	X									
13 Did the organization have a written whistleblower policy?					13	X									
14 Did the organization have a written document retention and destruction policy?					14	X									
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?															
a The organization's CEO, Executive Director, or top management official					15a	X									
b Other officers or key employees of the organization					15b	X									
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?					16a										X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?					16b										

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records **CONSUMERS' RESEARCH - 202-898-0542**  
**1801 F ST NW, WASHINGTON, DC 20006**

## Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any. See Instructions for definition of "key employee."
- List the organization's **five current highest compensated employees** (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

432007 11-07-14

[illegible]

	Yes	No
3		X
4		X
5		X

(A) Name and business address	(B) Description of services	(C) Compensation
KELLOGG, HUBER, HANSEN, TODD, EVANS & FIGEL 1615 M ST NW #400, WASHINGTON, DC 20036	LEGAL	200,000.
CREATIVE RESPONSE CONCEPTS PUBLIC RELATIONS 2760 EISENHOWER AVE, ALEXANDRIA, VA 22314	PUBLIC RELATIONS	110,000.

CONSUME 2



**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	995,000.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	<b>Total.</b> Add lines 1a-1f		995,000.			
<b>Program Service Revenue</b>	2 a	Business Code					
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	<b>Total.</b> Add lines 2a-2f					
	3	Investment income (including dividends, interest, and other similar amounts)		341.			341.
4	Income from investment of tax-exempt bond proceeds						
5	Royalties		42.			42.	
<b>Other Revenue</b>	6 a	Gross rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory					
	<b>Miscellaneous Revenue</b>			<b>Business Code</b>			
11 a							
b							
c							
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d						
12	<b>Total revenue.</b> See instructions.		995,383.	0.	0.	383.	

**Part IX** Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ..	30,000.	30,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ..				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	109,615.	100,846.	8,769.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) ..				
7 Other salaries and wages .....	86,755.	73,101.	13,654.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) ..				
9 Other employee benefits .....	8,140.	6,512.	1,628.	
10 Payroll taxes .....	13,250.	11,488.	1,762.	
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	276,349.	275,000.	1,349.	
c Accounting .....				
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 ..				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) ..	75,000.	75,000.		
12 Advertising and promotion .....	148,099.	148,099.		
13 Office expenses .....	10,157.	7,020.	3,137.	
14 Information technology .....	3,100.	3,100.		
15 Royalties .....				
16 Occupancy .....	18,519.		18,519.	
17 Travel .....	42,870.	28,995.	13,875.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ..				
19 Conferences, conventions, and meetings .....	4,830.	4,830.		
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....				
23 Insurance .....				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) ..				
a MEALS & ENTERTAINMENT .....	10,227.	8,182.	2,045.	
b FEES (BANK, COMMISSION, .....	3,166.		3,166.	
c OTHER MISCELLANEOUS EXP .....	2,172.		2,172.	
d DUES & SUBSCRIPTIONS .....	1,724.	1,724.		
e All other expenses .....	95.		95.	
25 Total functional expenses. Add lines 1 through 24e ..	844,068.	773,897.	70,171.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. ..				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	51,000.	1	17,620.
	2 Savings and temporary cash investments	267,155.	2	504.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see Instr). Complete Part II of Sch L	551.	6	458,113.
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	10,757.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	1,313.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	318,706.	16	488,307.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	13,687.	17	31,973.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25	13,687.	26	31,973.
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0.	30	0.
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	305,019.	32	456,334.
33 <b>Total net assets or fund balances</b>	305,019.	33	456,334.	
34 <b>Total liabilities and net assets/fund balances</b>	318,706.	34	488,307.	

Form 990 (2014)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	995,383.
2	Total expenses (must equal Part IX, column (A), line 25)	2	844,068.
3	Revenue less expenses. Subtract line 2 from line 1	3	151,315.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	305,019.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	456,334.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2014)



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4</b> <b>Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11</b> <b>Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	
<b>13</b> First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	%
<b>15</b> Public support percentage from 2013 Schedule A, Part II, line 14 . . . . .	15	%
<b>16a</b> <b>33 1/3% support test - 2014.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b</b> <b>33 1/3% support test - 2013.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a</b> <b>10% -facts-and-circumstances test - 2014.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b</b> <b>10% -facts-and-circumstances test - 2013.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18</b> <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2014

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		163,298.		420,100.	995,000.	1578398.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5		163,298.		420,100.	995,000.	1578398.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6)						1578398.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 8		163,298.		420,100.	995,000.	1578398.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				297.	383.	680.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b				297.	383.	680.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)		163,298.		420,397.	995,383.	1579078.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	99.96 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	99.95 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	.04 %
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	.05 %

19a **33 1/3% support tests - 2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☒ **X**

b **33 1/3% support tests - 2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)		



**Part IV Supporting Organizations** (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?

b A family member of a person described in (a) above?

