Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 Open to Public Inspection

A Fo	or the 20	05 calendar year, or tax year beginning , 20	005, and ending	
B che	ck if applicable	Please C Name of organization THE COSMETIC, TOILETRY AND		D Employer identification number
	Address change	use IRS FRAGRANCE ASSOCIATION, INC.		13-1390920
	Name change	label or	Room/suite	E Telephone number
	Instial return	type.		
	Final return	See 1101 17TH STREET, NW	300	(202) 331-1770
	Amended	Instruc- City or town, state or country, and ZIP + 4		F Accounting method Cash X Accrual
-	Application	tions. WASHINGTON, DC 20036-4702		Other (specify)
	pending	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable	H and Lare not an	olicable to section 527 organizations
		trusts must attach a completed Schedule A (Form 990 or 990-EZ).	1	p return for affiliates? Yes X No
C 14	Vahaita l	LITTLE OFFICE OF C		
		WWW.CTFA.ORG	1	r number of affiliates
		n type (check only one) ▶ X 501(c) (6) ◀ (insert no) 4947(a)(1) or 527	H(c) Are all affiliate (If "No." attac	es included? Yes No h a list. See instructions.
	heck here	if the organization's gross receipts are normally not more than \$25,000. The	H(d) Is this a separa	te return filed by an
0	rganızatıor	need not file a return with the IRS, but if the organization chooses to file a return, be		vered by a group ruling? Yes X No
s	ure to file	a complete return. Some states require a complete return.		otion Number
			M Check ▶	X if the organization is not required
LG	ross rece	ots Add lines 6b, 8b, 9b, and 10b to line 12 16, 177, 376.	to attach Sch	B (Form 990, 990-EZ, or 990-PF)
Par	t Re	venue, Expenses, and Changes in Net Assets or Fund Balances (See the in	structions)	
	1 0	ontributions, gifts, grants, and similar amounts received		
	ac	rrect public support		
		ndirect public support].
	i i	overnment contributions (grants)		7
	,	otal (add lines 1a through 1c) (cash \$ noncash \$)	 11a
	i i	rogram service revenue including government fees and contracts (from Part VII, line 9	3)	2 3,685,751.
	I	lembership dues and assessments		
		nterest on savings and temporary cash investments		
	l _		5	
		5		
				┪ ┃
	ľ	ess rental expenses		
•	ł	let rental income or (loss) (subtract line 6b from line 6a)		6c
n e	i _	other investment income (describe		7
Revenue			Other	4
Œ	I .	nan inventory		-
		ess cost or other basis and sales expenses . 8b		↓
	c (Sain or (loss) (attach schedule)		-
	1	let gain or (loss) (combine line 8c, columns (A) and (B))		8d
	9 9	pecial events and activities (attach schedule) If any amount is from gaming, check he	re 🕨 📘	
	1	cross revenue (not including \$ of		
	0	ontributions reported on line 1a)	 	_ ,
		ess. direct expenses other than fundraising expenses		↓
	1 2	let income or (loss) from special events (subtract line 9) from line 9a)		9c
	10a (Fross sales of inventory, less returns and allowances \ 10a		_
		ess cost of goods sold 2006		<u> </u>
	c (Gross profit or (loss) from sales and velocity (attach schedule) (subtract line 10b from h	ne 10a)	10c
				2,953,687.
	12	otal revenue (add lines 1d, 2 3, 4 5, 47, 17) 8d, 9c, 10c, and 11)	<u> </u>	12 16,177,376.
		rogram services (from line 44, courne b)		13
8	14	fanagement and general (from time 44, column (C))		14
Expenses		undraising (from line 44, column (D))		15
Ϋ́		Payments to affiliates (attach schedule)		16
ш		otal expenses (add lines 16 and 44, column (A))		
o		excess or (deficit) for the year (subtract line 17 from line 12)		18 -4,175,622.
set		let assets or fund balances at beginning of year (from line 73, column (A))		
As	i i	Other changes in net assets or fund balances (attach explanation)		
Net Assets	1			
		let assets or fund balances at end of year (combine lines 18, 19, and 20) · · · · · · · ct and Paperwork Reduction Act Notice, see the separate instructions.		6,769,928. Form 990 (2005)
				FORM 330 (2003)

