Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

2014 Open to Public Inspection

OMB No. 1545-0047

For the 2014 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: IDAHO FREEDOM FOUNDATION, INC Address change Doing business as 26-3783048 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite 208-258-2280 2404 BANK DRIVE 314 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated BOISE ID 83705 798,956 G Gross receipts \$ Amended return Name and address of principal officer X No H(a) Is this a group return for subordinates? Application pending WAYNE HOFFMAN 2404 BANK DR. STE 314 H(b) Are all subordinates included? BOISE ID 83705 If "No," attach a list. (see instructions **X** 501(c)(3) Tax-exempt status 501(c) () (insert no.) 4947(a)(1) or WWW.IDAHOFREEDOM.ORG Website: H(c) Group exemption number X Corporation Trust Association Other > Year of formation: 2008 Form of organization: M State of legal domicile: Part I Summary 1 Briefly describe the organization's mission or most significant activities: TO DEVELOP AND ADVOCATE THE PRINCIPLES OF INDIVIDUAL LIBERTY, PERSONAL Governance RESPONSIBILITY, PRIVATE PROPERTY RIGHTS, ECONOMIC FREEDOM, AND LIMITED, TRANSPARENT GOVERNMENT 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 Activities & 5 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 10 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 768,367 780,244 8 Contributions and grants (Part VIII, line 1h) Revenue 9 Program service revenue (Part VIII, line 2g) 0 184 169 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -73,351-23,011 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 695,200 757,402 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 391,356 354,418 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 297,392 376,609 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 688,748 731,027 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,452 26,375 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 395,555 421,930 21 Total liabilities (Part X, line 26) 0 395,555 421 930 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign WAYNE HOFFMAN PRESIDENT Here Type or print name and title Print/Type preparer's name Preparer's signature PTIN Check 5 13 15 self-employed Paid GREGORY J BRAUN, CPA GREGORY J BRAUN, P01249005 Preparer RIPLEY DOORN & COMPANY, P.L.L.C 82-0476132 Firm's name Firm's EIN Use Only 217 W GEORGIA AVE STE 100 NAMPA, ID 83686-2836 208-466-9264 May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	. 1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			.
	candidates for public office? If "Yes," complete Schedule C, Part I	. 3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4	х	
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	Λ.	
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
400	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			Sales -
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	5607303		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		v
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	. 12a		X
b	and the state of t	425		x
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	100000000000000000000000000000000000000		X
b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		
D	fundraising, business, investment, and program service activities outside the United States, or aggregate			
		14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
_b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1		
	employees? If "Yes," complete Schedule J	23		X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			v
b	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
C	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	200		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l and
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	99000000		
	or IV, and Part V, line 1	72.00		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	00		v
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Port VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31		A
55	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
			000	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auti					
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial		100		
	account)?			4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc	ounts				
_	(FBAR).					v
5a				5a	-	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?		5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			6-		x
h	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions		.,	6a	-	^
b	gifts were not tax deductible?	or		6b		
7	Organizations that may receive deductible contributions under section 170(c).			00		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	de				
a	and services provided to the payor?	us		7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	****		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
•	required to file Form 8282?			7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	** ****** ***********			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cont			7e	************	х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	1.1		7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		s required?	7g		х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		Х
8	Sponsoring organizations maintaining donor advised fundsDid a donor advised fund maintained l	by the				
	sponsoring organization have excess business holdings at any time during the year?	10 4 . 2232002		8	************	
9	Sponsoring organizations maintaining donor advised funds.	****		25.353		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations.Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	1 1				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	1		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
****	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	45.				
	the organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c	-			77
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b		

26-3783048 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 5 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 5 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 X 8a a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. b X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: >

2404 BANK ST DR, STE 314

ID 83705

Form 990 (2014)