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

**Section B. Type I Supporting Organizations**

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

**Section C. Type II Supporting Organizations**

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

**Section D. Type III Supporting Organizations**

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

**Section E. Type III Functionally-Integrated Supporting Organizations**

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2014

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7</b> <b>Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2014 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2014</b>	<b>(iii) Distributable Amount for 2014</b>
<b>1</b> Distributable amount for 2014 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2014:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b> From 2013			
<b>f</b> <b>Total of lines 3a through e</b>			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2014 distributable amount			
<b>i</b> Carryover from 2009 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2014 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
<b>6</b> Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7</b> <b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> Excess from 2013			
<b>e</b> Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12.  
Also complete this part for any additional information. (See instructions)

SCHEDULE A PART III SECTION A LINE 1(D) & SECTION B LINE 9(D)

CONSUMERS' RESEARCH DID NOT RAISE FUNDS OR HAVE EXPENDITURES IN 2012,  
WHICH EXPLAINS WHY IT HAS 0% PUBLIC FUNDS FOR THAT YEAR.





**SCHEDULE L**

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service**Transactions With Interested Persons**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.  
 ▶ Attach to Form 990 or Form 990-EZ.  
 ▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2014**Open To Public  
Inspection

Name of the organization

**CONSUMERS' RESEARCH INC**

Employer identification number

**22-1500498****Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No
JOSEPH COLANGELO	BOARD PRESIDENT EXEC	EXCESS BENEFIT TRANSACTION	X	

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

▶ \$ 0.

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$ 0.

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
JOSEPH COLANGEL	BOARD PR	SECURE R		X	0.	458,113.		X		X		X

Total ▶ \$ 458,113.

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2014

SEE PART V FOR CONTINUATIONS

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

**SCHEDULE L, PART I, EXCESS BENEFIT TRANSACTIONS:**

(A) NAME OF PERSON: JOSEPH COLANGELO

(B) RELATIONSHIP WITH DISQUALIFIED PERSON: BOARD PRESIDENT EXECUTIVE  
DIRECTOR

(C) DESCRIPTION OF TRANSACTION: EXCESS BENEFIT TRANSACTION

(D) CORRECTED? = YES

**SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:**

(A) NAME OF PERSON: JOSEPH COLANGELO

(B) RELATIONSHIP WITH ORGANIZATION: BOARD PRESIDENT &amp; EXECUTIVE DIRECTOR

(C) PURPOSE OF LOAN: SECURE REPAYMENT OF EXCESS BENEFIT TRANSACTION

**SCHEDULE L, PART I, LINE 1**

IN 2017, CONSUMERS' RESEARCH BECAME AWARE THAT IT ENGAGED IN AN EXCESS BENEFIT TRANSACTION WITH THE DISQUALIFIED PERSON IDENTIFIED IN PART I, SECTION 1, LINE (1), COLUMN (A) OF THIS FORM. UPON BECOMING AWARE OF THE TRANSACTION, CONSUMERS' RESEARCH SOUGHT PROFESSIONAL ADVICE ON HOW TO PROPERLY ACCOUNT FOR THE TRANSACTION, RECOVER THE EXCESS BENEFIT, PREVENT FUTURE INSTANCES OF EXCESS BENEFIT TRANSACTIONS, AND AMEND PRIOR TAX RETURNS AFFECTED BY THE EXCESS BENEFIT TRANSACTION.



