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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	200	7 calendar year, or tax year beginning		and end	ling				
	Check if applicat		Please use IRS				D Emplo	yer identific	ation number	r
	Addr	ess ge	label or Center for Union Fac-	ts			20	-40369	46	
	Name	е	type Number and street (or P.O. hov if mail is no	t delivered to street address	)	Room/suite	E Teleph	ione numbei	 r	
	Initial returi	Ĭ,	Specific 1090 Vermont Ave. N.		,	800		2-463-		
	Term	ın-	Instruc- tions City or town, state or country, and ZIP + 4				F Account	ing method	Cash X	Accrual
	Amer	nded	Washington, DC 2000	5				her ecify)		'
		cation	<ul> <li>Section 501(c)(3) organizations and 4947(a)(1</li> </ul>		sts	H and I are not appl			7 organizatı	ons.
	,		must attach a completed Schedule A (Form 99	0 or 990-EZ).		H(a) is this a group r				XNo
G V	Nebsi	te: 🕨	www.unionfacts.com		4	H(b) If "Yes," enter nu			N/A	
J	Organi	zatio	in type (check only one) $\triangleright$ X 501(c) (3)	no) 4947(a)(1) or		H(c) Are all affiliates i	ncluded?	, –	Yes	No
K	Check	here	If the organization is not a 509(a)(3) suppor	ting organization and its gros	ss	(If "No," attach a H(d) Is this a separate	list )	lad by an or-	_	
			normally not more than \$25,000 A return is not requi			ganization cover	ed by a g	roup ruling?	Yes	X No
			file a return, be sure to file a complete return	•		I Group Exemptio	n Numbe	r ▶	N/A	
						M Check ►	if the org	anization is n	ot required t	o attach
<u>L</u> (	Gross	recei	pts Add lines 6b, 8b, 9b, and 10b to line 12 ▶	2,496,63	9.	Sch B (Form 99	_		•	
Pε	rt I	R	evenue, Expenses, and Changes in I	<b>Net Assets or Fund</b>	Balar	nces				
	1	C	ontributions, gifts, grants, and similar amounts receive	ed						<u></u>
		a C	ontributions to donor advised funds		1a					
		b D	rect public support (not included on line 1a)		1b	2,489,4	09.			
		c In	ndirect public support (not included on line 1a)		10					
		d G	overnment contributions (grants) (not included on line	e 1a)	1d					
		e T	otal (add lines 1a through 1d) (cash \$2, 4 t	89,409 . noncash \$			)	1e 2	2,489,4	109.
	2	Р	rogram service revenue including government fees an	d contracts (from Part VII, lir	ne 93)			2	4,]	152.
	3	M	lembership dues and assessments					3		
	4	In	nterest on savings and temporary cash investments					4	2,7	718.
	5	D	ividends and interest from securities					5	•	
99	6	a G	ross rents		6a					
2008		b L	ess rental expenses		6b					
<b>രം</b>		c N	et rental income or (loss). Subtract line 6b from line 6	a		***		6c		
evenue	7	0	ther investment income (describe 🕨				. )	7		
<b>ڇُ</b> ٽ	8	a G	ross amount from sales of assets other	(A) Securities		(B) Other			· —	
		th	nan Inventory		8a					
Ω		b Le	ess cost or other basis and sales expenses		8b		65.			
		c G	aın or (loss) (attach schedule)		8c		<u>65.</u> >			
Ź			et gain or (loss) Combine line 8c, columns (A) and (B	•		Stmt	1	8d	< 4	<u> 165.</u> >
	9	S	pecial events and activities (attach schedule). If any an	nount is from <b>gaming</b> , check	here 🟲	· 🗀	-			
ပ္ထိ		<b>a</b> Gr	ross revenue (not including \$ of	contributions reported on line 1b)	9a	·				
00	i	b Le	ess direct expenses other than fundraising expenses		9b					
			et income or (loss) from special events. Subtract line s	9b from line 9a	1 1			9c		
	10	a G	ross sales of inventory, less returns and allowances		10a					
			ess cost of good ENCEIVED		10b	<del></del>				
			ross profit o <del>r (loss) from sales</del> of inventory attach sci	nedule) Subtract line 10b fro	m line 10	0a		10c		
	11		ther revenue (from Part VIII, Be 2008 )				<u> </u>	11		360.
	12		otal revenue Add lines 1e, 2, 3, 4, 5, 6c, 7 81 9c, 10	c, and 11		<del></del> ,			496,1	
Š	13		rogram services (from time 44 column (B))						2,247,9	
Expenses	14		lanagement and general (#formune: 44; column (C))				_	14	53,6	
хbе	15		undraising (from line 44, column (D))				_	15	250,0	108.
ű	16		ayments to affiliates (attach schedule)					16		-00
	17		otal expenses. Add lines 16 and 44, column (A)	. 10		<del></del>	1		2,551,6	
_ş	19		xcess or (deficit) for the year. Subtract line 17 from line					18	<55,5	
Net Assets	20		et assets or fund balances at beginning of year (from I	• • •			$\vdash$	19	956,0	
¥	21		ther changes in net assets or fund balances (attach ex	•			_	20	000 -	0.
7230 12-27			et assets or fund balances at end of year Combine line					21	900,5	
12-27	7-07	LH	IA For Privacy Act and Paperwork Reduction Act N	unce, see the separate inst	ructions	•			Form <b>990</b>	(2007)

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equired for section It optional for oth	n 501(c)(3)
anagement d general	(D) Fundraising
1,500.	2,291.
0.	0.
:	
	242.
45,740. 1,532.	1 250
1,532.	1,259.
	214. 11,590.
	,
	12,171. 51 314

