DLN: 93493289002250

2019

OMB No. 1545-0047

Form **990**

Treasury

Department of the

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

		nue Service									
A F	or the	e 2019 c		inning 01-01-2019 ,and endir	ng 12-31-2	019	-				
		pplicable:	C Name of organization Consumers Research Inc				D Employer	identifi	ication number		
		change					22-15004	98			
	me cha tial ret	-	Doing business as				-				
		n/terminated									
		return		mail is not delivered to street address)	Room/suite		E Telephone	number			
□ Ар	plicatio	on pending	1801 F Street NW								
				untry, and ZIP or foreign postal code							
			Washington, DC 20006				G Gross rece	pts \$ 48	34,745		
			F Name and address of princip	oal officer:	Н	(a) is thi	s a group retu	n for			
			Russell Outhuse				dinates?		□Yes ☑ No		
					н		II subordinates	;			
r Tax	k-exen	npt status:				inclu			☐ Yes ☐No		
			☑ 501(c)(3) □ 501(c)() ◀	1 (insert no.) ☐ 4947(a)(1) or ☐	527		o," attach a list	•	•		
J W	ebsit	e: 🟲			"	(C) Grou	p exemption n	umber	•		
					1,	Voor of form	ation: 1937 N	1 State	of legal domicile: NJ		
K Forn	n of or	ganization:	Corporation Trust Ass	sociation ☐ Other ▶	-	real of form	adon. 1937	Jule	or legal dofflicite. No		
Da	art I	Sum	mary.								
Га		Sum	cribe the organization's mission	or most significant activities:							
				ucational organization whose miss	ion is to inc	rease the	knowledge and	under	standing of issues,		
မ	E	oolicies, p	oducts, and services of concern	to consumers and to promote the	freedom to	act on tha	it knowledge a	nd und	lerstanding.		
Ē	-										
Ē											
Activities & Governance		Charle thi	s how b if the organization d	liccontinued its energtions or dispo	and of more	than 250	s of its not ass	a+a			
5		2 Check this box ▶ ☐ 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)									
ಶ	l										
ě	l	4 Number of independent voting members of the governing body (Part VI, line 1b)									
5	l		5 6	12							
AC	l		nber of volunteers (estimate if no	, ,			•				
	l			art VIII, column (C), line 12			•	7a			
	b	Net unrel	ated business taxable income fro	om Form 990-T, line 39			•	7b			
						Pr	ior Year		Current Year		
<u>Qı</u>	8	Contribut	ions and grants (Part VIII, line 1h	١)			475,00	0	475,000		
Rəvenue	9	Program	service revenue (Part VIII, line 2	g)			15,36	8	6,443		
À.	10	Investme	nt income (Part VIII, column (A),	lines 3, 4, and 7d)	•		59	2	347		
ш	11	Other rev	enue (Part VIII, column (A), lines	s 5, 6d, 8c, 9c, 10c, and 11e)			1,38	2	2,960		
	12	Total reve	enue—add lines 8 through 11 (m	nust equal Part VIII, column (A), lin	e 12)		492,34	2	484,74		
	13	Grants ar	d similar amounts paid (Part IX,								
	l		paid to or for members (Part IX,								
(0	l	·	•	penefits (Part IX, column (A), lines	5-10)		615,44		438,598		
Expenses	l	•	, , , , ,	umn (A), line 11e)	,		013,11	+	130,031		
€	l .		- , , , ,	, ,,	•						
ন্ত্ৰী	l		aising expenses (Part IX, column (D)	· -			350.00	_	205.04		
	l	·	, , , , , , , , , , , , , , , , , , , ,	s 11a–11d, 11f–24e)	•		259,89		305,94		
	l	•	•	qual Part IX, column (A), line 25)			875,33	9	744,54		
	19	Revenue	less expenses. Subtract line 18 f	from line 12	•		-382,99	7	-259,80		
Net Assets or Fund Balances						Beginning	of Current Yea	r	End of Year		
fan		-	1 (D 1)(P 16)			-					
ASS Ba	l		ets (Part X, line 16)		•		632,86	+	368,67		
<u>و</u> و	l		ilities (Part X, line 26)				31,40	+	27,01		
Zū	22	Net asset	s or fund balances. Subtract line	21 from line 20			601,45	9	341,65		
	rt II		ature Block								
				mined this return, including accom e. Declaration of preparer (other t							
	nowle		i, it is true, correct, and complet	e. Declaration of preparer (other t	man officer)	13 Dasca (on an imormaci	011 01 1	villen preparer has		
		Lk									
		*****					20-09-23				
Sign		J Signati	ure of officer			Da					
Here	:		Outhuse President								
		Type o	print name and title								
		Р	rint/Type preparer's name	Preparer's signature	Date	-10-12 Ch	eck I if PT	N 1429307	7		
Paid	t				2020	sel	f-employed				
Prei	oare	er 🏻 🖡	rm's name Mullins PC			Fir	m's EIN ▶ 47-43	06215			
	On	ь. <u>⊢</u>	rm's address ► 7625 Wisconsin Aven	ue		Dh	one no. (202) 77	0-6371			
		· '					one no. (202) //	00/1			
			Bethesda, MD 20814	+							
Mav t	he IR:	S discuss	this return with the preparer sho	own above? (see instructions)				V	'es □No		