ረጥሮን

Pa	rt II	Statement of Functional Expenses					and (D) are required for s sts but optional for other	
	Do no	ot include amounts reported on li b, 8b, 9b, 10b, or 16 of Part I.	ine	-	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	(cash \$	ts and allocations (attach scho noncash \$ amount includes foreign grants, here	edule)	22				
23	•	offic assistance to individuals	(attach	23				
24		fits paid to or for members (24				
25		pensation of officers, directo		25	6,280,715.		A particular de la company	o in alama Tarkan Wilings a partigual s, s _{am} i
26		r salaries and wages	· ·	26	4,337,408.			
27		ion plan contributions		27	1,197,361.			
28		r employee benefits		28	755,742.			
29		oll taxes		29	451,488.			
30	Profe	ssional fundraising fees		30				
31		unting fees		31	81,234.			
32	Lega	l fees		32	378,512.			
33		lies		33	145,507.			
34	Telep	phone		34	54,029.			
35	Posta	age and shipping]	35	50,972.		<u>.</u>	
36	Occu	pancy		36	722,260.			
37	Equip	oment rental and maintenan	ce	37	109,631.			
38	Printi	ng and publications		38	893,690.			
39	Trave	al		39	353,482.			
40	Confe	erences, conventions, and meeti	ngs .	40	1,192,185.			
41	Intere	est		41				
42	Depre	eciation, depletion, etc. (attach so	hedule)	42	158,141.	-		
43	Other	expenses not covered above (It	emize)		STMT 2			
a	MIS	CELLANEOUS		43a	35,877.			
ł	INT	ERESTED PARTIES		43b	729,134.			
		CIAL_ASSESSMENTS		43c	1,433,904.			
		SULTING		43d	224,191.			
		<u>ULATORY PROGRAMS</u>		43e	536,880.			
1	RES	EARCH		43f	230,655.			
) ====:	functional expenses. Add lin		43g				
44	throug	gh 43 (Organizations comp ins (B)-(D), carry these totals to	pleting lines	44	00 250 000			
	13-15	sts. Check ▶ if you ar			20,352,998.	<u> </u>	<u> </u>	<u>L.</u>
JOI Are	anv io	int costs from a combined educ	cational e	ony s camr	oor au-z Salan and fundraising sol	icitation reported in (R) Pr	ogram services?	Van VIII
		nter (i) the aggregate amount of					ated to Program services	
		ount allocated to Management	-			-	allocated to Fundraising \$	

JSA 5E 1020 2 000

ш	Statement of Program Service Accomplishments (See the Instructions)	
pa on	rm 990 is available for public inspection and, for some people, serves as the primary or sole source of ticular organization. How the public perceives an organization in such cases may be determined by the its return. Therefore, please make sure the return is complete and accurate and fully describes, in Partingrams and accomplishments.	information presented
W	nat is the organization's primary exempt purpose? ►SEE STATEMENT 3	Program Service
		Expenses
	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number	(Required for 501(c)(3) and
	clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	(4) orgs, and 4947(a)(1) trusts, but optional for
org	anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	others)
a	RESEARCH: CONDUCT SCIENTIFIC STUDIES ON SUBJECTS & INTERESTS	,
	OF_THE_INDUSTRY	
		i
	75	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
b	MEETINGS & CONVENTIONS: PROVIDE EDUCATIONAL OPPORTUNITIES TO	ļ
	LEARN OF NEW OR PROPOSED DEVELOPMENTS & REGULATIONS	1
	AFFECTING THE INDUSTRY.	
		i
		ľ
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
С	LEGISLATIVE: REPRESENT THE INDUSTRY'S POSITION & PRACTICES	
·		ľ
	TO_REGULATORY_&_LEGISLATIVE_BODIES	İ
		1
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
d	PUBLICATIONS: PUBLISH REFERENCE BOOKS & MATERIALS REGARDING	
	INGREDIENTS, RESOURCES, COLOR & SAFETY FOR THE BENEFIT OF	{
	THE INDUSTRY.	
		ĺ
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
	Other program services (attach schedule)	
-	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	}
		<u> </u>
1	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	