				I (D) are required for section trusts but optional for othe	
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds		·	-		
(attach schedule)					
(cash \$ 0 • noncash \$ 0 •				1	
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule	.)				
(cash \$ 0 • noncash \$ 0	,				
If this amount includes foreign grants, check here	22b				
23 Specific assistance to individuals (attach					
schedule)	23				
24 Benefits paid to or for members (attach				1	
schedule)	24				
25a Compensation of current officers, directors, key					
employees, etc listed in Part V-A	25a	6,082.	2,291.	1,500.	2,291.
<b>b</b> Compensation of former officers, directors, key					-,
employees, etc listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included	1				
above, to disqualified persons (as defined under					
section 4958(f)(1)) and persons described in	1 1				
	25c				
section 4958(c)(3)(B)	236		<del></del> .		
26 Salaries and wages of employees not included on lines 25a, b, and c	26				
• •	20				2/2
27 Pension plan contributions not included on lines 25a, b, and c	27				
	27				
28 Employee benefits not included on lines					
25a · 27	28	484.	242.		242.
29 Payroll taxes	29	404.	242.		242.
30 Professional fundraising fees	30	45,740.		45 740	
31 Accounting fees	31	3,791.	1 000	45,740. 1,532.	1 250
32 Legal fees	32		1,000.	1,332.	1,259.
33 Supplies	33	1,280.	1,236.		44.
34 Telephone	34	257.	43.		214.
35 Postage and shipping	35	17,593.	6,003.		11,590.
36 Occupancy	36	1 500	1 500		
37 Equipment rental and maintenance	37	1,528.	1,528.		
38 Printing and publications	38	59,675.	47,504.		12,171.
39 Travel	39	64,034.	12,720.		51,314.
40 Conferences, conventions, and meetings	40	1,592.	616.	<79.	1,055.
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	1,103.	1,103.		
43 Other expenses not covered above (Itemize):					
a	43a		VI 70		
b	43b				
C	43c				<del></del>
d	43d		. <u> </u>		
B	43e	<u></u>			
f	43f				
g See Statement 2	43g	2,348,540.	2,173,712.	5,000.	169,828.
44 Total functional expenses Add lines 22a through		ļ			-
43g (Organizations completing columns (B)-(D),					-
carry these totals to lines 13-15)	44	2,551,699.	2,247,998.	53,693.	250,008.
Joint Costs. Check ▶ ☐ If you are following	SOP				
Are any joint costs from a combined educational campai			orted in (B) Program service	ces? ►	Yes X No
If "Yes," enter (i) the aggregate amount of these joint cos		!-	ii) the amount allocated to		N/A
(iii) the amount allocated to Management and general \$		/-	iv) the amount allocated to		N/A
723011 12-27-07					Form <b>990</b> (2007)

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

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

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) 94047(4)(1) torganizations and 4947(a)(1) moreover charitable trusts must also enter the amount of grants and allocations to others.)  a Placed educational ads in 22 National and Regional newspapers and ran a series of educational online advertising to encourage the public to visit www.unionfacts.com. Television ads were shown on National cable in an effort to promote the results of its extensive research on labor unions and their financial expenditures. (Grants and allocations \$ ) If this amount includes foreign grants, check here  1,366.  b See Statement 3  (Grants and allocations \$ ) If this amount includes foreign grants, check here  2,365.  (Grants and allocations \$ ) If this amount includes foreign grants, check here  2,365.  (Grants and allocations \$ ) If this amount includes foreign grants, check here  2,365.  (Grants and allocations \$ ) If this amount includes foreign grants, check here  2,387.  (Grants and allocations \$ ) If this amount includes foreign grants, check here  2,387.  (Grants and allocations \$ ) If this amount includes foreign grants, check here  2,387.	► See Statement 5 Program Service Expenses	What is the organization's primary exempt pu
newspapers and ran a series of educational online advertising to encourage the public to visit  www.unionfacts.com. Television ads were shown on National cable in an effort to promote the results of its extensive research on labor unions and their financial expenditures.  (Grants and allocations \$ ) If this amount includes foreign grants, check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	evements that are not measurable. (Section 501(c)(3) and (4) 4947(a)(1) trusts, but	lients served, publications issued, etc. Discu
C Maintained a research-based website and blog to educate the public on labor union issues.  (Grants and allocations \$ ) If this amount includes foreign grants, check here ■ 365 description   365 description	the public to visit evision ads were shown on National bmote the results of its extensive and their financial expenditures.	newspapers and ran a advertising to encount www.unionfacts.com. cable in an effort to research on labor unionfacts and allocations \$
d See Statement 4  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □ 387  e Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	sed website and blog to educate the	c Maintained a research
e Other program services (attach schedule)  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	) If this amount includes foreign grants, check here ► □ 365,368.	
1 Total of Flogram Screece Expenses (should equal line 44; Column (b), Flogram services)	) If this amount includes foreign grants, check here	e Other program services (attach schedule) (Grants and allocations \$

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Note		ere required, attached schedules and amounts wuld be for end-of-year amounts only.	ithin the description column	(A) Beginning of year		(B) End of year
	45	Cash · non-interest-bearing		29,288.	45	205,114.
	46	Savings and temporary cash investments		1,104,128.	46	833,813.
			1 1			
			47a		[	
	b	Less: allowance for doubtful accounts	47b		47c	
	48 a	Pledges receivable	48a 35,650.			
	b	Less: allowance for doubtful accounts	48b	15,824.	48c	35,650.
	49	Grants receivable	400	20/0211	49	
	Į.	Receivables from current and former officers, of	directors, trustees, and	, , , , , , , , , , , , , , , , , , , ,		
		key employees Statement 6			50a	4,529.
	b	Receivables from other disqualified persons (as	s defined under section			
ţ		4958(f)(1)) and persons described in section 49	958(c)(3)(B)		50b	
Assets	51 a	Other notes and loans receivable	51a			
₹	ь	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54 a	Investments - publicly-traded securities	Cost FMV		54a	
	b		Cost FMV		54b	
	55 a	Investments - land, buildings, and			li	
		equipment: basis	55a			
	١.					
	_ b		55b		55c 56	<del></del>
	56   57 a	Investments - other	57a 4,184.		30	
	ı	Land, buildings, and equipment: basis  Less: accumulated depreciation Stmt 7	57b 1,623.	4,129.	57c	2,561.
	58	Other assets, including program-related investments	1,023.	1/127.	3/6	2,301.
	**		ee Statement 8	413.	58	6,922.
	59	Total assets (must equal line 74). Add lines 45		1,153,782.	59	1,088,589.
	60	Accounts payable and accrued expenses		11,804.	60	17,031.
	61	Grants payable		· · · · · · · · · · · · · · · · · · ·	61	
	62	Deferred revenue			62	
bilities	63	Loans from officers, directors, trustees, and ke	y employees Stmt 9	185,911.	63	171,016.
Ξ	64 a	Tax-exempt bond liabilities		· · · · · · · · · · · · · · · · · · ·	64a	
Ë	b	Mortgages and other notes payable		•	64b	
	65	Other liabilities (describe	)	0.	65	0.
				107 715	-	100 047
	66	Total liabilities. Add lines 60 through 65 enizations that follow SFAS 117, check here		197,715.	66	188,047.
	Orga	67 through 69 and lines 73 and 74.	and complete lines			
es	67	Unrestricted		956,067.	67	900,542.
auc	68	Temporarily restricted	-	230,007.	68	700,342.
Bai	69	Permanently restricted	-		69	
P	l	anizations that do not follow SFAS 117, check	here ▶ ☐ and		05	
Ţ		complete lines 70 through 74.				
SOI	70	Capital stock, trust principal, or current funds			70	
set	71	Paid-in or capital surplus, or land, building, and	l equipment fund		71	
Net Assets or Fund Balances	72	Retained earnings, endowment, accumulated i	· · · —		72	
Š	73	Total net assets or fund balances Add lines 67 thro	ugh 69 or lines 70 through 72			
	ĺ	(Column (A) must equal line 19 and column (B) must		956,067.	73	900,542.
	74	Total liabilities and net assets/fund balances	s. Add lines 66 and 73	1,153,782.	74	1,088,589.