Consume	Check if Scheoriefly describe the or ers Research is an in	rganization's mission: ndependent educationa	nse or note to a	any line in this Part III		🗆					
Consume	riefly describe the or ers Research is an ir	rganization's mission: ndependent educationa	l organization v	vhose mission is to incr							
Consume	ers Research is an i	ndependent educationa			iones the knowledge and understan						
					sace the Impauledge and understan						
				ie needom to act on th	at knowledge and understanding.	ding of issues, policies,					
	3	undertake any significa		,							
	'	r 990-EZ?				☐ Yes 🗹 No					
	•	se new services on Sch									
se	Did the organization cease conducting, or make significant changes in how it conducts, any program services?										
	*	-									
Se	ection $501(c)(3)$ and		ns are required	to report the amount of	largest program services, as meas of grants and allocations to others,						
4a (C	Code:) (Expenses \$	300,898	including grants of \$) (Revenue \$)					
	ee Additional Data	, (2/1, 2/1/2000)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 					
4b (C	Code:) (Expenses \$	176,679	including grants of \$) (Revenue \$)					
Se	ee Additional Data										
4c (C	Code:) (Expenses \$	120,350	including grants of \$) (Revenue \$)					
Se	ee Additional Data										
4d 01	ther program servic	ces (Describe in Schedu	le O.)								
(E	xpenses \$	inclu	ding grants of	\$) (Revenue \$)					
4e To	otal program serv	rice expenses >	597,9	27							

15

17

18

19

Checklist of Required Schedules

Yes

13

14a

14b

15

16

17

18

19

20a

20b

21

Nο

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

No

Form **990** (2019)

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
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	3		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		No
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	5		No
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	6		No
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	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
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	9		No
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	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		No
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	11b		No
С	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	11c		No
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	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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	12b		No

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

columber 23 Did and Sch 24a Did the conr b Did c Did to d Did 25a Sec tran b Is tithat Sch 26 Did office men 27 Did emma 3: Sch 28 Was inst	I the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, umn (A), line 2? If "Yes," complete Schedule I, Parts I and III			
columber 23 Did and Sch 24a Did the conr b Did c Did to d Did 25a Sec tran b Is tithat Sch 26 Did office men 27 Did emma 3: Sch 28 Was inst	umn (A), line 2? If "Yes," complete Schedule I, Parts I and III the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
columber 23 Did and Sch 24a Did the conr b Did c Did to d Did 25a Sec tran b Is tithat Sch 26 Did office men 27 Did emma 3: Sch 28 Was inst	umn (A), line 2? If "Yes," complete Schedule I, Parts I and III the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1 1	Yes	No
and Sch 24a Did the con b Did c Did to d d Did 25a Sec tran b Is tithat Sch 26 Did office mer 27 Did emman a 3: Sch 28 Was inst		22		No
b Did c Did to d Did 25a Sec trar b Is ti that Sch 26 Did offic mer 27 Did emi a 3! Sch 28 Was inst	d former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete nedule J	23		No
c Did to d d Did 25a Sec trar b Is tithal Sch 26 Did offic mer 27 Did emp a 3! Sch 28 Was inst	the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and implete Schedule K. If "No," go to line 25a	24a		No
to d d Did 25a Sec trar b Is ti that Sch 26 Did offic mer 27 Did emi a 3! Sch 28 Was inst	the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
b Is that Sch 26 Did office mer 27 Did emr a 3! Sch 28 Was inst	the organization maintain an escrow account other than a refunding escrow at any time during the year defease any tax-exempt bonds?	24c		
b Is that Sch 26 Did office mer 27 Did emp a 3: Sch 28 Was inst	the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
that Sch 26 Did office mer 27 Did emple a 3! Sch 28 Was inst	ction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit insaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
office mer 27 Did emp a 3! Sch 28 Was inst	the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and it the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete nedule L, Part I	25b		No
emp a 3! <i>Sch</i> 28 Was inst	the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former cer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family mber of any of these persons? If "Yes," complete Schedule L, Part II	26	Yes	
inst	the organization provide a grant or other assistance to any current or former officer, director, trustee, key ployee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to 5% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete nedule L,Part III	27		No
	s the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV tructions for applicable filing thresholds, conditions, and exceptions):			
	urrent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i> mplete Schedule L, Part IV	28a		No
b A fa	amily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
	15% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," in the second sec	28c		No
29 Did	the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation atributions? If "Yes," complete Schedule M	30		No
31 Did	the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete nedule N, Part II	32		No
	the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 1.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34 Was <i>Par</i>	s the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and it V, line 1	34		No
	the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity hin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
		36		No
	ction 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related parization? If "Yes," complete Schedule R, Part V, line 2			No
38 Did All I		37		140
Part V	anization? If "Yes," complete Schedule R, Part V, line 2	37 38	Yes	

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

Yes

Yes | Form **990** (2019)