P	art IV	Balance Sheets (See the instructions.)			
		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing	3,828,205.	45	400,892.
	46	Savings and temporary cash investments		46	
		11			
		Accounts receivable	1.10.060		
	Б	Less allowance for doubtful accounts	143,267.	4/C	119,817.
	482	Pledges receivable			
		Less allowance for doubtful accounts		48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees			
		(attach schedule)		50	
	51a	Other notes and loans receivable (attach			
ø		schedule)			
Assets		Less allowance for doubtful accounts		51c	
As		Inventories for sale or use	482,046.		500,499.
	53	Prepaid expenses and deferred charges	258,472.		495,506.
	54	Investments - securities (attach schedule) STMT .4. ► Cost X FMV	20,821,919.	54	10,493,766.
	SSA	Investments - land, buildings, and equipment basis 55a			
	Ь	equipment basis			
	"	schedule)55b		55c	
	56	Investments - other (attach schedule)		56	
		Land, buildings, and equipment basis STMT 5 57a 1,608,969	,		
		Less accumulated depreciation (attach			
		schedule)	285,492.	57c	320,442.
	58	Other assets (describe ► STMT 6)	417,448.	58	1,458,096.
_	59	Total assets (must equal line 74) Add lines 45 through 58	26,236,849.		13,789,018.
	60	Accounts payable and accrued expenses	1,726,356.		3,938,383.
	61	Grants payable	2 (1(000	61	2 044 022
s	63	Loans from officers, directors, trustees, and key employees (attach	3,616,890.	02	2,844,832.
itie		schedule)		63	
Liabilities	64a	Tax-exempt bond liabilities (attach schedule)		64a	
Ξ	ь	Mortgages and other notes payable (attach schedule)		64b	19 1'
	65	Other liabilities (describe ►	9,001,902.	65	235,875.
	66	Total liabilities. Add lines 60 through 65	14,345,148.	66	7,019,090.
	Orga	anizations that follow SFAS 117, check here ▶ X and complete lines			
		67 through 69 and lines 73 and 74			
ces	67	Unrestricted	7,918,865.		6,769,928.
<u>a</u>	68 69	Temporarily restricted Permanently restricted	3,972,836.	68 69	
Ва	1	anizations that do not follow SFAS 117, check here		09	
or Fund Balances		complete lines 70 through 74			
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
188	72	Retained earnings, endowment, accumulated income, or other funds	·	72	
Net Assets	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72,			
Ž		column (A) must equal line 19, column (B) must equal line 21)	11,891,701.	73	6,769,928.
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	26,236,849.		13,789,018.

Pá	rt IV-A	Reconciliation of Revenue per Audited Fire Instructions.)	nancial Statemen	ts With Revenue	e per Return (S	See the
а	Total rev	venue, gains, and other support per audited financia	al statements		a	16,000,157.
b	Amount	s included on line a but not on Part I, line 12			, ->	
1		ealized gains on investments			177,219.	
2		services and use of facilities				
3		nes of prior year grants		i i		
4	Other (s	pecify)			1.	
		s b1 through b4			b	-177,219.
С		t line b from line a				16,177,376.
d		s included on Part I, line 12, but not on line a:			7	
1		ent expenses not included on Part I, line 6b		d1	ķ.	
2		pecify)				
		s d1 and d2				16 177 276
e D	rt IV-B	venue (Part I, line 12) Add lines c and d Reconciliation of Expenses per Audited Fi	nancial Stateme	nts With Expens	▶ ∣ e es ner Return	16,177,376.
a		penses and losses per audited financial statements				20,768,979.
a b		s included on line a but not on Part I, line 17			• • • • • • • •	2011001373.
1		s included on line a but not on Fart 1, line 17		b1		
2		ar adjustments reported on Part I, line 20		b2	4/	
3	Losses	reported on Part I, line 20		b3		
4	Other (s	pecify) SEE STATEMENT 8				
		, 			415,981.	415 001
		s b1 through b4			١	415,981. 20,352,998.
C C		t line b from line a	• • • • • • • • • • •		• • • • • • • • • • • •	20,332,330.
d 1	Investm	s included on Part I, line 17, but not on line a: ent expenses not included on Part I, line 6b		d1		
2	Other (s	pecify)				
				1 101	`	
	Add line	s d1 and d2			d	
e Da		Current Officers, Directors, Trustees, and Ko				20,352,998.
		or key employee at any time during the year even if				er, director, trustee,
		(A) Name and address	(B)	(C) Compensation	(D) Contributions to emplo	
		(A) Name and address	Fitle and average hours per week devoted to position	(If not paid, enter -0)	benefit plans & deferred compensation plans	and other allowances
					ŀ	
<u>SE</u>	E. STAT	EMENT 9		5,673,141.	9,041,357	. NONE
Se	e Exhibit	1 for the listing of				
no	ncompen	sated board members				
					 	-
					1	
-				<u> </u>		-
				· — — — —		
					ļ	_
			1		1	1

Par	t VI Other Information (See the instructions)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	-	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes		, ,	[]
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?			
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach			
	a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through			
	common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	х	<u> </u>
b	If "Yes," enter the name of the organization SEE_EXHIBIT_2			
	and check whether it is X exempt or in nonexempt			{
	Enter direct and indirect political expenditures (See line 81 instructions)			
<u>b</u>	Did the organization file Form 1120-POL for this year?	81b		<u> </u>