For	m 990 (2007) Center for Union Facts	20-	40	3694 <u>6</u>	Page 5
Pε	Reconciliation of Revenue per Audited Financial Statements With Revenue instructions)	per Re	tur	n (See the	
a	Total revenue, gains, and other support per audited financial statements		а	2,496	,639.
b	Amounts included on line a but not on Part I, line 12:				
1	Net unrealized gains on investments				
2	Donated services and use of facilities b2				
3	Recoveries of prior year grants				
4	Other (specify): Loss on Asset Disposal b4	465.			
	Add lines b1 through b4		b		465.
C	Subtract line <b>b</b> from line <b>a</b>		C	2,496	,174.
d	Amounts included on Part I, line 12, but not on line a:				
1	Investment expenses not included on Part I, line 6b				
2	Other (specify):				
	Add lines d1 and d2		d		0.
e		▶	е	2,496	,174.
Pε	art IV-B Reconciliation of Expenses per Audited Financial Statements With Expense	s per F	₹etı		
а	Total expenses and losses per audited financial statements		а	2,552	,164.
b	Amounts included on line a but not on Part I, line 17:				
1	Donated services and use of facilities b1				
2	Prior year adjustments reported on Part I, line 20				
3					
4	Other (specify). Loss on Asset Disposal b4	465.			
	Add lines b1 through b4		ь		465.
C	Subtract line <b>b</b> from line <b>a</b>		С	2,551	,699.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position		(D) Contributions to employee benefit plans & deferred compensation plans	account and
Berman and Company	Management Co	mpany		
1090 Vermont Ave. N.W., #800				
Washington, DC 20005	0.00	839,953.	0.	0.
Joanna Robinson	Director		1	
1090 Vermont Ave. N.W., #800				ı
Washington, DC 20005	1.00	500.	0.	0.
Dan Cronk	Director			
1090 Vermont Ave. N.W., #800				
Washington, DC 20005	1.00	500.	0.	0.
William Tattersall	Director			
1090 Vermont Ave. N.W., #800				
Washington, DC 20005	1.00	500.	0.	0.
Richard Berman	Pres., Exec.	Dir., Dir	•	
1090 Vermont Ave. N.W., #800				
Washington, DC 20005	8.00	4,582.	0.	0.
Bret Jacobson	Sec./Treas.,	Director		
1090 Vermont Ave. N.W., #800		}		
Washington, DC 20005	1.00	0.	0.	0.
				-

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Amounts included on Part I, line 17, but not on line a: 1 Investment expenses not included on Part I, line 6b

Total expenses (Part I, line 17). Add lines c and d

2 Other (specify): Add lines d1 and d2

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Par	t V-A Current Officers, Directors, Trustees, and K	ey Employees (continu	ied)			Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted	to vote on organization but	siness at board	_			
	meetings		▶	5			
b	Are any officers, directors, trustees, or key employees listed in Forn	n 990, Part V-A, or highest o	compensated emp	loyees			
	listed in Schedule A, Part I, or highest compensated professional ar						
	Part II-A or II-B, related to each other through family or business rela					v	
	the individuals and explains the relationship(s)	5	ee Statem	ent 10	75b	X	ļ
C	Do any officers, directors, trustees, or key employees listed in Form						
	listed in Schedule A, Part I, or highest compensated professional ar						
	Part II-A or II-B, receive compensation from any other organizations organization? See the instructions for the definition of "related organization".		able, that are relat See Statem		:	v	}
	-		ee statem	ent ii	75c	X	
н	If "Yes," attach a statement that includes the information described Does the organization have a written conflict of interest policy?	in the instructions.			754	Х	Ì
	t V-B Former Officers, Directors, Trustees, and Ko	ev Employees That B	Received Com	nensation (	75d		!
	Benefits (If any former officer, director, trustee, or key e						ring
	the year, list that person below and enter the amount of co						
	(A) Normand address	(0)	(C) Compensation	(D) Contributions employee benefit	. I V	E) Expe	
	(A) Name and address None	(B) Loans and Advances	(if not paid, enter -0-)	plans & deferred	الما	ccount er allow	
				Compensation plan	is our	<u> </u>	1000
					1		
					$\top$		
					1		
						_	
					4—		
			i				
					+		
					-		
Par	t VI Other Information (See the instructions.)	<u> </u>	!			Yes	No
76	Did the organization make a change in its activities or methods of c	onducting activities? If "Yes	s " attach a detaile	d			
	statement of each change	on adding addition in Tol	o, anaon a dotano		76	]	Х
	Were any changes made in the organizing or governing documents	but not reported to the IRS	3?		77		X
	If "Yes," attach a conformed copy of the changes.	and the state of t			<del></del>		· · · · · · · · · · · · · · · · · · ·
78 a	Did the organization have unrelated business gross income of \$1,00	00 or more during the year	covered by this ret	urn?	78a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	<b>3</b> · <b>,</b> ·		N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial cont	raction during the year? If '	'Yes," attach a sta	tement	79		X
80 a	Is the organization related (other than by association with a statewing						
	membership, governing bodies, trustees, officers, etc., to any other	<del>-</del>			80a		_X
b	If "Yes," enter the name of the organization ► N/A						
		and check whether it is	exempt or	nonexempt			
81 a	Enter direct and indirect political expenditures. (See line 81 instruct	ions.)		0.			
<u>b</u>	Did the organization file Form 1120-POL for this year?				81b		_X_
					Form	990	(2007)

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Pa	rt VI Other Information (continued)			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at su	bstantially			
	less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this				
	amount as revenue in Part I or as an expense in Part II.				
	(See instructions in Part III.)	1/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were				
		I/A	84b_		
85 a		I/A	85a	igsquare	
b		1/A	85b	ļ	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization rece	ved a			
	waiver for proxy tax owed for the prior year.	- 1-			
C		1/A	1		İ
đ	( / / <b>)</b>	1/A	1		
е	· · · · · · · · · · · · · · · · · · ·	1/A	-		ĺ
f	· · · · · · · · · · · · · · · · · · ·	1/A	-		İ
g	(,	1/A	85g	$\sqcup$	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f				
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	- / -			1
		A/N	85h	<b> </b>	ļ
86	501(c)(7) organizations Enter: a Initiation fees and capital contributions included on	7/3			ĺ
		A/N	-		į
_ b		I/A	-		
87		I/A	-		į
b		N/A			
00 -	•		-		
00 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partners	-			İ
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3	57	000		Х
h	If "Yes," complete Part IX	- <b>t</b>	88a	$\vdash$	
U	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning section 512(b)(13)? If "Yes," complete Part XI	OT	88b		X
80 2	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:		0011		<u> </u>
U5 a	section 4911   O • , section 4912   O • , section 4955	0.			İ
h	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit				ĺ
•	transaction during the year or did it become aware of an excess benefit transaction from a prior year?				İ
	If "Yes," attach a statement explaining each transaction		89b		Х
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under		030		
•	sections 4912, 4955, and 4958	0.			Ė
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	0.			Ė
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction		89e	i i	Х
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	<b>,,,,</b>	891		X
q		ganization.	-		
•	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		89g		ĺ
90 a		,	ـــــــــــــــــــــــــــــــــــــــ		
b	Number of employees employed in the pay period that includes March 12, 2007 90b				1
91 a	1 1	(202)	463	-71	06
	Located at ▶ 1090 Vermont Ave. N.W., #800, Washington, DC	ZIP + 4 ▶ 2			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	_		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		91b		Х
	If "Yes," enter the name of the foreign country ▶N/A				į
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank				ĺ
	and Financial Accounts.				
			Form	990 (	(2007)