12

0

1c

1a

1b

No

a first the number of employees reported or Form W-3, Transmittal of Wage and Tas Statements, file of the calonidary vars onding visit in with in the year covered by this return. 12	Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
this return to the return of lines 2a, did the organization file all required finderal 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) 3a No. by 17 **Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3b 17 **Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3b 17 **Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3b 17 **Note. If the sum of the fore year, of the organization nave an interest, 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)? 5a Note the organization party to a perhalbed tax shelter transaction at any time during the tax year? 5a Note the organization party to a perhalbed tax shelter transaction at any time during the tax year? 5a Note 17 **Note 18 **One 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at your time 5a or 5b, did the organization in charge the sent tax deduction of the same of of the	2a								
Note. If the sum of lines 1s and 2 is greater than 250, you may be required to efficiese instructions) 3a									
3a No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	b		2b	Yes					
a A awy 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 sheal account, secretives account, or enter financial accounts?	3a		3a		No				
financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for FinCEN form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Was the organization of the filing requirements for FinCEN form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization to a prohibited tax shelter transaction? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes, it oline 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes, it oline 5a or 5b, did the organization flat form 124 or 124	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 16 Poses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solict any contributions that were not tax declibed in contributions or contribution and partly for goods and services provided? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided in the payor? 7 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07. 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxibile distributions under section 4966? 9 Did the sponsoring organizations. Enter: 9 Did the sponsoring organization make any taxibile distributions under section 4966? 9 Section 501(c)(2) organizations. Enter: 9 Did the sponsoring organization make any taxibile distributions under section 4968 to a contribution of additional information the organization funds t		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:	4a		No				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5a or 5b, did the organization file form 8895-17 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? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided? 10 If "Yes," indicate the number of Forms \$252 filed during the year. 10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 Did the organization receive a contribution of uniformal partly for goods and services of the organization receive a contribution of uniformal payments on a personal benefit contract? 12 Did the organization receive a contribution of uniformal payments on a personal benefit contract? 13 Did the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form \$200. 14 If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form \$200. 15 Seponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 16 Did the sponsoring organization make a distribution to a donor, donor advised fund the organization funds and the property of the pro	_		<u> </u>						
to If "Yes," to line 5s 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization stellar apyment in excess of \$75 made partly as a contribution and partly for goods and services of provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$202? b If "Yes," indicate the number of Forms \$282 filed during the year. c Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 The No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 1098-C? 8 Sponsoring organizations received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 9 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 2 Did the sponsoring organizations make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Section 501(c)(12) organizations. Enter: a Gross income from members are shareholders. 1 If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 1 If "Yes," enter the amount of tracevers the organization is required to maintain by the state in which the organization members or shareholders. 1 If "Yes," enter the amount of rese									
6a Des the organization have anoual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express takement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 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? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 8 b If "Yes," indicate the number of Forms 8282 filed during the year. 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 10 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 10 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8999 as required? 10 If the organization make any taxable distributions under section 4966? 10 Did the apponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 11 In 10			\vdash						
solicit any contributions that were not tax deductible as charitable contributions? b If Yes, fidth the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization may receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? 6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? 6 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Polition of the the organization received an outribution of qualified intellectual property, did the organization file Form 8899 as required? 7 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1088-0? 8 Sponsoring organizations maintaining donor advised funds. Did a conor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities 10 Did the sponsoring organizations. Finter: a Gross income from members or shareholders b Fres, "netter the amount of rex-exempt interest received or accrued during the year. 1 If Did 1 Section 501(c)(12) organizations. Finter: a Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities 10 Did 10 Did the organization included on Part VIII, line 12, for public use o			\vdash		No				
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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	а		13a						
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	16	· · · · · · · · · · · · · · · · · · ·	16		No				

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Nan, 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	o" respo	onse to i	lines 🔽
Se	ection A. Governing Body and Management			
_		. —	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	└		
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
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		No
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? •	n 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Reven	ie Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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		No
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		
	ection C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20	policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: The Organization 1801 F Street NW Washington, DC 20006 (202) 898-0542			
	<u> </u>			

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 vear • 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, or 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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours		ne bo	ox, ι n of	t ch unle: fice:	ss pers	son	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations	
(1) Russell Outhuse President	0.00	х		x				12,000	0	0	
(2) Kyle Burgess Executive Director	40.00			х				19,243	0	1,669	
(3) Beau Brunson Senior Policy Advisor	40.00 0.00					×		118,224	0	22,776	
(4) John Meyer Senior Researcher	40.00					×		127,000	0	0	
		I			ı	l	ı	1		I	

compensation from the organization ▶ 2

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

Page 8

(A)	(B)		•	(C)	<u> </u>			(D)	(E)		(F)	<u> </u>
Name and title	Name and title Average hours per week (list any hours					eck moss persection and a december a	son	Repo compe fror orgar	ortable ensation m the nization	Reportable compensation from related organizations	amount of other compensation from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensi employee	Former	,	/1099- (SC)	(W-2/1099- MISC)	related organizations		
1b Sub-Total						▶					\top		
c Total from continuation sheets to Pa		 A		·		▶							
						•		2	276,467		0		24,445
Total number of individuals (including of reportable compensation from the compensation)			e liste	ed al	bove	e) who	rece	eived mo	re than \$1	00,000			
												Yes	No
3 Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>			ee, ke	ey er •	mplo •	oyee, o	or hi	ghest cor	npensated	employee on	3		No
4 For any individual listed on line 1a, is organization and related organizations individual										n the			
5 Did any person listed on line 1a receive services rendered to the organization?										ividual for	5		No No
Section B. Independent Contract	ore												110
Complete this table for your five higher from the organization. Report comper	est compensate										npens	sation	
Nama	(A)	NE E							Doss	(B)		(Compar	
CREATIVE RESPONSE CONCEPTS PUBLIC R, 2760 EISENHOWER AVE Alexandria, VA 22314	ind business addre	:55							Public Relat	•		Comper	110,066
JustWorks Employment Group LLC, 130 7th Avenue Suite 249 New York, NY 10011									PEO				412,891