208-258-2280

BOISE

WAYNE HOFFMAN

Form 990 (2014) IDAHO FRE								26-378			Page
)irec	tors	s, T	rus	tees,	K	ey Employees, High	est Compensated Er	mployees, and	l
Independent Co											
	V-2	4.49	1500000		72			any line in this Part V			Ц
		-	-					Compensated Employe			
1a Complete this table for all persons organization's tax year.									Procedures and American processors (2002)		
 List all of the organization's cur compensation. Enter -0- in columns (I 								ividuals or organizations),	regardless of amount of		
 List all of the organization's cur 	rent key employ	ees, it	f any	. Se	e ins	truction	ns t	for definition of "key emplo	yee."		
 List the organization's five curn who received reportable compensation organization and any related organization 	n (Box 5 of Form										
 List all of the organization's form \$100,000 of reportable compensation 									received more than		
 List all of the organization's for organization, more than \$10,000 of re 	portable comper	sation	n fror	m the	e org	anizati	ion	and any related organizat	ions.		
List persons in the following order: incompensated employees; and former		or dire	ectors	s; ins	stituti	onal tr	ust	tees; officers; key employe	es; highest		
Check this box if neither the organ	nization nor any	relate	d org	janiz	ation	comp	en	sated any current officer, of	director, or trustee.		
(A) Name and Title	(B) Average hours per week (list any hours for related	box	unles	ss per	tion more the rson is rector	han one both an (trustee) Former		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization	
	organizations below dotted line)	Individual trustee or director	nstitutional trustee	ær	Key employee	Former Highest compensated				and related organization	
(1) RUSS FULCHER	0.25							0			

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102,254

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Form **990** (2014)

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

PRESIDENT

(7)

(8)

(9)

(10)

(11)

DAA

BOARD CHAIR

(2) ROBERT RATHBONE

(3) HEATHER M LAUER

(4) BRENT REGAN

(5) LOEL FENWICK

(6) WAYNE HOFFMAN

0.00

0.25

0.50

0.00

0.00

0.00

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3.00

X

X

X

X

X

X

X

	(A) Name and title	(B) Average hours per week (list any	(d	o not	Pos check ess pe	C) sition more erson	than o	one n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(12)											
(40)			_	_	_	_					
(13)											
(14)											

(15)											

(16)											
(17)											
(18)											
(19)											
1b c	Sub-total Total from continuation she							>	102,254		
d	Total (add lines 1b and 1c).							>	102,254		
2	Total number of individuals (increportable compensation from				ose	listed	abo	ve)	who received more than \$10	00,000 of	
3	Did the organization list any for employee on line 1a? If "Yes,"	rmer officer, direc	ctor,	or tru	ustee	e, key	y em	ploy	ee, or highest compensated		Yes No
4	For any individual listed on line organization and related organi individual	1a, is the sum of izations greater th	repo	ortab \$150	le co ,000	mpe ? If "	ensat Yes,'	ion a	mplete Schedule J for such		4 X
5	Did any person listed on line 1a for services rendered to the org	a receive or accru	ie co	mpe	nsat	ion fi	rom a	any i	unrelated organization or inc	dividual	5 X
Sect 1	ion B. Independent Contractor Complete this table for your five		sate	d in	lene	nder	nt cor	ntrac	tors that received more than	n \$100 000 of	
	compensation from the organiz	ation. Report con	npen	satio	n fo	r the	cale	ndar	year ending with or within t	he organization's tax year.	(C)
	Name and	(A) business address							Descript	(B) tion of services	(C) Compensation
	Total number of independent or	ontractors (includ	ing b	ut n	ot lin	nited	to th	080	listed above) who		
_	received more than \$100,000 o								noted above, will	0	

Part VIII Statement of Revenue

						(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
						Total Teveride	exempt function	business	excluded from tax under sections
10 10		- · · · · · · · · · · · · · · · · · · ·		T			revenue	TOTOTIGE	512-514
Contributions, Giffs, Grants and Other Similar Amounts	1a		1:						
200	b	Membership dues	1						1
rs,	С	Fundraising events	10						
<u>a</u>	a	Related organizations							
Sir	e	Government grants (contributions)		B					
utic	ı	All other contributions, gifts, grants, and similar amounts not included ab		.	780,244				
55	_			\$	780,244				
and	9 h	Noncash contributions included in lin Total. Add lines 1a–1f	nes la-II.	J		780,244			
e e		Total. Add lines 1a-11			Busn. Code	7007244			
Program Service Revenue	2a				***				
Sev	b	3							
ce	c	9							
erv	d								
E	e								
gra	f	All other program service							
Pro	q								I.
	3	Investment income (include							
	6.0	and other similar amounts		orido, mitor	•	192	192		
	4	Income from investment of	THE RESERVE ASSESSMENT	mpt bond i	proceeds				
	5	Royalties			F				
		15.7	Real		ii) Personal				
	6a	Gross rents							
	b	Less: rental exps.	MICHAEL CO.						
	С	Rental inc. or (loss)							
	d	Net rental income or (loss	s)		>				
	7a	Gross amount from (i) See	curities		(ii) Other				
		sales of assets other than inventory	10,71	.5					
	b	Less: cost or other							
		basis & sales exps.	10,73	88					
	С	Gain or (loss)	-2	23					
	d	Net gain or (loss)			>	-23	-23		***************************************
е	8a	Gross income from fundraising	g events						
ň		(not including \$							
Other Revenu		of contributions reported on lin	ne 1c).						
r R		See Part IV, line 18		a	7,805				
the	b	Less: direct expenses		b	30,816				
0	С	Net income or (loss) from	fundraisi	ng events		-23,011			
	9a	Gross income from gaming ac	ctivities.						
		See Part IV, line 19		a					
	b	Less: direct expenses		b					
	С	Net income or (loss) from	gaming a	ctivities					
	10a	Gross sales of inventory,	less						
		returns and allowances		a					
	b	Less: cost of goods sold		b					
	С	Net income or (loss) from	sales of i	nventory .)				
		Miscellaneous Re	venue		Busn. Code				
	11a	3 (****************************							
	b								
	С	4							
	d	All other revenue							
		Total. Add lines 11a-11d	A 10 4 A A A A A A		>				
	12	Total revenue. See instru	uctions.			757,402	169	0	0