723162 / 12-27-07

	for Unio	on Fa	cts		20-4	1036946 Page <b>8</b>
Part VI Other Information (continu	ued)					Yes No
c At any time during the calendar year, di	d the organization	on mainta	ain an office outside o	of the Unit	ed States?	91c X
if "Yes," enter the name of the foreign o	ountry 🟲	N	/A			
Section 4947(a)(1) nonexempt chantable	e trusts filing Fo	rm 990 in	lieu of Form 1041- 0	Check her	1 1	▶ □
and enter the amount of tax-exempt into			<del></del>		▶ 92	
Part VII Analysis of Income-Pro	ducing Activ			<del>- , </del>		
Note: Enter gross amounts unless otherwise	°		I business income		d by section 512, 513, or 514	(E)
Indicated.	_	(A) siness	(B) Amount	(C) Exclu-	(D) Amount	Related or exempt
93 Program service revenue.		ode	Amount	sion	Amount	function income
Expense Reimbursemer						3,503.
ь <u>Opinion Editorial Ir</u>	come					100.
c Copy Fees						10.
d Sale of Research Stu	ıdies 🔃					539
e						
f Medicare/Medicaid payments						
g Fees and contracts from government ago	encies					
94 Membership dues and assessments						<del></del>
95 Interest on savings and temporary cash invest	ments			14	2,718.	
96 Dividends and interest from securities						
97 Net rental income or (loss) from real esta	te <sup>.</sup>					······································
a debt-financed property	ļ	······		<u> </u>		
b not debt-financed property			· <del></del>			<del></del>
98 Net rental income or (loss) from personal	property			<del>                                     </del>		
99 Other investment income	property					<del></del>
00 Gain or (loss) from sales of assets			,	1		
other than inventory				18	<465.	•
In Net income or (loss) from special events	<del></del>			+ • •	1103.	
Of Gross profit or (loss) from sales of invent	on,			+ +		
	ory					
<pre>03 Other revenue     a Grant Review Service</pre>				01	150.	
b Sale of Supply Item	<del></del>			01	210.	·-···
Bare of Suppry Item					210.	
<u> </u>	<del></del>		<del></del>	+ +		
<u> </u>	—— <u> </u>			<del></del>		
e					2 (12	4 152
94 Subtotal (add columns (B), (D), and (E)			0	• 1	2,613.	4,152.
Total (add line 104, columns (B), (D), and			5		▶_	6,765.
ote: Line 105 plus line 1e, Part I, should eque						
Explain how each activity for which indexempt purposes (other than by provious See Statement 13	come is reported in ding funds for suc	n column	(E) of Part VII contribute			
Part IX Information Regarding	Taxable Sub	sidiarie	es and Disregard	ded Ent	ities (See the Instruction	s <i>)</i> (E)
Name, address, and EIN of corporation, partnership, or disregarded entity	rcentage of rship interest %		Nature of activities		Total income	End-of-year assets
N/A	% %					
N/A	% %		<del></del>			
Part X Information Regarding 1		englist	ad with Darass	l Banaf	it Contracts (2	Innéminéra - I
(a) Did the organization, during the year, receive (b) Did the organization, during the year, pay pre Note: If "Yes" to (b), file Form 8870 and For	any funds, directly or	y or indire r indirectly	ctly, to pay premiums o , on a personal benefit o	n a persona		Yes X No
						Form <b>990</b> (2007)

1 <b>08</b> Did	the c	organization have a binding written contract in effect on August	17, 2006, covering t	he interest	, rents, roy	yaltıes, ar	nd	i
ann	urties	described in question 107 above?						
Please Sign Here	Under and d	Signature of officer  Richard Berman, President, Executive or print name and title	ring schedules and statem ich preparer has any knowless.  Director	edge	Date	11 /1	and belief, it is true	э, соптест,
Paid Preparer's	sign	ature  len' L Rule  s name (or Berman and Company	Date 11/10/08	Check if self- employed	► □	Preparer's	SSN or PTIN (See	Gen Inst X

1090 Vermont Ave. N.W., Suite 800

Washington, DC 20005

Phone no  $\triangleright$  (202) 463-7100 Form 990 (2007)

Use Only

yours if self-employed),

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

2007

OMB No 1545-0047

Employer identification number Name of the organization Center for Union Facts 20 4036946 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions List each one If there are none, enter "None") (b) Title and average hours (e) Expense account and other allowances d) Contributions to (a) Name and address of each employee paid employee benefit plans & deferred compensation (c) Compensation per week devoted to more than \$50,000 position None Total number of other employees paid over \$50,000 0 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over \$50,000 for professional services 0 Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None" See page 2 of the instructions ) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Berman and Company Management 1090 Vermont Ave NW, #800, Washington, DC 20005 Services 839,953. 1-2-1 Interactive Media Inc. 25 Whitlock Place, Suite 201, Marietta, GA 30064Media Brokerage 441,000. USA Today 7950 Jones Branch Road, McLean, VA 22108 Advertising 262,276. The New York Times 620 8th Ave, 22nd Floor, New York, ÑΥ 10018 155,640. Advertising CBS Outdoor P.O. Box 33074, Newark, ŊJ 07188-0074 Advertising 131,543. Total number of other contractors receiving over \$50,000 for other services 2