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

		(2019)	a e =) over						Page 9
Part	VI				resno	onse or note to any	line in this Part VIII			\square
		CHECK II SCHOOL	uuic	o contains a	гезре	or note to unity	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
· · ·	1	a Federated campa	aigns	· . [1a		L	Tevenue		312 311
ant		b Membership due	s.	. [1 b					
Grand		c Fundraising ever		L	1c					
Sifts lar /		d Related organiza		Ļ	1d					
ıs, (e Government grantsf All other contribution		Ļ	1e					
itior er S		and similar amount above			1f	475,000				
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution lines 1a - 1f:\$	ons in	cluded in	10					
Sont		h Total. Add lines	1a-1	f	1g	•				
		Totali / (dd iii) co				Business Code	475,000			T
	2	a Bretton Woods Sumn	nitt			900099	6,443	6,443		
E e						300033				
ever	ŀ	b								
Program Service Revenue	١,									
Xer vi										
an S	ľ	d 								
rogu		e								
<u>α</u>	1	f All other program	serv	rice revenue.						
	g	J Total. Add lines 2	2a-2	f	•	6,443				1
	3	Investment income similar amounts) .	(inc	luding divide		interest, and other	342			342
	1	Income from invest								
	5	Royalties	_			•	•			
				(i) Rea	ıl	(ii) Personal	-			
		a Gross rents	6a				_			
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6с							
		d Net rental income	e or	(loss)			1			
				(i) Securi	ties	(ii) Other				
	7	a Gross amount from sales of assets other	7a							
		than inventory					_			
	b	other basis and	7b							
		sales expenses					-			
		Gain or (loss) d Net gain or (loss)	7c				_			
a s		a Gross income from fu			Ė	· · · •				
Other Revenue		(not including \$ contributions reporte								
seve		See Part IV, line 18			8a					
erF	1	b Less: direct expensec Net income or (los			8b	ents				
	9a	Gross income from See Part IV, line 19	gam •	ing activities. • •	9a					
		b Less: direct expen	ises		9b					
		c Net income or (los	ss) fr	om gaming a	activit	ies 🕨	1			
	10	aGross sales of inve	ento	ry, less						
		returns and allowa			10a		_			
		b Less: cost of good c Net income or (los			10b					
		Miscellaneo			IIIVEIII	Business Code				
	1	1a Other				90009	9 2,960	2,960		
		h								
		b								
		с								
		d All other revenue	•							
		e Total. Add lines 1				•	2,960			
	1	2 Total revenue. S	ee ir	nstructions .	•	• • • •	484,745	9,403		0 342

Pa	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must c		-		umn (A).
	Check if Schedule O contains a response or note to ar	ny line in this Part IX			<u> U</u>
	not include amounts reported on lines 6b, 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				
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				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	31,243		31,243	
7	Other salaries and wages	338,836	312,694	26,142	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,169	5,212	957	
9	Other employee benefits	27,893	23,568	4,325	
10	Payroll taxes	34,457	29,114	5,343	
11	Fees for services (non-employees):				
а	Management				
b	Legal	45		45	
c	Accounting	59,365	25,492	33,873	
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 Schedule O)	33,446	31,111	2,335	
12	Advertising and promotion	120,460	120,460		
13	Office expenses	5,783	5,477	306	
14	Information technology				
15	Royalties				
16	Occupancy	40,184		40,184	
17	Travel	7,858	7,858		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	36,567	36,063	504	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,240	878	1,362	
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				
	5				
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	744,546	597,927	146,619	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).				

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

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

or family member of any of these persons

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

(B)

End of year

21

22

23

24 25

26

27

28

29

30

31

32

33

27.014

341,658

341,658

368,672

Form 990 (2019)

31.409

601,459

601,459

632,868

(A)

Beginning of year

Page 11

	1	Cash-non-interest-bearing		•	10,234	1	35,171
	2	Savings and temporary cash investments .		[230,026	2	75,249
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			278	4	84
	5	Loans and other payables to any current or forn key employee, creator or founder, substantial c entity or family member of any of these persons	ontribut	tor, or 35% controlled		5	
	6	Loans and other receivables from other disquali section $4958(f)(1)$), and persons described in section $4958(f)(1)$			350,000	6	245,000
S	7	Notes and loans receivable, net				7	
ssets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			33,017	9	11,855
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a				
	ь	Less: accumulated depreciation	10b			10 c	
	11	Investments—publicly traded securities .				11	
	12	Investments—other securities. See Part IV, line	11 .			12	
	13	Investments—program-related. See Part IV, line	e 11 .			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		[1,313	15	1,313
	16	Total assets. Add lines 1 through 15 (must equ	632,868	16	368,672		
	17	Accounts payable and accrued expenses			31,409	17	27,014
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities		Г		20	

Liabilities	

21

22

23

24

25

26

27

28

31

32

33

Fund Balances

ō 29

Assets 30

Form	990 (2019)				Page 12
Pa	Reconcilliation 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			484,745
2	Total expenses (must equal Part IX, column (A), line 25)	2			744,546
3	Revenue less expenses. Subtract line 2 from line 1	3			-259,801
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			601,459
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			341,658
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	No No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	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?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requiaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	red	3b		

Additional Data

Software ID:

Software Version:

EIN: 22-1500498

Name: Consumers Research Inc.

Form 990 (2019) Form 990, Part III, Line 4a: Organization performs research, maintains a news website, and educates the public through outreach and the media to increase 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.