Part IX Statement of Functional Expenses

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

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

n-	et include emounts reperted as lises Ob	(A)	(B)	(C)	(D) X
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	1			
3	Grants and other assistance to foreign				
3	CONTROL SECURIOR CAMPAGNA CONTROL CONT				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	310,889	310,889		
8	Pension plan accruals and contributions (include		223,000		
J					
	section 401(k) and 403(b) employer contributions)	8,379	8,379		
9	Other employee benefits	35 150			
10	Payroll taxes	35,150	35,150		
11	Fees for services (non-employees):				
а	Management				
b		4,306	4,306		
С	Accounting	5,767	5,767		
d					
е					
f	Investment management fees	·			
	1000 10				
g		127 401	127 401		
	(A) amount, list line 11g expenses on Schedule O.)	127,401	127,401		
12	Advertising and promotion	24,398	24,398		
13	Office expenses	72,159	72,159		
14	Information technology				
15	Royalties				
16	Occupancy	22,647	22,647		
17	Travel	30,690	30,690		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	31,516	31,516		
	900 09 10 000 000 000 000 000 000 000 00	31,310	31,310		
20	Interest				
21	Payments to affiliates	2 621	2 (21		
22	Depreciation, depletion, and amortization	3,631	3,631		
23	Insurance	3,848	3,848		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	WEBSITE DEV/MAIN	20,226	20,226		
b	DUES AND SUBSCRIPTIONS	11,037	11,037		
c	TELEPHONE	6,290	6,290		
	•	4,782	4,782		
d	RESEARCH				
е		7,911	7,911		
25	Total functional expenses. Add lines 1 through 24e	731,027	731,027	0	(
26	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)	I			

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 248,235 158,118 Cash-non-interest bearing 1 137,080 257,203 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or 16,627 other basis. Complete Part VI of Schedule D 10a 10,018 10,240 b Less: accumulated depreciation 10b 6,609 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 395,555 421,930 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 0 0 26 26 Organizations that follow SFAS 117 (ASC 958), check here X and Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 395,555 421,930 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check her and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Vet 32 Retained earnings, endowment, accumulated income, or other funds 32 395,555 421,930 Total net assets or fund balances 33 395,555 421,930 Total liabilities and net assets/fund balances

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3a

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TOAHO EDEEDOM EOINDATTON THO