CTFA

Forn	orm 99 <u>0</u> (2008) 13-1390920						
Pa	rt VI Other Information (continued)		Yes	No			
3 2 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge						
	or at substantially less than fair rental value?	82a	X	ĺ			
b	If "Yes," you may indicate the value of these items here. Do not include this amount	100 m					
	as revenue in Part I or as an expense in Part II (See instructions in Part III)	1	16	3 -			
33 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	l			
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Х				
34 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions						
	or gifts were not tax deductible?	84b	х				
3 5	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a		Х			
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		х			
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	77					
	received a waiver for proxy tax owed for the prior year	` . ~	1				
c	Dues, assessments, and similar amounts from members 85c 7,973,412.	, `	٠.				
	Section 162(e) lobbying and political expenditures 85d 1,070,232.]. •	\ \frac{1}{2} \dots	,			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices] ;		1 (
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f 671,561.	1::	13 M				
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	[x			
	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable						
	estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	×	l			
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 86a N/A	- 1	, , ,				
	Gross receipts, included on line 12, for public use of club facilities 86b N/A	1					
	501(c)(12) orgs Enter a Gross income from members or shareholders 87a N/A	1 "					
	Gross income from other sources (Do not net amounts due or paid to other	1 .		· ·			
	sources against amounts due or received from them)	١.		l			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	1 -	′ ′				
	partnership, or an entity disregarded as separate from the organization under Regulations sections	ļ.		, .			
	301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88	1	x			
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			- ^ -			
	section 4911 ► N/A , section 4912 ► N/A , section 4955 ► N/A		1. 1	,			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction	1		ľ			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach			•			
	a statement explaining each transaction	89ь	N/	A			
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under		1 2.7				
	sections 4912, 4955, and 4958		N/A				
d	Enter Amount of tay on line 80c, above, reimbursed by the organization		N/A				
	List the states with which a copy of this return is filed \blacktriangleright DC						
	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90Ь	143				
	The books are in care of THE CORPORATION Telephone no 202–33						
	Located at 1101 17TH ST., NW, SUITE 300 WASHINGTON, DC ZIP+4 20036-47		, ,_ <u>v_</u> _				
	1102 17111 513, IM, SOLIH SOO WASHINGTON, BO	<u> </u>					
3.	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No			
i.	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		x			
		1.5.1.		-			
	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	٠.		, ,			
	and Financial Accounts	()					
		91c		y			
C	At any time during the calendar year, did the organization maintain an office outside of the United States?	<u> </u>		<u> </u>			
92	If "Yes," enter the name of the foreign country \(\bigcup \)		1	▶			
-	and enter the amount of tax-exempt interest received or accrued during the tax year		N/A				
	ornor and ambains of tan one-injection reconstruction balling and find tan seasons are seasons of tan one-injection reconstruction and an area of the seasons of tan one-injection reconstruction and an area of the seasons of tan one-injection reconstruction and an area of the seasons of tan one-injection reconstruction and an area of tan one-injection reconstruction and an area of tan one-injection reconstruction reconstruction and an area of tan one-injection reconstruction reconstruction and area of tan one-injection reconstruction re		11/7				