Organization publishes a magazine to increase 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 III, Line 4b:

Form 990, Part III, Line 4c: Organization hosts and participates in conferences and meetings bringing together policy and legal experts as well as members of industry on a range of consumer issues from digital economy to financial services with a focus on protecting consumers.

efile GRAPHIC print - DO NOT PROCESS As File			As Filed Data -		DLN: 9	DLN: 93493289002250		
SCI	HED	ULE A	- Dublic 4	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza esearch Inc	tion				Employer identific	ation number
COIISU	IIIeis K	esearch inc					22-1500498	
	rt I		for Public Charity State a private foundation because				See instructions.	
1 1	rganiz		onvention of churches, or as	•			(A)(i)	
2		,	,				. , . ,	
			scribed in section 170(b)(,			
3		·	or a cooperative hospital serv	_			-	arka arkina da a arakta ili a
4	Ш	name, city,	esearch organization operate and state:	ed in conjunction with	a nospital descri	ibed in section :	1/U(b)(1)(A)(III). E	nter the hospital's
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7			ation that normally receives ation that normally receives are at the complete (Complete).		s support from a	governmental u	init or from the genera	al public described in
8			ty trust described in sectior	•	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. S					ege or university or a
10	✓	An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after Ju 30, 1975. See section 509(a)(2). (Complete Part III.)						ipport from gross
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	appoint or elect a majo				
b		manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n	on-functionally integrated integrated. The organization integrated. The organization	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization received or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter				-		<u> </u>	
g	Provi	de the follow	ing information about the su	pported organization(т'			
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))	1 ' 3 3 1		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
		Yes No						
			<u> </u>					
Tota		l. P. '	tion Act Notice, see the Ir		Cat. No. 11285		 	 90 or 990-EZ) 2019

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2
P	art II Support Schedule for	Organizations	Described in S	Sections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A	(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	ection A. Public Support Calendar year		I				
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grant.")						
2	Tax revenues levied for the						
_	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	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).						
6	Public support. Subtract line 5 from						
	line 4.						
<u>s</u>	ection B. Total Support		T		1	1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income. Do not include gain or						-
	loss from the sale of capital assets						
	(Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	n tax year as a sec	tion 501(c)(3) org	anization,
	check this box and stop here					▶ [
S	ection C. Computation of Publi						
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11,	column (f))		14	-
15	Public support percentage for 2018 Sc	hedule A, Part II,	line 14			15	
16a	33 1/3% support test—2019. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
b	33 1/3% support test—2018. If th	e organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ 🗆
17 a	10%-facts-and-circumstances tes	t— 2019. If the org	ganization did not	check a box on lin	ne 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. Exin Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly su						e re. Explain icly supported	
	organization			-			►□
h	10%-facts-and-circumstances tes	st— 2018. If the o	rganization did no	t check a box on I	ine 13, 16a, 16b,	or 17a, and line	
_	15 is 10% or more, and if the organiz	zation meets the "i	facts-and-circums	tances" test, chec	k this box and sto	p here.	
	Explain in Part VI how the organization			-		• •	. \Box
_	supported organization		haven 15 40-4	C- 10b 47 4	76		▶⊔
18	_						. □
	instructions		<u> </u>		- Cabadu	lo A (Form 000 o	▶ ⊔

to or expended on its behalf. . The value of services or facilities

Part III

4,988,096

481,443

	the organization fails to qualify under the tests listed below, please complete Part II.)									
S	Section A. Public Support									
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	1,885,000	1,355,005	720,402	475,000	475,000	4,910,407			
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	978	27,650	27,250	15,368	6,443	77,689			
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									

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If

	furnished by a governmental unit to the organization without charge					
6	Total. Add lines 1 through 5	1,885,978	1,382,655	747,652	490,368	
7a	Amounts included on lines 1, 2, and					
	3 received from disqualified persons					
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.					
С	Add lines 7a and 7b					

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

с 8	Add lines 7a and 7b Public support. (Subtract line 7c from line 6.)						4,988,096
Se	ction B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	1,885,978	1,382,655	747,652	490,368	481,443	4,988,096
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	837	1,230	124,222	592	342	127,223
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
C	Add lines 10a and 10b.	837	1,230	124,222	592	342	127,223

_	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6	1,885,978	1,382,655	747,652	490,368	481,4	143 4,988	3,096
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	837	1,230	124,222	592	;	342 127	7,223
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.							
С	Add lines 10a and 10b.	837	1,230	124,222	592	;	342 127	7,223
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.)				454	2,9	960 3	3,414
13	Total support. (Add lines 9, 10c, 11, and 12.).	1,886,815	1,383,885	871,874	491,414	484,	745 5,118	8,733
14	First five years. If the Form 990 is fo	r the organization'	s first, second, th	ird, fourth, or fifth	n tax year as a sec	tion 501(c)(3) organization,	
	check this box and stop here						▶ 🗆	
Se	ction C. Computation of Public							_
	Dublic commant management for 2010 (lin			- ali (6\)		1 1		

	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975.							
С	Add lines 10a and 10b.	837	1,230	124,222	592		342	127,223
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is							
	regularly carried on.							
12								
	or loss from the sale of capital				454		2,960	3,414
	assets (Explain in Part VI.) . .							
13	Total support. (Add lines 9, 10c,	1,886,815	1,383,885	871,874	491,414	Ι	484.745	5,118,733
	11, and 12.)	. ,	, ,	·	· ·			<u> </u>
14	First five years. If the Form 990 is fo	or the organization	ı's first, second, th	nird, fourth, or fift	h tax year as a se	ection 501(c)(3) or	rganization,
	check this box and stop here							▶ 🗆
Se	ction C. Computation of Public	Support Perce	ntage					
15	Public support percentage for 2019 (lin	ne 8, column (f) d	ivided by line 13,	column (f))		15		97.450 %
	Dublic cupport percentage from 2019	Cobodulo A Dart I	II line 1E					27.700

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		<u> ▶ □</u>				
Se	ection C. Computation of Public Support Percentage						
15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	97.450 %				
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	97.730 %				
Se	ection D. Computation of Investment Income Percentage						
17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	2.000 %				
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	2.000 %				
19a	9a 331/3% support tests—2019. 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						

1 1 1 more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support tests—2018. 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 \blacktriangleright 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions \blacktriangleright Schedule A (Form 990 or 990-EZ) 2019 Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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. 1 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). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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. 3b 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. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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

4b supervised by or in connection with its supported organizations. 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. 4c 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 5a amendment to the organizing document).