2-27-07 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

P	Statements About Activities (See page 2 of the instructions )						Yes	No
	During the year, has the organization attempted to influence national, state, or local legislation, including	ng any attempt to	o influence					
	public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred	in connection w	vith the					1
	lobbying activities ▶ \$\$ 9,575. (Mu	ist equal amount	ts on line 38	, Part VI	-A, or			1
	line i of Part VI-B) VI-A, line 38b				L	1	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A	A Other organiza	ations					į
	checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lob	bying activities						į
!	During the year, has the organization, either directly or indirectly, engaged in any of the following acts trustees, directors, officers, creators, key employees, or members of their families, or with any taxable person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answattach a detailed statement explaining the transactions.)	organization wit	th which any	such				
а	Sale, exchange, or leasing of property?	See S	Statem	ent	15	2a	X	L
b	Lending of money or other extension of credit?	See S	Statem	ent	16 [	2b	X	
C	Furnishing of goods, services, or facilities?	See S	Statem	ent	17	2c	X	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	See S	Statem	ent	18 [	2d	_X	
e	Transfer of any part of its income or assets?					2e		X
a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an	explanation of h	10W					
	the organization determines that recipients qualify to receive payments )					3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?					3b		Х
C	Did the organization receive or hold an easement for conservation purposes, including easements to p	reserve open sp	ace,					l
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement				L	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation ser	rvices?				3d		Х
а	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No,"	complete lines 4	4f					1
	and 4g				L	4a		X
b	Did the organization make any taxable distributions under section 4966?			N/I	<b>.</b> [	4b		
C	Did the organization make a distribution to a donor, donor advisor, or related person?			N/I	<b>A</b> [	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year							(
8	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year				▶ _			0.
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor ac	dvised funds incl	luded on					
	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in	such funds or a	ccounts		▶ _			0.
q	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	ar			▶			0.

Par	ŧ IV	Reason for Non-Private Foundation S	Status (See pages 4 t	hrough 8 of the instructio	ns)									
I certif	y that th	ne organization is not a private foundation because it is (	Please check only ONE a	pplicable box )										
5		A church, convention of churches, or association of ch												
6		A school Section 170(b)(1)(A)(II) (Also complete Part	:V)											
7		A hospital or a cooperative hospital service organization	n Section 170(b)(1)(A)(i	III)										
8		A federal, state, or local government or governmental u												
9		A medical research organization operated in conjunction	n with a hospital Section	n 170(b)(1)(A)(III) Enter t	he hospital's	name, city,								
		and state			·									
10		An organization operated for the benefit of a college or	university owned or ope	rated by a governmental (	ınıt Section	170(b)(1)(A)(	ıv)							
		(Also complete the Support Schedule in Part IV-A)												
11a	X	An organization that normally receives a substantial pa	art of its support from a g	jovernmental unit or from	the general (	oublic								
		Section 170(b)(1)(A)(vi) (Also complete the Support	Schedule in Part IV-A )											
11b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)												
12		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross												
		receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of												
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)												
		by the organization after June 30, 1975. See Section 5	u9(a)(2) (Also complete	tne Support Scheaule ir	ı Paπ IV-A )									
13		An organization that is not controlled by any disqualifie	d persons (other than fo	undation managers) and	otherwise me	ets the requir	ements of section							
		509(a)(3) Check the box that describes the type of sup	porting organization											
		Type I Type II	Type III-Fu	nctionally Integrated		Type III	-Other							
		Provide the following information at	oout the supported organ	nizations. (See page 8 of	the instruction	ons )								
		(a)	(b)	(c)	(d)	)	(e)							
		Name(s) of supported organization(s)	Employer	Type of organization	is the su	Amount of								
			identification number (EIN)	(described in lines 5 through 12 above		on listed in porting	support							
			, , ,	number (EIN)   5 through 12 above   the supporting										
				or IRC section)	organiz									
			•	or IRC section)		documents?								
				or IRC section)	governing	documents?								
				or IRC section)										
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
				or IRC section)	governing	documents?								
Total				or IRC section)	governing	documents?								
Total		An organization organized and operated to test for pub			Yes	documents?								

Pa	Note: You may use the	omplete only it you chi e worksheet in the inst	ecked a box on line 10 ructions for converting	g, 11, or 12.) Use casi g from the accrual to th	n method of acc ne cash method	of acco	<b>ng.</b> Dunting.
	ndar year (or fiscal year ining in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003		(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	3,492,819.					3,492,819.
16	Membership fees received						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose						
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,446.					1,446.
19	Net income from unrelated business						
	activities not included in line 18						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	537.		See Stateme	nt 19		537.
23	Total of lines 15 through 22	3,494,802.	0.	0.		0.	3,494,802.
24	Line 23 minus line 17	3,494,802.					3,494,802.
25_	Enter 1% of line 23	34,948.					
26	Organizations described on lines 10		, ,,		<b>•</b>	26a	69,896.
b	Prepare a list for your records to sho						
	unit or publicly supported organization	•	•	eded the amount shown in	_		750 500
_	Do not file this list with your return.					26b	750,520. 3,494,802.
	Total support for section 509(a)(1) to Add Amounts from column (e) for II	· ·	· '			26c	3,494,802.
u	Add Amounts from Column (e) for it	nes 18 22	$\frac{1,446.}{537.}$ 19	750,52	<u> </u>	264	752,503.
e	Public support (line 26c minus line 2			730732	<del>``</del>	26d 26e	2,742,299.
f	Public support percentage (line 26	•	line 26c (denominator)	١		26f	78.4679%
27	Organizations described on line 12:				disqualified perso		
	records to show the name of, and to						
	such amounts for each year	N/A					
	(2006)	(2005)	•	2004)	(20	,	
b	For any amount included in line 17 th						
	and amount received for each year, t						
	described in lines 5 through 11b, as		•			reen the	amount received and
	the larger amount described in (1) of (2006)		•	•		001	
r	Add Amounts from column (e) for II	(2005)	•	2004)	(20)	J3)	
٠				16 21		276	N/A
d	Add Line 27a total	20 <u></u>	d line 27b total			27d	N/A
е	Public support (line 27c total minus l					27e	N/A
f	Total support for section 509(a)(2) to	•	23, column (e)	▶ 27f	N/A		······································
g	Public support percentage (line 27e			1	<b></b>	279	N/A %
	Investment income percentage (line				<b>&gt;</b>	27h	N/A %
28 U S	Inusual Grants: For an organization de how, for each year, the name of the co eturn. Do not include these grants in li	ine 15		usual grants during 2003 a brief description of the n	through 2006, pre ature of the grant	pare a li Do not	st for your records to file this list with your
72313	1 12-27-07	N	one	. <del>-</del>		Schedu	ile A (Form 990 or 990-EZ) 2007

Private School Questionnaire (See page 9 of the instructions)

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

Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing

Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,

Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known

and other written communications with the public dealing with student admissions, programs, and scholarships?

If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)

	Yes	No								
29										
30										

31

32a

32b

32c

32d

33a

33b

33c

33d

33e

33f

33g

33h

34a

34b

35

32	Does the organization maintain the following	

instrument, or in a resolution of its governing body?

to all parts of the general community it serves?

- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)
- 33 Does the organization discriminate by race in any way with respect to
  - a Students' rights or privileges?
  - b Admissions policies?