	990 (2005) t VII A	nalysis of Income-Produc	ing Activit	ties (See the ii	nstructio		-1390920			Page 8
		s amounts unless otherwise		lated business inc			y section 512,	513, or 514	(E))
ındıca 93	•	service revenue	(A) Business code	(B) Amount		(C) Exclusion code	(D Amo		Relate exempt fi incoi	unction
	·	NGS & CONF.								314,169.
		CATIONS	541800	28	8,595.					353,853.
c d		PARTIES PROG.					-			<u>729,134</u> .
е										
		fedicaid payments				 				
-		ontracts from government agencies .				 			0	947,412.
95		avings and temporary cash investments •				14		90,526.	<u>0,</u>	<u> </u>
96		and interest from securities				1 1 1		50,520.		
97		income or (loss) from real estate			-	,				· · · · · · · · · · · · · · · · · · ·
		iced property					·			
b	not debt-f	inanced property								
98	Net rental in	come or (loss) from personal property		_						
99	Other inve	estment income			_					
100	Gain or (loss) from sales of assets other than inventory								
101	Net incom	ne or (loss) from special events .								
102	Gross profi	t or (loss) from sales of inventory	<u></u>							
		enue. a								
b		10					1,4	<u>33,904</u> .	<u>1,</u>	<u>519,783.</u>
C									· ···· · · · · · · · ·	
d						 				
e		(D) (D)1(E)			0 505	 		04 400		064 251
	•	add columns (B), (D), and (E)).. I line 104, columns (B), (D), and (E		28						864,351. 177,376.
		plus line 1d, Part I, should equal ti			• • • •				10,	1/1,3/6.
		elationship of Activities t			of Exer	npt Purpos	es (See th	e instructio	ns.)	
		plain how each activity for which		·						· · · · · · · · · · · · · · · · · · ·
		the organization's exempt purpos						.,	•	
	s	TMT 11								
									_	
					-					
Par	t IX In	formation Regarding Taxa	ble Subsi		sregare		s (See the			 -
		(A) e, address, and EIN of corporation		(B) Percentage of	Natur	(C) e of activities	Tota	(D) I income	End-c	E) nf-year
	pa	artnership, or disregarded entity		ownership interest					ass	ets
	 	· · · · · · · · · · · · · · · · · · ·		%			 		 	
				%					 	
				<u>%</u>						
Par	t V In	formation Regarding Trai	nefore Acc	sociated with	Person	al Benefit (Contracts (See the ins	tructions)	
		anization, during the year, receive a							Yes	x No
	-	organization, during the year, receive a	-			•			· 🛏	X No
		" to (b), file Form 8870 and Fo		-		o,, o a po	ordenar berr	on comicor	,,55	<u> </u>
		Under penelties of perjury, I decla	are that I have	examined this return	n, including					
DI-		and belief, it is true, correct, and	complete Dec	claration of prepare	r (other tha	n officer) is base	ed on all informa	tion of which pre	parer has any kn	owledge
	ease	1 Poulu	17	Day				11/2/0	de	
Sig	-	Signature of officer			_		D	ate 2		
He	re	PAMELA G.	BAIL	Eth 1	PRES	BENT	•			
		Type or print name and title		1						
		Preparer's 200	2 2	4 1	21	Date /	Check if	Prep	arer's SSN or PTIN	(See Gen Inst. W)
Paid	t	signature Maigaret all	en Blo	obhow,	SHA	11/01/06	self- employed			
	parer's	Firm's name (or yours GRA	NT THOR	NTON LLP				EIN 🕨		
Use	Only	ıf self-employed), 201	0 CORPO	RATE RIDGE	, SUIT	E 400		Phone		
	.	address, and ZIP + 4 MCL	EAN, V	Α		2210	2 '	10	<u> 703-847-7</u>	
									Form	990 (2005)

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION		AMOUNT
NET UNREALIZED LOSS ON INVESTMENT		177,219.
CHANGE IN MINIMUM PENSION LIABILITY	Y	415,981.
PRIOR PERIOD ADJUSTMENT		352,951.
	TOTAL	946,151.
	=	========

Description of Property															·
DEPRECIATION															
Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-	Conv	Life	ACRS class	M A CRS class	Current-year 179 expense	Current-year depreciation
FIXED ASSETS	VAR	1,608,969.	100.000			1,608,969.									158,141
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Less Retired Assets		 	 	 	 	L	 		<u>. </u>		L	<u> </u>		ابا	
Subtotals						1,608,969.	1,130,386.	1,288,527.	1.50		` 1'	٠, ٠	`.*	<u> </u>	
Listed Property		11,000,303.	<u> </u>	<u> </u>	<u></u>	1,000,303.	11,130,380.	1,200,327.	<u> </u>						
<u> </u>		<u> </u>	T	T	T	- **-	T		Γ				Г		
		 	 	 	 		 					 			
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Less: Retired Assets			, 5				 	, ,				1 .			1. 1. 1. 1. 1. 1.
Subtotals			j .	·									``	· · · · · · · · · · · · · · · · · · ·	
TOTALS			1 、			1,608,969.	1,130,386.	1,288,527.		`			٠.		158,141.
AMORTIZATION															
	Date	Cost			,		Assumulated	Ending Accumulated amortization							Current-year
Asset description	placed in service	or basis					amortization	amortization	Code	Lıfe			,		amortization
			}	•	•									`,	
] ,	' '								,		in a group to [
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TOTALS		ł			1 1 1 1 1 1				15° (S.	£ 4. 4.	(· · · ·	, it , '	4 C		

^{*}Assets Retired JSA 5X8024 1 000

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

REPRESENT INTEREST OF COSMETIC, TOILETRY & FRAGRANCE INDUSTRY

11

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FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION		ENDING POOK WALLE	COST
DESCRIPTION		BOOK VALUE	OR FMV
CASH & CASH EQUIVALENTS		1,491,546.	FMV
GOVERNMENT SECURITIES		6,905,108.	FMV
EQUITY MUTUAL FUNDS		2,023,509.	FMV
ACCRUED INTEREST		73,603.	FMV
	TOTALS	10,493,766.	
		=======================================	

THE COSMETIC, TOILETRY AND 13-1390920

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

FIXED ASSET DETAIL

ACCUMULATED DEPRECIATION DETAIL

ASSET DESCRIPTION	METHOD/ CLASS	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
FIXED ASSETS		1,608,969.			1,608,969.	1,130,386.	158,141.		1,288,527.
TOTALS		1,608,969.			1,608,969.	1,130,386.			1,288,527.
		*****			========	7276392 3 30			20200 2 222

THE COSMETIC, TOILETRY AND

13-1390920

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION

ENDING BOOK VALUE

DUE FROM AFFILIATE PREPAID PENSION

TOTALS

84,653. 1,373,443.