**Part V** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

REGARDING PART I, SECTION 1, LINE (1), COLUMN (D) OF THIS FORM,  
CONSUMERS' RESEARCH HAS CORRECTED THE TRANSACTION IN THE FOLLOWING  
WAYS: 1) CONSUMERS' RESEARCH HAS RECOVERED OVER 60% OF THE EXCESS  
BENEFIT AND HAS ISSUED AN INTEREST BEARING PROMISSORY NOTE TO SECURE  
THE REPAYMENT OF THE OUTSTANDING BENEFIT TO THE DISQUALIFIED PERSON  
IDENTIFIED IN PART I, SECTION 1, LINE (1), COLUMN (A) OF THIS FORM; 2)  
CONSUMERS' RESEARCH HAS RATIFIED FINANCIAL AND PROCEDURAL PROTOCOLS TO  
PREVENT EXCESS BENEFIT TRANSACTIONS IN THE FUTURE; AND 3) CONSUMERS'  
RESEARCH HAS WORKED WITH INDEPENDENT PROFESSIONALS TO CORRECT AND AMEND  
PAST 990 FILINGS AFFECTED BY THE EXCESS BENEFIT TRANSACTION, WHICH THE  
ORGANIZATION HAS PREPARED AND WILL SUBMIT SUBSEQUENT TO THIS 990  
FILING.

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Open to Public  
Inspection

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number  
22-1500498

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE KNOWLEDGE AND UNDERSTANDING OF ISSUES, POLICIES, PRODUCTS, AND  
SERVICES OF CONCERN TO CONSUMERS AND TO PROMOTE THE FREEDOM TO ACT ON  
THAT KNOWLEDGE AND UNDERSTANDING.

FORM 990, PART VI, SECTION B, LINE 11:

PART VI, 11B 990 REVIEW PROCESS

1. THE ORGANIZATION'S EXECUTIVE DIRECTOR IS RESPONSIBLE FOR THE TIMELY  
PREPARATION OF THE FORM 990. THE ORGANIZATION'S EXECUTIVE DIRECTOR MAY  
CONFER WITH ACCOUNTANTS AND LEGAL COUNSEL OF THE ORGANIZATION WITH RESPECT  
TO DRAFTS OF THE FORM 990.

2. COPIES OF THE COMPLETED DRAFT FORM 990 (INCLUDING REQUIRED SCHEDULES)  
WILL BE DISTRIBUTED TO THE AUDIT COMMITTEE IN EITHER ELECTRONIC OR PAPER  
FORM FOR REVIEW AND APPROVAL. ANY QUESTIONS OR CONCERNS WILL BE NOTED AND  
ADDRESSED, AND MANAGEMENT STAFF WILL ENSURE THAT CHANGES ARE INCORPORATED  
INTO THE FORM 990 AS APPROPRIATE.

3. COPIES OF THE DRAFT FORM 990 WILL THEN BE DISTRIBUTED TO THE BOARD OF  
DIRECTORS IN EITHER ELECTRONIC OR PAPER FORM FOR REVIEW AND APPROVAL.  
QUESTIONS OR CONCERNS WILL BE NOTED AND ADDRESSED. MANAGEMENT STAFF WILL  
ENSURE THAT CHANGES ARE INCORPORATED INTO FORM 990 AS WARRANTED.

4. AFTER ALL INPUT HAS BEEN APPROPRIATELY ADDRESSED, THE FINAL VERSION OF  
THE FORM 990 (WITH REQUIRED SCHEDULES) WILL BE DISTRIBUTED TO EVERY VOTING  
MEMBER OF THE ORGANIZATION'S BOARD OF DIRECTORS PRIOR TO FILING WITH THE  
IRS. THE FINAL FORM MAY BE DISTRIBUTED EITHER IN PAPER OR ELECTRONIC FORM  
IN ANY MANNER DEEMED APPROPRIATE BY THE ORGANIZATION'S EXECUTIVE DIRECTOR.