31

- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- Athletic programs? g
- h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)

## 34 a Does the organization receive any financial aid or assistance from a governmental agency?

- b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement
- 35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36

Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38

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

Schedule A (Form 990 or 990-EZ) 2007 Center for Union Facts 20-4036946 Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions) (To be completed ONLY by an eligible organization that filed Form 5768) If you checked "a" and "limited control" provisions apply Check ► a if the organization belongs to an affiliated group Check ▶ b (a) (b) Limits on Lobbying Expenditures Affiliated group To be completed for all totals electing organizations (The term "expenditures" means amounts paid or incurred ) N/A 9,575. 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 36 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 37 Total lobbying expenditures (add lines 36 and 37) 38 2,542,124. 39 Other exempt purpose expenditures 39 2,551,699 40 Total exempt purpose expenditures (add lines 38 and 39) 40 Lobbying nontaxable amount. Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is -Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 277**,**585. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 41 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 69,396. 42 Grassroots nontaxable amount (enter 25% of line 41) 42

4-Year Averaging Period Under Section 501(h)

43

44

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

	Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total				
45 Lobbying nontaxable amount	277,585.	277,728.			555,313.				
46 Lobbying ceiling amount (150% of line 45(e))					832,970.				
47 Total lobbying expenditures	0.	0.			0.				
48 Grassroots nontaxable amount	69,396.	69,432.			138,828.				
49 Grassroots ceiling amount (150% of line 48(e))					208,242.				
50 Grassroots lobbying expenditures	9,575.	0.			9,575.				

Part VI-B	Lobbying /	Activity by	Nonelecting	Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions )

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- Total lobbying expenditures (Add lines c through h.)
  - If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

7 62	NO	Amount
	_	
L		0.

Part		garding Transfers To and zations (See page 14 of the Instr		Relationships With Nonchari	table	
51 [		rectly or indirectly engage in any of		organization described in section		
		section 501(c)(3) organizations) or ii		_		
		ganization to a noncharitable exempt	· · · · · · · · · · · · · · · · · · ·	intotr organizations.	Yes	No
	(i) Cash	gamzation to a nonchantable exempt	organization of		51a(i)	X
	(ii) Other assets				a(ii)	X
	Other transactions				4(1.7	+ 1
		****			b(i)	X
	• •	ts with a noncharitable exempt organ	mzation		b(ii)	$\frac{\mathbf{x}}{\mathbf{x}}$
		noncharitable exempt organization			b(iii)	$\frac{\lambda}{X}$
	iii) Rental of facilities, equipme				b(iv)	$\frac{\hat{x}}{x}$
•	iv) Reimbursement arrangeme	nts			b(v)	$\frac{\hat{x}}{x}$
	(v) Loans or loan guarantees					$\frac{\lambda}{X}$
		membership or fundraising solicitat			b(vi)	$\frac{\Lambda}{X}$
		mailing lists, other assets, or paid ei	· •		C	
				lways show the fair market value of the		
		given by the reporting organization	_		N/A	
		nent, show in column (d) the value of	rtne goods, other assets, or		N/F	<u>,                                     </u>
(a) Line no	(b) Amount involved	(c) Name of noncharitable ex	emnt organization	(d) Description of transfers, transactions, and	charing arrange	monte
	Airiodit ilivolved	Name of nonchantable ex		Description of transfers, transactions, and	Silating arrange	
	<u></u>					
	<u> </u>		<del> </del>			
	<u> </u>					
					<u>.</u>	
		<u> </u>				
	-					
	<del> </del>					
(	s the organization directly or inc Code (other than section 501(c) f "Yes," complete the following s	(3)) or in section 527?	one or more tax-exempt org	anizations described in section 501(c) of the	Yes 🖸	☑ No
	(a) Name of org	) ganization	(b) Type of organization	(c) Description of relationsi	hip	
		· · ·				
		· · · · · · · · · · · · · · · · · · ·				
		<u> </u>				
	<del></del>				<del></del>	
		<u></u>				
		<del></del>				

Department of the Treasury Internal Revenue Service

# **Depreciation and Amortization**

(Including Information on Listed Property) See separate instructions.

► Attach to your tax return.

990

OMB No 1545-0172

Sequence No 67

Business or activity to which this form relates Name(s) shown on return Identifying number Center for Union Facts Form 990 Page 2 20-4036946 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 125,000. 1 Maximum amount. See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 500,000. 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If mamed filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III | MACRS Depreciation (Do not include listed property ) (See instructions.) Section A 1,103. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2007 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and (d) Recovery period (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction only - see instructions) 19a 3-year property 5-year property ь 7-year property d 10-year property 15-year property е 20-year property g 25-year property 25 yrs. S/L 27.5 yrs. MM S/L Residential rental property MM S/L 27.5 yrs MM S/L 39 yrs. i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System 20a Class life ь 12-year 12 yrs. S/L 40-year MM S/L 40 yrs. Part IV | Summary (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 1,103. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

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Form 4562 (2007)

Form 4562 (2007) Center for Union Facts 20-4036946 Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, Part V recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes ∫ No ∣ 24b If "Yes," is the evidence written? Yes No (b) (c) (e) (i) (f) (g) (h) Date Business/ Elected Basis for depreciation Type of property Recovery Method/ Depreciation Cost or placed in investment (business/investment section 179 (list vehicles first) deduction Convention other basis period service use percentage cost 25 Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use: S/L· % % S/L· S/L· % 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

			(a)		(b)		(c)		d)	(e)		(f)	
30	Total business/investment miles driven during the	Vehicle		Veh	ıcle	Veh	ıcle	Veh	ıcle	Veh	ncle	Veh	ıcle
	year (do not include commuting miles)												
31	Total commuting miles driven during the year												
32	Total other personal (noncommuting) miles												
	driven											L	
33	Total miles driven during the year.	1				l							
	Add lines 30 through 32												
34	Was the vehicle available for personal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?												
35	Was the vehicle used primarily by a more												
	than 5% owner or related person?												
36	Is another vehicle available for personal												
	use?												