1,458,096.

17

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION

ENDING BOOK VALUE

SUPPLEMENTAL RETIREMENT LIAB.

235,875.

TOTALS

235,875.

CTFA

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION

AMOUNT

CHANGE IN MINIMUM PENSION LIAB

415,980.

TOTAL

415,980.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PAMELA G. BAILEY 1101 17TH STREET, NW 300 WASHINGTON, DC 20036-4702	PRESIDENT 36	1,099,219.	462,034.	NONE
EDWARD KAVANAUGH 1101 17TH STREET, NW 300 WASHINGTON, DC 20036-4702	PRESIDENT 35	4,573,922.	8,579,323.	NONE
	GRAND TOTALS	5,673,141.	9,041,357.	NONE

FORM 990, PART VII - OTHER REVENUE

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
MISCELLANEOUS FREE SALE CERT. INTERESTED PARTY WORK YOUR IMAGE CALIFORNIA ASSESS. SPECIAL ASSESSMENT			01 01	1,421,653. 12,251.	59,300. 1,421,672. 30,843. 7,968.
TOTALS			_	1,433,904.	1,519,783.

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME
LINE	IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED
NO.	IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
00-	
93A	EDUCATES INDUSTRY ON NEW OR PROPOSED REGULATORY ACTIONS,
	PRACTICES SCIENTIFIC ADVANCES
93B	PROVIDES RECOGNIZED SOURCE FOR TECHNICAL/SCIENTIFIC DATA,
	REGULATORY REQUIRMENTS, ETC.
93C	REPRESENTS RESEARCH PROGRAMS CONDUCTED ON BEHALF OF A
	SPECIFIC MEMBER OR GROUP OF MEMBERS AT SUCH MEMBER'S REQUEST
94	
94	PROVIDES MEMBER BENEFITS SUCH AS TECHNICAL REGULATION NOTES,
	PROMOTION OF SAFE PRODUCTS, EDUCATIONAL MATERIALS,
	SCIENTIFIC NEEDS & INTERESTS, EFFECTS THE INTERNATIONAL
	ACTIVITIES, ETC
103A	PROVIDES SOURCE OF MATERIALS, ETC
103B	PROVIDES FOREIGN REGULATORY ASSISTANCE TO THE INDUSTRY
103C	FACILITATES MEMBERS TO ENGAGE IN INITIATIVES THAT ARE OF
1030	
1000	MOTORE INTERRECT TO INDUSTRIC PRINTED
103D	PUBLIC AWARENESS PROGRAM ON THE IMPORTANCE OF WORK AND IMAGE

11

CTFA BOARD OF DIRECTORS

Harvey Alstodt President Del Cosmetics Del Laboratories

Laurent Attal
President/CEO
L'Oreal USA, Inc.

E. Scott Beattie Chairman/CEO Elizabeth Arden

Jess A. Bell, Jr. Chairman/CEO Bonne Bell, Inc.

Howard Bernick President/CEO Alberto-Culver Cc.

Daniel J. Brestle Chief Operating Officer Estee Lauder Companies

Lori Bush President Nu Skin Enterprises

Daniel J. Carey General Manager Noville, Division of Firmenich

Bradley Casper President & CEO The Dial Corporation

Maureen Chiquet President/COO Chanel, Inc.

Maggie Ciafardini CEO/Managing Director YSL Beaute

Christopher Combe Chairman and President Combe Inc.

Ian Cook
President, Colgate US
Colgate-Palmolive

Neil DeFeo President & CEO Playtex Products, Inc. William Fox President/CEO LQ Corporation

William Gentner
President/CEO
Kao Brands Company

Francine Gingras Director, External Relations

Procter & Gamble Beauty

Colleen Goggins
Worldwide Chairman
Consumer and Personal
Care Group

Johnson & Johnson Richard Goldstein Chairman/CEO

International Flavors & Fragrances

Jill Granoff
President & COO
Victoria's Secret

John Hewson President

Kolmar Labs, OSG

Jeffrey S. Himmel Chairman & CEO Himmel Hair Care Products

David Holl President & COO Mary Kay, Inc.

Eric Horowitz President, Clarins Brand Groupe Clarins USA

Robert Julius CEO

Nice-Pak Products

Andrea Jung Chairman/CEO Avon Products, Inc.