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

FORM 990, PART VI, SECTION B, LINE 12C:

PART VI, 12C

CONFLICT OF INTEREST POLICY (ABBREVIATED VERSION, FULL VERSION AVAILABLE  
UPON REQUEST)

WHENEVER A DIRECTOR OR OFFICER HAS A FINANCIAL OR PERSONAL INTEREST IN ANY  
MATTER COMING BEFORE THE BOARD OF DIRECTORS, THE BOARD SHALL ENSURE:

1. THE INTEREST OF SUCH OFFICER OR DIRECTOR IS FULLY DISCLOSED TO THE  
BOARD OF DIRECTORS.
2. NO INTERESTED OFFICER OR DIRECTOR MAY VOTE OR LOBBY ON THE MATTER OR BE  
COUNTED IN DETERMINING THE EXISTENCE OF A QUORUM AT THE MEETING OF THE  
BOARD OF DIRECTORS AT WHICH SUCH MATTER IS VOTED UPON.
3. ANY TRANSACTION IN WHICH A DIRECTOR OR OFFICER HAS A FINANCIAL OR  
PERSONAL INTEREST SHALL BE DULY APPROVED BY MEMBERS OF THE BOARD OF  
DIRECTORS NOT SO INTERESTED OR CONNECTED AS BEING IN THE BEST INTEREST OF  
THE ORGANIZATION.
4. PAYMENTS TO THE INTERESTED OFFICER OR DIRECTOR SHALL BE REASONABLE AND  
SHALL NOT EXCEED FAIR MARKET VALUE.
5. THE MINUTES OF MEETINGS AT WHICH SUCH VOTES ARE TAKEN SHALL RECORD SUCH  
DISCLOSURE, ABSTENTION, AND RATIONALE FOR APPROVAL.

CONSUMERS' RESEARCH ENSURES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY  
THROUGH PERIODIC INTERNAL MONITORING OF ADHERENCE TO ITS POLICIES AND  
PROCEDURES AND BY HAVING EMPLOYEES ACKNOWLEDGE AND SIGN THE CONFLICT OF  
INTEREST POLICY UPON HIRING. VIOLATION OF CONFLICT OF INTEREST POLICY MAY  
RESULT IN DISCIPLINE, UP TO AND INCLUDING TERMINATION OF EMPLOYMENT.

FORM 990, PART VI, SECTION B, LINE 15:

PART VI, SECTION B 15

PROCESS FOR DETERMINING COMPENSATION (NAMES THE EXECUTIVE DIRECTOR AND KEY

432212  
08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

EMPLOYEES)

REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA, AND  
 CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION MARKET  
 SURVEY (GEOGRAPHY) AND SALARY HISTORY WITHIN THAT REGION.

(1) AN EXECUTIVE COMMITTEE (COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS  
 NOT EMPLOYED BY THE NON-PROFIT) RECOMMEND THE PROPOSED SALARY OF THE  
 EXECUTIVE DIRECTOR (OR OTHER KEY EMPLOYEE) AND THE FULL BOARD OF DIRECTORS  
 INDEPENDENTLY REVIEWS AND APPROVES THE SALARY.

(2) THE EXECUTIVE COMMITTEE USES COMPARABILITY DATA, SUCH AS SALARY SURVEYS  
 FROM SIMILAR NONPROFITS (I.E. SIMILAR MISSION FOCUS, BUDGET SIZE, AND  
 GEOGRAPHIC REGION).

(3) THE BOARD OF DIRECTORS DOCUMENTS ITS CONSIDERATION AND APPROVAL OF THE  
 COMPENSATION IN THE MINUTES OF THE BOARD MEETING.

FORM 990, PART VI, SECTION C, LINE 19:

PART VI, SECTION 19

AVAILABILITY OF GOVERNING AND FINANCIAL DOCUMENTS TO PUBLIC.

CONSUMERS' RESEARCH MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST  
 POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

INTERESTED PARTIES MAY SUBMIT A REQUEST THROUGH OUR ONLINE CONTACT FORM  
 LOCATED ON THE "CONTACT US" PAGE OF OUR WEBSITE (WWW.CONSUMERSRESEARCH.COM)  
 OR THEY MAY SUBMIT A REQUEST TO CONSUMERS' RESEARCH VIA EMAIL AT  
 INFO@CONSUMERSRESEARCH.ORG.