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

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

<u> </u>	ners or related persons.										
37	Do you maintain a written policy statement that	at prohibits all	personal use of vehicles	, including commu	ting, by your	Yes	No				
	employees?						<u> </u>				
38	Do you maintain a written policy statement that	at prohibits pe	rsonal use of vehicles, ex	xcept commuting,	by your						
	employees? See the instructions for vehicles	used by corpo	rate officers, directors, o	r 1% or more own	ers						
39	9 Do you treat all use of vehicles by employees as personal use?										
40	40 Do you provide more than five vehicles to your employees, obtain information from your employees about										
	the use of the vehicles, and retain the informa	tion received?					ļ				
41	Do you meet the requirements concerning qua	alıfıed automol	bile demonstration use?								
	Note: If your answer to 37, 38, 39, 40, or 41 is	"Yes," do not	complete Section B for t	the covered vehicle	es es						
P	art VI Amortization	<del> </del>									
	(a)	(b)	(c)	(d)	(e)	(f)					
	Description of costs	Date amortization	Amortizable amount	Code	Amortization	Amortization for this year					

(a)  Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
2 Amortization of costs that begins during	g your 2007 tax year:				
3 Amortization of costs that began before	e your 2007 tax year		· ·	43	
14 Total. Add amounts in column (f). See	the instructions for whe	ere to report		44	

716252/11-03-07

Form 4562 (2007)

Current Year . Deduction	78.	1,025.	1,103,	¢	0.	0	° O	1,103.			
Current Sec 179			0		0	<u>.</u>	ó	0	 		 
Accumulated Depreciation	6	598.	689	1,424.	1,424.	1,089.	1,089.	3,202.			
Basis For Depreciation	634	4,184.	4,818,	1,424,	1,424.	1,089.	1,089.	7,331.			
Reduction In Basis			0		0		0	0	 		 
Bus % Excl											
Unadjusted Cost Or Basis	634.	4,184.	4,818.	1,424.	1,424.	1,089.	1,089.	7,331.			
So O	17	17		44 W		43	••••••		 		 
Lıfe	7.00	7.00		12M		12M					
Method	042006200DB	021306200DB									
Date	20062	13062		010406248		010406195			 		 
Ac Ac			1.1		ਜੂ	0 1		<u>v</u>	 	****	 
Description	Machinery & Equipment (D) Research Telephone 11 Equipment		Machinery & Equipment	Management and General Expensed 23Drganizational Costs * 900 page 2 motal	Management and General	Fundraising Expensed Start-Up Costs	מים מים	ceralla rocal 390 rage 2 Depr & Amort	 		:
Asset No		12		23		34					

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form 990 Gain	(Loss) From	m Sale of Oth	er A	Assets		Sta	atement	1
Description		Date Acquir		Dat Sol		Meth Acqui		
Research Telephone Equi	pment	04/20/	06	02/13	/07 I	PURCE	HASED	
Name of Buyer	Gross Sales Price	Cost or Other Basis		ense Sale	Depre	ec	Net Ga or (Lo	
Scrapped	0.	634.		0.	1	169.	<4	65 <b>.</b> >
To Fm 990, Part I, ln 8		634.		0.	]	69.	<4	65 <b>.</b> >
Form 990	Ot	ther Expenses	 }			Sta	atement	2
	(A)	(B)		(C	<b>'</b> )		(D)	
Description	Total	Program Service			ement eneral	Fu	ındraisi	ng
Television and Radio Advertising Newspaper	478,144	478,0	82.					62.
Advertising Internet Advertising Billboard and Bus	636,113 52,728							
Advertising Other Media and	215,893	•						
Message Promotion Taxes, Licenses and	297,564	·						
Fees Casual Labor Computer Data Base	7,492 985		26. 85.				4,4	66.
Subscription Service Photocopy, Facsimile	86,875	5. 85,6	86.				1,1	89.
and Email Membership Dues Merchant Fees on	19,576 30		92. 30.				4,8	84.
Website Miscellaneous Expensed Assets Directors' Insurance	45 100 766 5,000	). 5. 5	50. 26.		5,000		,	45. 50. 40.
Other Professional Services Marketing	8,437 152,410	7. 2,3	843.		•		6,0 152,4	
Issue Research Payroll Service	385,606 776	•	06. 888.					88.
Total to Fm 990, ln 43	2,348,540	2,173,7	12.		5,000.	<del>-</del>	169,8	28.

Form 990 Statement of Program Service Accomplishments Statement 3

Description of Program Service Two

Wrote and sent approximately 26 opinion editorials and 19 letters to the editor which were published. Wrote and sent approximately 17 press releases with related information on issues that affect the debate about labor unions. Media outreach resulted in 6 radio and 8 television interviews. Spokespersons were quoted in a total of 62 news stories during 2007.

	Grants	Expenses
To Form 990, Part III, line b		128,379.

Form 990 Statement of Program Service Accomplishments Statement 4

## Description of Program Service Four

Created a project to educate the public on teachers unions. Focused on the Newark, NJ school system, Center for Union Facts (CUF) examined the effects of teachers unions on graduation rates, drop-out rates and test scores. The campaign included billboard, bus and newspaper advertising to educate the public in Newark about the results of CUF's research.

	Grants	Expenses	
To Form 99	0, Part III, line d	387,8	13.
Form 990	Statement of Organization's Primary Exempt Purpose Part III	Statement	5

## Explanation

The organization's primary exempt purpose is research and education regarding issues surrounding labor unions and their activities.

Form 990 Receivables Due From and Other Key Emp	om Officers, Directory Dloyees - Reported		Statement 6
Borrower's Name and Title		Original Loan Amount	
Richard Berman, President/Execu	tive Director	40	•
Date of Maturity Note Date Terms of	Repayment	Interest Rate	
08/06/07 N/A		.00%	
Security Provided by Borrower	Purpose of Loan	ı	
N/A	Inadvertent Dup Reimbursement f		
Description of Consideration		FMV of Consideration	Balance Due
Cash		40.	40.
Borrower's Name and Title		Original Loan Amount	
Richard Berman, President/Execu	tive Director	4,415	•
Date of Maturity Note Date Terms of	Repayment	Interest Rate	
11/28/07 N/A	<del></del>	.00%	
Security Provided by Borrower	Purpose of Loan	1	
N/A	Inadvertent Dup Reimbursement	licate Travel	
Description of Consideration		FMV of Consideration	Balance Due

4,415.

4,415.

Cash

Borrower's Name and Title	Original Loan Amount		
Berman and Company, Management Co		74	•
Date of Maturity Note Date Terms of Re	epayment	Interest Rate	
03/30/07 N/A		.00%	
Security Provided by Borrower	Purpose of Loan		
	Inadvertent Reim Berman and Co's Purchases		
Description of Consideration		FMV of Consideration	Balance Due
Cash		74.	74.
Description Depreciation of Ass	Cost or Other Basis	Accumulated Depreciation	Statement 7  Book Value
Promotional Equipment	4,184.	1,623.	2,561.
Total to Form 990, Part IV, ln 57	4,184.	1,623.	2,561.
Form 990	Other Assets		
			Statement 8
Description		Beginning of Year	Statement 8 End of Year
Description Refunds Due from Vendors Due from Employee Freedom Action	Committee		
Refunds Due from Vendors		of Year 413.	End of Year 5,640.