Employer identification number

			IDANO FREEDO	M FOUNDATION, II	NC.		20-3/6	3040
P	art I	Reas	on for Public Charity	Status (All organizations	must co	mplete tl	nis part.) See instructions	3.
The	orgar	nization is not	a private foundation because	it is: (For lines 1 through 11, che	eck only o	ne box.)		
1	П			ciation of churches described in			A)(i).	
2	П		cribed in section 170(b)(1)(A					
3	H			e organization described in secti	ion 170(b)(1)(A)(iii)		
4	H	1000		in conjunction with a hospital de				ital's namo
7				in conjunction with a nospital de	Scribed III	Section 1	70(b)(1)(A)(iii). Enter the nosp	itars name,
_		city, and state						
5	Ш			a college or university owned or	operated	by a gove	rnmental unit described in	
722			(b)(1)(A)(iv). (Complete Part	555 s as see 200 190 190				
6				vernmental unit described in sec	2.7		.f.//	
7	X	A STATE OF THE STA		ubstantial part of its support from	n a govern	mental uni	t or from the general public	
		described in	section 170(b)(1)(A)(vi).(Co	emplete Part II.)				
8		A community	trust described in section 17	70(b)(1)(A)(vi).(Complete Part I	l.)			
9		An organizati	ion that normally receives: (1)	more than 33 1/3% of its suppo	rt from co	ntributions	membership fees, and gross	
		receipts from	activities related to its exemp	ot functions—subject to certain e	xceptions,	and (2) no	o more than 33 1/3% of its	
		support from	gross investment income and	unrelated business taxable inco	ome (less	section 51	1 tax) from businesses	
		acquired by the	he organization after June 30	, 1975. See section 509(a)(2). (Complete	Part III.)		
10		An organizati	ion organized and operated ex	xclusively to test for public safety	. See sec	tion 509(a	a)(4).	
11	П			xclusively for the benefit of, to pe		•		of
				ons described in section 509(a)(
				ribes the type of supporting orga	5.,5			
а				d, supervised, or controlled by its				
~				regularly appoint or elect a major				
			You must complete Part IV		only of the	unectors	or trustees of the supporting	
b		-	. 50	sed or controlled in connection w	ith ito oun	norted era	anization(a) by baying	
b							U (00-023) 1/2/0 (1 57/0	
				rganization vested in the same p	bersons in	at control t	or manage the supported	
			s). You must complete Par					
С				rting organization operated in co				
				ons). You must complete Part				
d	\Box			upporting organization operated				
			teld to the most property of the second	nization generally must satisfy a				
			AND RESPONDED TO A STATE OF THE PARTY OF THE	complete Part IV, Sections A	CONTROL DESIGNATION 1-20			
е				a written determination from the		15 15	e I, Type II, Type III	
				ctionally integrated supporting or	ganization			
f			of supported organizations					454 (454 (454 (454 (454 (454 (454 (454
g	Pro	vide the follow	ving information about the sup	ported organization(s).				
		e of supported	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
	org	ganization		(described on lines 1–9 above or IRC section		ur governing ment?	support (see instructions)	other support (see
				(see instructions)	docu	nentr	instructions)	instructions)
				restriction of an industrial restriction of the same provides	Yes	No		
A)								
B)								
C)								
٠								
D)								
150								
E)								
-1								

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	504,575	357,879	577,082	768,367	780,244	2,988,147
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	504,575	357,879	577,082	768,367	780,244	2,988,147
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
•	shown on line 11, column (f)						982,325
6 Soc	Public support. Subtract line 5 from line 4. tion B. Total Support						2,005,822
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4		357,879	577,082		780,244	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	504,575	357,879	223	768,367	192	2,988,147
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2,988,813
12	Gross receipts from related activities, etc.	(see instructions)				12	7,997
13	First five years. If the Form 990 is for the	organization's first, s	second, third, fourth	n, or fifth tax year a	s a section 501(c)(3)	
	organization, check this box and stop here					*****	
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2014 (line 6,	column (f) divided b	y line 11, column (f))		14	67.11%
15	Public support percentage from 2013 Sche	edule A, Part II, line 1	4			15	77.77%
16a	33 1/3% support test—2014. If the organ	ization did not check	the box on line 13	, and line 14 is 33 1	1/3% or more, chec	k this	
	box and stop here. The organization quali	fies as a publicly sup	ported organizatio	n			▶ X
b	33 1/3% support test—2013. If the organ	ization did not check	a box on line 13 o	r 16a, and line 15 is	s 33 1/3% or more,		Household Committee
	check this box and stop here. The organize	zation qualifies as a p	oublicly supported	organization	600 CHOCKS + FREEZON + FREEZON		
17a	10%-facts-and-circumstances test—20	14. If the organizatio	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	is	
	10% or more, and if the organization meets	s the "facts-and-circu	ımstances" test, ch	eck this box and s	top here. Explain i	n	
	Part VI how the organization meets the "far organization	cts-and-circumstanc	es" test. The organ	ization qualifies as	a publicly supporte	d	> 🗆
b	10%-facts-and-circumstances test—20	13. If the organizatio	n did not check a b	ox on line 13, 16a,	16b, or 17a, and lin	ne	
	15 is 10% or more, and if the organization	meets the "facts-and	l-circumstances" te	est, check this box a	and stop here.		
	Explain in Part VI how the organization me supported organization	ets the "facts-and-ci				•	> 🗆
18	Private foundation. If the organization did instructions	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		▶ □