PART VI, SECTION B, 13

WHISTLEBLOWER POLICY (ABBREVIATED VERSION, FULL VERSION AVAILABLE UPON  
 REQUEST)

CONSUMERS' RESEARCH SEEKS TO HAVE AN "OPEN DOOR POLICY" AND ENCOURAGES

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

BOARD MEMBERS AND EMPLOYEES TO SHARE THEIR QUESTIONS, CONCERNS, SUGGESTIONS OR COMPLAINTS REGARDING THE ORGANIZATION AND ITS OPERATIONS WITH SOMEONE WHO CAN ADDRESS THEM PROPERLY. IN MOST CASES, A BOARD MEMBER OR COMMITTEE MEMBER SHOULD PRESENT HIS OR HER CONCERNS TO THE CHAIR OF THE BOARD. THE EXECUTIVE DIRECTOR IS GENERALLY IN THE BEST POSITION TO ADDRESS AN EMPLOYEE'S AREA OF CONCERN. HOWEVER, IF A BOARD MEMBER IS NOT COMFORTABLE SPEAKING WITH THE BOARD CHAIR OR IS NOT COMFORTABLE WITH THE BOARD CHAIR'S RESPONSE, OR IF AN EMPLOYEE IS NOT COMFORTABLE SPEAKING WITH THE EXECUTIVE DIRECTOR OR IF THE EMPLOYEE IS NOT SATISFIED WITH THE EXECUTIVE DIRECTOR'S RESPONSE, THE BOARD MEMBER, COMMITTEE MEMBER OR EMPLOYEE IS ENCOURAGED TO SPEAK WITH ANYONE ON THE BOARD WHOM THE EMPLOYEE IS COMFORTABLE IN APPROACHING OR TO DIRECTLY CONTACT THE ORGANIZATION'S OUTSIDE LEGAL COUNSEL, WHOSE CONTACT INFORMATION CAN BE OBTAINED FROM THE EXECUTIVE DIRECTOR.

## PART VI, SECTION B, 14, SECTION C, 19

## DOCUMENT RETENTION AND DESTRUCTION POLICY (ABBREVIATED VERSION, FULL VERSION AVAILABLE UPON REQUEST)

GENERAL RETENTION IS 7 YEARS, LARGELY WITH THE EXCEPTION OF PERMANENT DOCUMENTS SUCH AS INCORPORATION PAPERS.

ACCOUNTS PAYABLE LEDGERS AND SCHEDULES, 7 YEARS. AUDIT REPORTS, PERMANENTLY. CHECKS (FOR IMPORTANT PAYMENTS AND PURCHASES) PERMANENTLY.

CONTRACTS, MORTGAGES, NOTES, AND LEASES (EXPIRED) 7 YEARS.

CORRESPONDENCE (LEGAL AND IMPORTANT MATTERS) PERMANENTLY. DEEDS, MORTGAGES, AND BILLS OF SALE, PERMANENTLY. DEPRECIATION SCHEDULES, PERMANENTLY. EXPENSE ANALYSES/EXPENSE DISTRIBUTION SCHEDULES, 7 YEARS.

YEAR-END FINANCIAL STATEMENTS, PERMANENTLY. INSURANCE RECORDS, CURRENT

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

ACCIDENT REPORTS, CLAIMS, POLICIES, AND SO ON (ACTIVE AND EXPIRED),  
 PERMANENTLY. INVOICES (TO CUSTOMERS, FROM VENDORS), 7 YEARS. MINUTE  
 BOOKS, BYLAWS, AND CHARTER, PERMANENTLY. PATENTS AND RELATED PAPERS,  
 PERMANENTLY. PAYROLL RECORDS AND SUMMARIES, 7 YEARS. PERSONNEL FILES  
 (TERMINATED EMPLOYEES), 7 YEARS. RETIREMENT AND PENSION RECORDS,  
 PERMANENTLY. TAX RETURNS AND WORKSHEETS, PERMANENTLY. TIMESHEETS,  
 PERMANENTLY. TRADEMARK REGISTRATIONS AND COPY RIGHTS, PERMANENTLY.  
 WITHHOLDING TAX STATEMENTS, 7 YEARS.

EXPLANATIONS AND DESCRIPTIONS TO AMENDED PARTS AND SCHEDULES OF FORM 990  
 SCHEDULE O - EXPLANATIONS AND DESCRIPTIONS TO AMENDED PARTS AND  
 SCHEDULES OF FORM 990.