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? 5b

5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) 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. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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. 9a

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

```
Did a disqualified person (as defined in line 9a) 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.
```

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

ciie	ddie A (Form 990 of 990-22) 2019			age :	
Pai	Tt IV Supporting Organizations (continued)				
			Yes	No	
	Has the organization accepted a gift or contribution from any of the following persons?				
а	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?	11a			
b	A family member of a person described in (a) above?	11b			
	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 .	11c			
	ection B. Type I Supporting Organizations				
	solon Britype Leapporting enganizations		Yes	No	
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.				
	Did the supprise time and the bounds of any supprised arraying the standard arraying the supprised arraying the	1			
2	the organization operate for the benefit of any supported organization other than the supported organization(s) that erated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit ried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting				
	organization.	2			
S	ection C. Type II Supporting Organizations				
	second Type 11 supporting organizations		Yes	No	
L	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).	1			
S	ection D. All Type III Supporting Organizations				
			Yes	No	
L	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing				
	documents in effect on the date of notification, to the extent not previously provided?	1			
2	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization etained 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.	3			
Se	ection E. Type III Functionally-Integrated Supporting Organizations				
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):			
ā	The organization satisfied the Activities Test. Complete line 2 below.				
ŀ	The organization is the parent of each of its supported organizations. Complete line 3 below.				
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)		
2	Activities Test. Answer (a) and (b) below.	1	Yes	No	
â	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.	2a			
ŀ	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.	2b			
3	Parent of Supported Organizations. Answer (a) and (b) below.	20			
	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? <i>Provide details in Part VI</i> .	3a			
i	Did the organizations? Provide details in Part VI. 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.	3h			

	ule A (Form 990 or 990-EZ) 2019			Pag				
ar	Type III Non-Functionally Integrated 509(a)(3) Supporting O)rgani:	zations					
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). 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):	1						
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1 b						
С	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						
5	Multiply line 5 by .035	6						
7	Recoveries of prior-year distributions	7						
3	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	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrate	ed Type III supporting o	rganization (see				

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

5	Qualified set-aside amounts (prior IRS approval require			
6	Other distributions (describe in Part VI). See instruction			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whe details in Part VI). See instructions	nich the organization is respon	sive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable

other distributions (describe in Fare 42). See instructions				
7 Total annual distributions. Add lines 1 through 6.				
nich the organization is respon	sive (provide			
10 Line 8 amount divided by Line 9 amount				
(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019		
	Underdistributions	Distributable		
		nich the organization is responsive (provide		

Schedule A (Form 990 or 990-EZ) (2019)

3 Excess distributions carryover, if any, to 2019:

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. **d** Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a From 2014. **b** From 2015. c From 2016. **d** From 2017. e From 2018. f Total of lines 3a through e

instructions)

See instructions.

3j and 4c. 8 Breakdown of line 7:

\$

Additional Data

Software ID: Software Version:

EIN: 22-1500498

Name: Consumers Research Inc

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493289002250

OMB No. 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

2019

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	me of the organization Isumers Research Inc			E	mployer identifi	cation nur	nber
	Samo (1050a) 311 2110			22	2-1500498		
Pa	Organizations Maintaining Donor Advis Complete if the organization answered "Ye				ccounts.		
	complete if the organization answered Te		or advised funds		(b) Funds and	other acco	unts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex					☐ Ye:	s 🗆 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor,	or for any other p	urpose conf			s 🏻 No
Pa	Conservation Easements. Complete if the organization answered "Ye	s" on Form 990	, Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organ						
	Preservation of land for public use (e.g., recreation	•		on of an hist	orically important	t land area	
	Protection of natural habitat	,	_		fied historic struc		
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conserva	ition contribution i	n the form o	f a conservation Held at the	End of th	e Vear
а	Total number of conservation easements			2a	_	Liid Oi tii	c rear
b	Total acreage restricted by conservation easements			2b	,		
С	Number of conservation easements on a certified historic	c structure include	ed in (a)	. 20	;		
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06	, and not on a hist	oric 2d	I		
3	Number of conservation easements modified, transferre tax year ▶	d, released, extin	guished, or termin	ated by the	organization durii	ng the	
4	Number of states where property subject to conservation	n easement is loc	ated ►				
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds			andling of vi		Yes 🗌	No
6	Staff and volunteer hours devoted to monitoring, inspect	ting, handling of	violations, and enf	orcing conse	rvation easement	s during th	e year
7	Amount of expenses incurred in monitoring, inspecting, ▶ \$	handling of violat	ions, and enforcing	g conservatio	on easements dur	ing the yea	ır
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$?	above satisfy the	requirements of s	ection 170(h		Yes 🗌	No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the o				:	
Par	TIII Organizations Maintaining Collections Complete if the organization answered "Ye				Similar Assets).	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition,	education, or rese	arch in furth			s of
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publical following amounts relating to these items:	6 (ASC 958), to r	eport in its revenu	e statement			
((i) Revenue included on Form 990, Part VIII, line 1				. ▶\$		
	ii)Assets included in Form 990, Part X				'		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS	cal treasures, or c	ther similar assets	for financia	•	e	
а	Revenue included on Form 990, Part VIII, line 1				• \$		
b	Assets included in Form 990, Part X				▶\$		
For I	Paperwork Reduction Act Notice, see the Instruction					D (Form	990) 201