Form 990 Loans Payable to Officer's, Director's, Etc.					Statement	9	
Lender's	Name and Ti	tle			Original Loan Amount		
Richard E	Berman, Pres	<del></del> ident/Execu	tive Direct	or	16,237	•	
Date of Note	Maturity Date	Terms of	Repayment		Interest Rate		
Various		N/A			.00%		
Security	Provided by	Borrower	Purpose c	f Loan			
N/A			Operating Advance	Expens	es Paid in		
Descripti	ion of Consi	deration			FMV of Consideration	Balance Du	e
Cash					16,237.	16,2	37
Lender's	Name and Ti	tle			Original Loan Amount		
Berman ar	nd Company,	Management	Co.		152,479	<del>-</del> •	
Date of Note	Maturity Date	Terms of	Repayment		Interest Rate		
Various		N/A			.00%		
Security	Provided by	Borrower	Purpose c	f Loan			
N/A		_	Monthly M	lanageme	nt Fees		
Descripti	ion of Consi	deration			FMV of Consideration	Balance Du	e
Staff Wor	rk Hours				152,479.	152,4	<del></del> 79.

Lender's Name and Title		Original Loan Amount	
Berman and Company, Management	. Co.	2,300	•
Date of Maturity Note Date Terms of	Repayment	Interest Rate	
Various N/A		.00%	•
Security Provided by Borrower	Purpose of Lo	oan	
I/A	Operating Exp Advance	enses Paid in	
Description of Consideration		FMV of Consideration	Balance Due
Cash		2,300.	2,300
Lender's Name and Title		Original Loan Amount	
Dan Cronk, Director		625	•
Date of Maturity Note Date Terms of	Repayment	Interest Rate	
12/28/06 N/A	<del></del>	.00%	•
Security Provided by Borrower	Purpose of Lo	oan	
I/A	Operating Exp	enses Paid in	
Description of Consideration		FMV of Consideration	Balance Due
		625.	0

Form 990

Explanation of Relationship Part V-A, Line 75b

Statement

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Individual's Name

Title or Role

Richard Berman

President, Exec. Director, Director

Individual's Name

Title or Role

Berman and Company

Management Company

Explanation of Relationship

Richard Berman is an employee of and the Sole Owner of Berman and Company.

Individual's Name

Title or Role

Bret Jacobson

Secretary/Treasurer, Director

Individual's Name

Title or Role

Berman and Company

Management Company

Explanation of Relationship

Bret Jacobson is an employee of Berman and Company.

Form 990

Part V-A Officer Compensation from Related Organizations

Statement 11

Officer's Name

Richard Berman

Name of Related Organization

Employer ID Number

Berman and Company (BAC)

52-1536666

Relationship Between Organizations

BAC is the mgmt co for CUF & is wholly owned by and employs Richard Berman.

Officer's Name

Richard Berman

Name of Related Organization

Employer ID Number

Employment Policies Institute Foundation (EPIF)

52-1902264

Relationship Between Organizations

EPIF and CUF are jointly managed by BAC. EPIF also employs Richard Berman.

Officer's Name

Richard Berman

Name of Related Organization

Employer ID Number

The Center for Consumer Freedom (CCF)

26-0006579

Relationship Between Organizations

CCF and CUF are jointly managed by BAC. CCF also employs Richard Berman.

Officer's Name

Berman and Company (BAC)

Name of Related Organization

Employer ID Number

Employment Policies Institute Foundation (EPIF)

52-1902264

Relationship Between Organizations

EPIF and CUF are jointly managed by BAC. EPIF also employs Richard Berman.

Officer's Name

Berman and Company (BAC)

Name of Related Organization

Employer ID Number

The Center for Consumer Freedom (CCF)

26-0006579

Relationship Between Organizations

CCF and CUF are jointly managed by BAC. CCF also employs Richard Berman.

Officer's Name

Bret Jacobson

Name of Related Organization

Employer ID Number

Berman and Company (BAC)

52-1536666

Relationship Between Organizations

Bret Jacobson is an employee of Berman and Company.

Form 990

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Statement

State	S
	AZ, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OR, PA, RI, SC, TN, VA, WA, WV, WI
Form	990 Part VIII - Relationship of Activities to Statement 13 Accomplishment of Exempt Purposes
Line	Explanation of Relationship of Activities
93a	Expense reimbursement income is a by-product of the organization's goal of informing the public about research on public policy issues surrounding unions. Certain organizations wished to assist in this regard; therefore, they reimbursed advertising and promotional expenses for Center for Union Facts to place important ads dissemminating vital facts about organized labor activities.
930	Opinion editorial income is a by-product of informing the public about research on public policy issues surrounding unions.
93c	Copy fees received assist in offsetting the cost of compliance with public inspection regulations and help to allow additional funds to be spent on informing the public about research on public policy issues surrounding unions.
93d	The sale of research studies helps to achieve the organization's exempt purpose by disseminating important public policy information regarding unions to the public.
	Footnotes Statement 14

List of States Receiving Copy of Return

Part VI, Line 90

Center for Union Facts is not required to complete columns (c) and (d) of Form 990, Schedule A, Part VI-A, Lines 45-50 because it first came into existence and it first made a Section 501(h) election in the tax year ended December 31, 2006. This first election was not revoked before the start of this tax year, January 1, 2007 through December 31, 2007.

Explanation of Transactions Part III, Line 2a Statement 15

Center for Union Facts rented video equipment for commercial production from Berman and Company, which is solely owned by Richard Berman. Amount paid was less than amounts quoted for use of similar property by unrelated equipment providers.

Explanation of Transactions Part III, Line 2b

Statement 16

Throughout the year, operating expenses were advanced to Center for Union Facts for immediate reimbursement by Berman and Company, Richard Berman, and Bret Jacobson. Operational Vice President of Berman and Company, James Bowers, also advanced reimbursable expenses during 2007. No interest or other fees were charged with respect to advances of expenses.

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Explanation of Transactions Part III, Line 2c

Statement

17

Berman and Company (BAC) is the management company for Center for Union Facts (CUF). CUF shares office space with BAC on a cost pass-through basis.

Explanation of Transactions
Part III, Line 2d

Statement

President, Executive Director and Director, Richard Berman, is the sole owner of the management company, Berman and Company, and thus receives compensation from that company. See also Part V-A of Form 990. In addition, he received \$142,191 in expense reimbursements for 2007. Secretary/Treasurer and Director Bret Jacobson is employed by Berman and Company and received \$1,891 in expense reimbursements for the year. Berman and Company and its Operational Vice President, James Bowers, each received \$153,988 and \$14,911, respectively, in expense reimbursements as well for the year. These expense reimbursements were primarily for travel costs, advertising and subscriptions. (All amounts are reported on an accrual basis.)

Schedule A	Other Inc	ome	St	atement 19
Description	2006 Amount	2005 Amount	2004 Amount	2003 Amount
Opinion Editorial Income Expense Reimbursement Income	100.	0.	0.	0.
Total to Schedule A, line 22	537.	0.	0.	0.