FORM 990, PART I, SUMMARY, LINES 8, 10, 12, 14, 15, 17, 18, 19, 20, 21,  
 AND 22 ARE BEING AMENDED TO REFLECT THE CORRECTED AMOUNTS CARRIED  
 FORWARD FROM THE APPLICABLE AMENDED PARTS AND SCHEDULES OF THE  
 ORIGINALLY FILED TAX RETURN. THE PRIOR YEAR AMOUNTS ARE BEING AMENDED  
 TO REFLECT THE AMENDED 2013 TAX RETURN. THE ORIGINALLY FILED TAX RETURN  
 WAS PREPARED WITH INCOMPLETE AND, THEREFORE, INCORRECT AMOUNTS.

PART III, LINE 4A AND 4E, PROGRAM SERVICE EXPENSES AND TOTAL PROGRAM  
 SERVICE EXPENSES ARE BEING AMENDED TO CORRECT THE AMOUNTS FROM \$773,224  
 TO \$773,897 THAT WAS REPORTED INCORRECTLY ON THE ORIGINALLY FILED TAX  
 RETURN. PROGRAM SERVICE GRANTS IS BEING AMENDED TO CORRECT THE AMOUNTS  
 FROM \$0 TO \$30,000 THAT WAS REPORTED INCORRECTLY ON THE ORIGINALLY  
 FILED TAX RETURN. THE DESCRIPTION OF THE ORGANIZATION'S PROGRAM  
 SERVICE ACCOMPLISHMENTS WAS MODIFIED FROM THE ORIGINALLY FILED TAX  
 RETURN TO MORE ACCURATELY DESCRIBE THE ORGANIZATION'S PROGRAM SERVICE  
 ACCOMPLISHMENT.

432212  
08-27-14

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

PART IV CHECKLIST OF REQUIRED SCHEDULES, LINES 25A, 25B AND 26 IS BEING AMENDED TO CHANGE THE RESPONSE TO THESE QUESTIONS TO YES AND TO INCLUDE SCHEDULE L, PART I AND II TO REPORT AN EXCESS BENEFIT TRANSACTION WITH A DISQUALIFIED PERSON THAT WAS INITIALLY DISCOVERED IN 2017.

PART V - STATEMENTS REGARDING OTHER IRS FILINGS AND TAX COMPLIANCE LINE 1A IS BEING AMENDED TO CORRECT THE NUMBER REPORTED IN BOX 3 OF FORM 1096 FROM 0 AS SHOWN ON THE ORIGINALLY FILED TAX RETURN TO 3.

PART VIII - STATEMENT OF REVENUE, LINE 3 AND LINE 12 IS BEING AMENDED TO CHANGE THE AMOUNT OF INVESTMENT INCOME FROM \$318.88 THAT WAS INCORRECTLY REPORTED ON THE ORIGINALLY FILED TAX RETURN TO THE CORRECT AMOUNT OF \$341, AND TO CORRECT THE THE AMOUNT OF TOTAL REVENUE ON LINE 12 FROM \$995,361 TO \$995,383.

PART IX - STATEMENT OF FUNCTIONAL EXPENSES, LINES 1 (B), 4, 5, 7, 9, 10, 11B, 11C, 11G, 12, 13, 14, 16, 17, 19, 24A, 24B, 24C, 24D, 24E AND 25, COLUMNS A, B AND C ARE BEING AMENDED TO CHANGE ALL OF THESE AMOUNTS THAT WERE INCORRECTLY REPORTED ON THE ORIGINALLY FILED TAX RETURN TO THE CORRECT AMOUNTS AS SHOWN ON THESE LINES IN COLUMNS A, B AND C OF THE AMENDED TAX RETURN.

PART X - BALANCE SHEET, BEGINNING OF YEAR AMOUNTS IN COLUMN A ARE BEING AMENDED TO REFLECT THE AMENDED 2013 END OF YEAR AMOUNTS BEING CARRIED FORWARD TO 2014. LINE 1, COLUMN B, LINE 2, COLUMN B, LINE 6, COLUMN B, LINE 9, COLUMN B, LINE 15, COLUMN B, LINE 16, COLUMN B, LINE 17, COLUMN B, LINE 26, COLUMN B, LINE 27, COLUMN B, LINE 32, COLUMN B, LINE 33, COLUMN B, AND LINE 34, COLUMN B ARE BEING AMENDED TO CHANGE ALL OF THESE AMOUNTS THAT WERE INCORRECTLY REPORTED ON THE ORIGINALLY FILED TAX RETURN TO THE CORRECT AMOUNTS AS SHOWN ON THESE LINES ON THE AMENDED TAX RETURN. SPECIFICALLY, THE AMOUNT OF PREPAID EXPENSES AND