Par	3 + + +	Organizations Maintaining Co	llections of Art, F	listorica	l Tre	asures, o	r Other	Similar As	sets (conti	inued)
3		the organization's acquisition, accessio (check all that apply):	n, and other records,	check an	y of th	e following	that are a	significant us	se of its coll	ection
а		Public exhibition		d	□ ь	oan or exch	ange prog	ırams		
b		Scholarly research		e	□ 0	ther				
c		Preservation for future generations								
4	Provide Part	de a description of the organization's co	llections and explain	how they	further	r the organi	zation's e	xempt purpos	se in	
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							☐ Yes	□ No
Par	t IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990, I	Part I\	/, line 9, o	r reporte	ed an amoui	nt on Forn	n 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?							Yes	□ No
b	If "Y∈	es," explain the arrangement in Part XII:	I and complete the fo	llowing ta	ble:			An	nount	
c		ning balance	,	_			1c			
d	_	ions during the year					1d			
e		butions during the year					1e			
f		ig balance					1f			
								1.111. 2	П.,	
2a		ne organization include an amount on Fo								∐ No
b		es," explain the arrangement in Part XIII	. Check here if the ex	xplanation	has b	een provide	d in Part	XIII	Ц	
Pa	rt V	Endowment Funds. Complete if the organization answ	wered "Vec" on For	m 000 I)2r+ T\	/ line 10				
		Complete if the organization anso	(a) Current year	(b) Prio	r year		ears back	(d) Three year	rs back (e)	Four years back
1 a	Beginn	ing of year balance			-					
b	Contrib	outions								_
С	Net inv	estment earnings, gains, and losses								
d	Grants	or scholarships								
		expenditures for facilities ograms								
f	Admini	strative expenses								
g	End of	year balance								
2	Provid	de the estimated percentage of the curr	ent year end balance	(line 1g,	columr	n (a)) held a	as:			
а	Board	d designated or quasi-endowment >								
b	Perm	anent endowment ►								
c	Temp	orarily restricted endowment >								
-		 percentages on lines 2a, 2b, and 2c shou	uld equal 100%.							
3а		here endowment funds not in the posses	ssion of the organizat	ion that a	re helc	d and admin	istered fo	r the		Yes No
	(i) ur	nrelated organizations							3a(i)	
		elated organizations							3a(ii)	
		es" on 3a(ii), are the related organization							3b	
4		ribe in Part XIII the intended uses of the		wment fur	ds.					
Par	t VI	Land, Buildings, and Equipme Complete if the organization answ		m 000 I	ort IV	/ lino 11a	Soo Eo	rm QQQ Dar	+ V lino 1	0
	Descri	ption of property (a) Cost or ot (investment)	her basis (b) Cost			er) (c) Acc				ook value
1a	Land									
		gs								
		nold improvements								
		nent								
		lines 1a through 1e. (Column (d) must	equal Form 990. Part	X. colum	1 (B) I	line 10(c))		>		
, o ca	/ .uu	La ambagii Le. (coluiilii (a) illasti	equal i olili ooo, rait	A, Coluin	. (-), '	= 5(5).)		-		

Part VII Investments—Other Securities.) + T) / :	11h C F 000	Doub V. Bing 4.2
Complete if the organization answered "Yes" on Form 990, P (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, P (a) Description of investment	art IV, li	ne 11c. See Form 990, (b) Book value	Part X, line 13. (c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Pa	art IV, lin	ne 11d. See Form 990, Pai	
(a) Description			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Pa	art IV, lin	ne 11e or 11f.See Form	990, Part X, line 25.
 (a) Description of liability (1) Federal income taxes 			(b) Book value
(2)			
(3)			
(4) (5)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (h) must equal Form 990, Part Y, col (R) line 25.)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote	e to the or	ganization's financial state	
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check h	ere if the		een provided in Part XIII Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

chedule D (Form 990) 2019		
Part XIII Supplemental Information (continued)		
Return Reference Explanation		

Schedule D (Form 990) 2019

Additional Data

Software ID:

Software Version:

EIN: 22-1500498

Name: Consumers Research Inc

Explanation

Supplemental Information

Return Reference

	·
Footnote for uncertain tax position under FIN 48 (Part X)	The Organization is exempt from the payment of income taxes on its exempt activities under Section 501(c)(3) of the Internal Revenue Code. The Organization follows the Financial Ac counting Standards Board Accounting Standards Codification, which provides guidance on acc ounting for uncertainty in income taxes recognized in the Organizations financial statemen ts, if any. As of December 31, 2019, the Organization had no unrecognized tax benefits rel ated to uncertain tax positions in its information return that would qualify for either re cognition or disclosure in its financial statements. The Organizations policy would be to recognize interest and penalties on tax positions related to its unrecognized tax benefit s in income tax expense in the financial statements. Through year end, there have been no matters that would have resulted in an accrual for interest and/or penalties. Generally, t he tax years before 2016 are no longer subject to examination by federal, state, or local taxing authorities.