James Kenton President, Beiersdorf NA Beiersdorf, Inc. Edward Lewis
Chairman/CEO
Essence Communications

James Mackey
Senior Vice President
Schering-Plough
Healthcare Products

Thomas Malafronte
President/General Mgr
Chemron Lubrizol/Noveon

Heidi Manheimer Chief Executive Officer Shiseido Cosmetics (Am)

Linda Marshall
President
Elysee Scientific Cos.

Robert McEwan VP, Global Planning & Performance Mgt Firmenich SA

Michael McNamara Global President Neutrogena

Jean-Claude Moreau Director Pochet of America

Jack Nethercutt Vice Chairman Merle Norman

Colin O'Neill President, Fragrances NA Givandan Fragrances

Robert Phillips
Managing Director
Clarecastle Group

Michael Polk President, Unilever US Unilever

Michael Powell
President
Colomer Group

*Marc S. Pritchard President, Global Cosmetics & Retail Hair Colorants Procter & Gamble

George Quesnelle President, Consumer Healthcare GlaxoSmithKline

Stephen I. Sadove Vice Chairman/COO Saks Incorporated

George Schaeffer President/CEO OPI Products, Inc.

Gary Schmidt
Sr. VP/General Counsel
Alberto-Culver

Elizabeth Smith
Executive Vice President/
Brand President
Avon Products, Inc.

Arthur Spiro
President
Liz Claiborne Cosmetics

Jack Stahl
President/CEO
Revlon, Inc.

Jamice Teal
Group VP & CSO
Avon Products

Damas Thoman
President
Quest International
Fragrances Co.

Eric Thoreux
President, Cory Beauty
Americas
Coty, Inc.

Lucille Van Baaren Exec. Dir-Regulatory Aff. Estee Lauder

Kenneth Wessel President Wessel Fragrances

*Chair

PAGE 6 - PART VI - QUESTION 80B

The Cosmetic, Toiletry, and Fragrance Association, Inc. (the Foundation), The Cosmetic, Toiletry, and Fragrance Political Action Committee (the Federal PAC), The Cosmetic, Toiletry, and Fragrance California Political Action Committee (the State PAC).

Form 8868 (Rev				Page 2
	filing for an Additional (not automatic) 3-Month Extension, complete only			▶ X
-	complete Part II if you have already been granted an automatic 3-month ex		a previously filed Form	8868
	filing for an Automatic 3-Month Extension, complete only Part I (on page			
Part II	Additional (not automatic) 3-Month Extension of Time - Must	T 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Type or	Name of Exempt Organization THE COSMETIC, TOILETRY AND		Employer identification r	number
print	FRAGRANCE ASSOCIATION, INC. Number street, and room or suite no. If a P.O. box, see instructions	CA 100 1	13-1390920 For IRS use only	
File by the extended	1101 17TH STREET, NW 300		or into use only	
due date for filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions	The state of the s		2000年1月
return See instructions	WASHINGTON, DC 20036-4702			BANKON -
Check type	e of return to be filed (File a separate application for each return)			
X Form	n 990 Form 990-T(sec 401(a) or 408(a) trust)		Form 5227	
Form	n 990-BL Form 990-T (trust other than above)		Form 6069	
Form	n 990-EZ Form 1041-A	<u> </u>	Form 8870	
	n 990-PF Form 4720			
	o not complete Part II if you were not already granted an automatic 3-mo	nth extensi	on on a previously file	ed Form 8868.
	oks are in the care of THE CORPORATION.			
	one No ► 202 331-1770 FAX No ►	shoole this ha		. —
	anization does not have an office or place of business in the United States, o or a Group Return, enter the organization's four digit Group Exemption Numb		If this is	
	ble group, check this box If it is for part of the group, check this box		and attach a list with t	he
	EINs of all members the extension is for	<i>"</i> - L.	and ottaon a not with	
	uest an additional 3-month extension of time until11/15/2006			
5 For c	alendar year 2005, or other tax year beginning	and endin	9	
6 If this	tax year is for less than 12 months, check reason Initial return	Final return	Change in ac	counting period
7 State	in detail why you need the extension <u>ADDITIONAL TIME IS REQUE</u>	ESTED TO	GATHER THE	·····
<u>INFO</u>	RMATION NECESSARY TO FILE A COMPLETE AND ACCURATE	RETURN.		
- · · ·	(5 000 PL 000 PE 000 T 1700			·
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the		tax, less any	
	efundable credits See instructions		⊉ nd estimated	
	ayments made Include any prior year overpayment allowed as a credit			
•	ously with Form 8868	•	\$	
c Balar	nce Due. Subtract line 8b from line 8a Include your payment with this form		ired, deposit	
with	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax	Payment S	ystem) See	
instru	octions		<i></i> \$	
	Signature and Verification		and the best of my bo	andadas and balist
•	es of perjury, I declare that I have examined this form, including accompanying schedules a ect, and complete and that I am authorized to prepare this form	na statements,	and to the best of my kn	owiedge and belier
	17 - / tr (co	1. 4	. 0	Tulke
Signature >	Vinn Cattre Notice to Applicant - To Be Complete	16.67.51	Date ► ♂	119/66
T wa	Notice to Applicant - To Be Complete	ea by the	IKS	•
	have approved this application. Please attach this form to the organization's return have not approved this application. However, we have granted a 10-day grace per	iod from the	later of the date shown	below or the due
date	of the organization's return (including any prior extensions). This grace period is o	considered to	be a valid extension of	time for elections
1 1	erwise required to be made on a timely return. Please attach this form to the organization have not approved this application. After considering the reasons stated in item 7,		rant your request for an	extension of time
	le We are not granting a 10-day grace period	we cannot g	irant your request for on	exterior or time
We	cannot consider this application because it was filed after the extended due date of I	the return for	which an extension was re	equested
Oth	er			
	By		RECE	IVED
Director			Da	01
	Mailing Address - Enter the address if you want the copy of this application	for an addi	tional 3-month extension	کا کا
returned t	o an address different than the one entered above		S AUG 2	2000
	Name		1 1	(
Type or	GRANT THORNTON LLP ATTN: DAVID COTTONE Number and street (include suite, room, or apt. no.) or a P.O. box number		OGDE	N, U
print			L	
2010 CORPORATE RIDGE, SUITE 400 City or town, province or state, and country (including postal or ZIP code)				
				1
JSA 558055 1 000	MCLEAN, VA 22102		Form 88	168 (Rev 12-7
5F8055 1 000				- /