DEFERRED CHARGES ON LINE 9, COLUMN B, THE AMOUNT OF OTHER ASSETS ON

432212  
08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

LINE 15, COLUMN B, AND THE AMOUNT OF ACCOUNTS PAYABLE AND ACCRUED EXPENSES ON LINE 17, COLUMN B WERE OMITTED FROM THE ORIGINALLY FILED TAX RETURN. THE ORIGINALLY FILED TAX RETURN INCORRECTLY CHECKED THAT THE ORGANIZATION FOLLOWED SFAS 117 (ASC 958) INSTEAD OF CHECKING THAT IT DOES NOT FOLLOW SFAS 117 (ASC-958).

PART XI - RECONCILIATION OF NET ASSETS, LINES 1, 2, 3, 4, AND 10 ARE BEING AMENDED TO CHANGE ALL OF THESE AMOUNTS THAT WERE INCORRECTLY REPORTED ON THE ORIGINALLY FILED TAX RETURN TO THE CORRECT AMOUNTS AS SHOWN ON THESE LINES ON THE AMENDED TAX RETURN.

SCHEDULE A, PART III, SECTION A, LINE 1D AND LINE 6 D ARE BEING AMENDED TO CORRECT THE AMOUNT OF 2013 CONTRIBUTIONS FROM \$429,000 TO \$420,100 AS A RESULT OF AMENDING THE 2013 FORM 990. LINE 1E AND LINE 6E ARE BEING AMENDED TO CORRECT THE AMOUNT OF 2014 CONTRIBUTIONS FROM \$935,000 TO THE CORRECT AMOUNT OF \$995,000. LINE 1F, 6F AND LINE 8 ARE BEING AMENDED TO CORRECT THE AMOUNT OF TOTAL CONTRIBUTIONS FROM \$1,518,298 TO \$1,578,398. SECTION B, LINES 9, COLUMN D, E, AND F ARE BEING AMENDED TO CORRECT THE GROSS INCOME CARRIED FROM LINE 6 OF SECTION A. LINE 10A, COLUMN D, E AND F, AND LINE 10C, COLUMN D, E AND F ARE BEING AMENDED TO CORRECT THE AMOUNT OF INTEREST, DIVIDENDS, PAYMENTS RECEIVED ON SECURITIES, LOANS, RENTS, ROYALTIES AND INCOME FROM SIMILAR SOURCES IN COLUMN D FROM \$459 TO THE CORRECT AMOUNT OF \$297, THE AMOUNT IN COLUMN E FROM \$319 TO \$383 AND THE TOTAL IN COLUMN F FROM \$778 TO \$680. THE TOTAL SUPPORT AMOUNT ON LINE 13 COLUMN D IS BEING CORRECTED FROM \$420,459 TO THE CORRECT AMOUNT OF \$420,397, LINE 13 COLUMN E FROM \$935,319 TO THE CORRECT AMOUNT OF \$995,383 AND THE TOTAL IN COLUMN F FROM \$1,519,076 TO \$1,579,078. SECTION C, LINE 15 IS BEING AMENDED TO CORRECT THE PUBLIC SUPPORT PERCENTAGE FOR 2014 FROM 99.94% TO THE CORRECT AMOUNT OF 99.96%, LINE 16 PUBLIC SUPPORT PERCENTAGE FOR 2013



Name of the organization

CONSUMERS' RESEARCH INC

Employer identification number

22-1500498

FROM 99.93% TO THE CORRECT AMOUNT OF 99.95% AS A RESULT OF AMENDING THE  
2013 TAX RETURN. SECTION D, LINE 17 IS BEING AMENDED TO CORRECT THE  
INVESTMENT INCOME PERCENTAGE FROM 0.06% TO THE CORRECT AMOUNT OF 0.04%  
AND LINE 18 IS BEING CORRECTED AS A RESULT OF AMENDING THE 2013 TAX  
RETURN FROM 0.07% TO 0.05%.