CHIC GIVAL HIE	C print - DO NO	T PROCES	S As F	iled Data -				D	LN: 93	34932	8900	12250
Schedule L		Tran	sactio	ns with li	ntereste	d Person	s		0	MB No.	1545	-0047
(Form 990 or 990	-EZ) ► Complet	e if the orga	anization a	inswered "Yes 3c, or Form 99	s" on Form 9	90, Part IV, li	nes 25a,	25b, 2	6,	20)19	9
			► Atta	ch to Form 99	0 or Form 99	0-EZ.						
Department of the Trea internal Revenue Servi		io to <u>www.ii</u>	rs.gov/For	<u>m990</u> for inst	ructions and	the latest inf	ormatio	n.		Open Insi	to Pu sectio	
Name of the orga	anization						Empl	oyer id	entific			
Consumers Researc	th Inc						22-15	00498				
Part I Exce	ss Benefit Tran	sactions (section 501	(c)(3), section	501(c)(4), and	section 501(c			ns only).		
Compl	ete if the organiza											
1 (a)) Name of disqualit	fied person	(b)	Relationship be	etween disqual organization	lified person an		Descrip transact				ected?
				•	Ji gaimzadion			u ansaci	1011	_ Y	es	No
2 Futuritha an	mount of tax incurr											
	mount of tax, if any						: :	: }	\$ — \$ —			
	ans to and/or F											
Con	nplete if the organi	zation answe	red "Yes" o	n Form 990-EZ	, Part V, line 3	88a, or Form 99	0, Part I	/, line 2	5; or if	the org	ganizat	ion
Con		zation answe n Form 990, l	red "Yes" o Part X, line	n Form 990-EZ 5, 6, or 22	, Part V, line 3	8a, or Form 99	(g) In	· (h)		ganizat i) Writ	
Con repo (a) Name of	nplete if the organi orted an amount o	zation answe n Form 990, I (c) Purpose	ered "Yes" o Part X, line (d) Loan	n Form 990-EZ 5, 6, or 22	,	,		(Appro	h) ved by rd or			ten
Con repo (a) Name of	nplete if the organi orted an amount or (b) Relationship	zation answe n Form 990, I (c) Purpose	ered "Yes" o Part X, line (d) Loan	n Form 990-EZ 5, 6, or 22 to or from the	(e) Original principal	(f) Balance	(g) In	Appro boa comn	h) ved by		i) Writ Jreeme	ten
Con repo (a) Name of interested person	nplete if the organiorted an amount of (b) Relationship with organization	zation answe n Form 990, I (c) Purpose	ered "Yes" o Part X, line (d) Loan orga	n Form 990-EZ 5, 6, or 22 to or from the nization?	(e) Original principal	(f) Balance	(g) In default	Approboa comm	h) ved by rd or nittee?	(i ag	i) Writ Jreeme	ten ent?
Con repo (a) Name of interested person	nplete if the organiorted an amount of (b) Relationship with organization	zation answe n Form 990, (c) Purpose of loan	ered "Yes" o Part X, line (d) Loan orga	n Form 990-EZ 5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) In default?	Approboa comm	h) ved by rd or nittee?	Yes	i) Writ Jreeme	ten ent?
Con repo (a) Name of interested person	nplete if the organiorted an amount of (b) Relationship with organization	zation answe n Form 990, (c) Purpose of loan	ered "Yes" o Part X, line (d) Loan orga	n Form 990-EZ 5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) In default?	Approboa comm	h) ved by rd or nittee?	Yes	i) Writ Jreeme	ten ent?
Con repo (a) Name of interested person	nplete if the organiorted an amount of (b) Relationship with organization	zation answe n Form 990, (c) Purpose of loan	ered "Yes" o Part X, line (d) Loan orga	n Form 990-EZ 5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) In default?	Approboa comm	h) ved by rd or nittee?	Yes	i) Writ Jreeme	ten ent?
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Explanation

Schedule I. (Form 990 or 990-F7) 2019

Return Reference

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493289002250 OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 2019 (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Department of the Treasury **Employer identification number** Namel Betherofganization Consumers Research Inc. 22-1500498 990 Schedule O, Supplemental Information Return **Explanation** Reference Form 990 1.The Organizations Executive director is responsible for the timely preparation of the Fo governing rm 990. The Organizations 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 dra body review Part VI line ft Form 990 (including required schedules) will be distributed to the audit committee in e 11 ither 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 t he 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 a approval. Any ques tions or concerns will be noted and addressed, and management staff will ensure that chang es are incorporated into the Form 990 as appropriate. 4. After all input has been appropria tely addressed, the final version of the Form 990 with required schedules) will be distrib uted to every voting member of the Organizations Board of Directors prior to filing with t he IRS. The final form may be distributed either in paper or electric form in any manner d eemed appropriate by the Organizations Executive Director.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Conflict of interest policy compliance Part VI line 12c	Whenever a Director or Officer has a financial or personal interest in any matter coming be fore the Board of Directors, the Board shall ensure that:1. The interest of such Officer or Director is fully disclosed to the Board of Directors. 2. No interest of such 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.

990 Schedule O, Supplemental Information

Return Reference	Explanation
CEO executive director top management comp Part VI line 15a	Process for determining compensation (namely the executive director and key employees):Rev iew and approval by independent persons, comparability data, and contemporaneous substanti ation 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 no t employed by the non-profit) recommend the proposed salary of the Executive Director (or key employee) and the full board of directors independently reviews and approved the salar y. (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.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Governing documents etc available	Availability of Governing and Financial Documents to Public:Consumers research makes its g overning documents, conflict of interest policy, and financial statements available to the public upon request. Interested parties may submit a request through out online contact f
to public Part VI line 19	orm located on the contact us page of our website (www.consumersresaerch.org) or they may submit a request to Consumers Research via email at info@consumersresearch.org.