-cm 886

(Rev. December 2004)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

Illema Kevenue 3	GLAICE T	The article of the state of the		
		onth Extension, complete only Part I and check this bo		
		automatic) 3-Month Extension, complete only Part II (, , ,	
		ilready been granted an automatic 3-month extension o		
Part Auto	matic 3-Month Extensi	on of Time - Only submit original (no copies neede	:d)	
Form 990-T co	orporations requesting an	automatic 6-month extension - check this box and comp	plete Part Lonly	
		90-C filers) must use Form 7004 to request an extension use Form 8736 to request an extension of time to file Fol		
Electronic Fili	ng (e-file). Form 8868 ca	n be filed electronically if you want a 3-month automa	atic extension of time to file one of the	
returns noted	below (6 months for corp	porate Form 990-T filers). However, you cannot file it i	electronically if you want the additional	
		tead you must submit the fully completed signed page	ge 2 (Part II) of Form 8868. For more	
	electronic filing of this forn			
Type or	Name of Exempt Organizati	on THE COSMETIC, TOILETRY AND	Employer identification number	
print	FRAGRANCE ASSO		13-1390920	
File by the	Number, street, and room of	or suite no. If a P O. box, see instructions		
due date for filing your	1101 17TH STR		00	
return. See	City, town or post office, st	ate, and ZIP code. For a foreign address, see instructions.		
Instructions.	WASHINGTON, DO	20036-4702		
Check type o	f return to be filed (file a	separate application for each return):		
X Form 990		Form 990-T (corporation)	Form 4720	
Farm 990	1-8L	Form 990-T(sec 401(a) or 408(a) trust)	Form 5227	
Form 990	-EZ	Form 990-T (trust other than above)	Form 6069	
Form 990	I-PF	Form 1041-A	Form 8870	
If the organIf this is for the whole	ra Group Return, enter the group, check this box	office or place of business in the United States, check the organization's four digit Group Exemption Number (GEI If it is for part of the group, check this box ▶ [N)	
	Ns of all members the ext			
•	•	months for a Form 990-T corporation) extension of time		
to file the		rn for the organization named above. The extension is f	or the organization's return for:	
► X	calendar year 2005 or	, a disc		
▶ [tax year beginning	, and ending	· ·	
2 If this tax	year is for less than 12 m	nonths, check reason: Initial return Final ret	turn Change in accounting period	
-		0-BL, 990-PF, 990-T, 4720, or 6069, enter the tentati		
nonretun	idable credits, See instruc	tions	\$	
		PF or 990-T, enter any refundable credits and estimate		
made. Include any prior year overpayment allowed as a credit				
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See				
			^ -	
			· · · · · · · · · · · · · · · · · · ·	
•		ectronic fund withdrawal with this Form 8868, see Form	8453-EO and Form 8879-EO	
for payment in				
For Privacy A	ct and Paperwork Reduc	tion Act Notice, see Instructions.	Form 8868 (Rev. 12-2004)	