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

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

Sec	tion A. Public Support	, , , , , , , , , , , , , , , , , , , ,			,		
	ndar year (or fiscal year beginning in)▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop here		second, third, four	th, or fifth tax year a	as a section 501(c)	(3)	. .
Sec	etion C. Computation of Public Su		age				
15	Public support percentage for 2014 (line 8,			(f))		15	%
16	Public support percentage from 2013 Sche			(7)		16	%
	ction D. Computation of Investme						70
17	Investment income percentage for 2014 (li			column (f))		17	%
18	Investment income percentage from 2013					4.0	%
19a	33 1/3% support tests—2014. If the orga					(1.4.4.4.2.1.1.3.4.4.4.1.1.	
	17 is not more than 33 1/3%, check this bo						>
b	33 1/3% support tests—2013. If the orga	and the second of the second o	and the constant of the consta	Deliverance of the Lorent Street, and the Lor	A CONTRACTOR OF THE PARTY OF TH		
U-576	line 18 is not more than 33 1/3%, check thi						▶ □
20	Private foundation If the organization did	and the same of th	and the second second	and the same of th			D

Page 4

Part IV **Supporting Organizations**

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

Section	A.	AII	Sup	porting	O	ganizations

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

	Yes	No
1		
2		
0000000000	*************	***********
3a		
************	***************************************	
3b		

-		
3c		
4a		
4b		
70	***************************************	
40		
4c		
5a		
5b		
0.000		
5c		
5c	***************************************	
5c		
5c		
6		
6		
6		
7		
6 7 8		
7 8		
6 7 8		
6 7 8		
6 7 8		
6 7 8 9a		
6 7 8 9a		
6 7 8 9a 9b		
9a 9b 9c 10a		
6 7 8 9a 9b		

the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least an anjointy of the organizations directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organizations activities. If the organization that more than one supported organization, describe how the powers to appoint and/or remove effectors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization of the supported organization of the trust of the supporting such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations. Section C. Type II Supporting Organizations 1 Were a majority of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organizations or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date frontification, and (3) copies of the organization's governing double organization's provided? 1 Vere any of the organization so officers, directors, or trustees either (i) appointed organization's in Part VI how organization's a supported organization's	Pai	rt IV Supporting Organizations (continued)			
a A person who directly or indirectly controls, either alone or logether with persons described in (b) and (c) below, the powering body of a supported organization? b A family member of a person described in (a) above? c A 35% controlled entity of a person described in (a) art (b) above? If "Yes" to a, b, or c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 Dd the direction, fusities, or membership of ore or more supported organizations have the power to requisitive appoint or elect at least a majority of the organization direction or functies at all times during the tax year? If If NO" describe in Part VI how the supported organization is direction or functies at all times during the tax year? If NO" describe in Part VI how the supported organization is direction or functies at all times during the tax year? If NO" describe in Part VI how the supported organization is direction or functies were allocated among the supported organization, describe how the provess to appoint and/or remove direction or nutries were allocated among the supported organization is excepted organization and what conditions or restrictions, flary, spelled to such powers during the tax year. 2 Did the organization is activities if the purposes of the supported organization (the than the supported organization) that organization and what conditions or restrictions, flary, spelled to such powers during the tax year. 1 Viere a majority of the organization or supported organization (s) if NO." describe in Part VI how control or management of the supporting Organizations. 1 Viere a majority of the organization is supported organizations, by the last day of the fifth month of the organization provide to each of the organization was vested in the same persons that controlled or managed the supported organization provide to each of the supported organization was vested or the described organization and (s) copies of the organization maintained a close and continuous working relationship with the supported organiz				Yes	No
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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rganization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on N	lov. 20, 1970. S	See instructions. All	
other Type III non-functionally integrated supporting organizations must complete Sec	tions A through	E	·
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
b Average monthly cash balances	1b		A STATE OF THE STA
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount(add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally-integrated	d Type III supp	orting organization (see	
instructions).	67.574 A A	47 47 15 15	

Schedule A (Form 990 or 990-EZ) 2014

Par	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organization	ons (continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpo	ses		
2	Amounts paid to perform activity that directly furthers exempt purposes	s of supported		
	organizations, in excess of income from activity	50 PDC 5555 • • 0 (450505550		
3	Administrative expenses paid to accomplish exempt purposes of supp	orted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	ation is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015.Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Fo	rm 990 or 990-EZ) 20	14 IDAHO	FREEDOM	FOUNDATION	, INC	26-3783048	Page 8
Part VI	Supplemental I	nformation. F	Provide the ex	planations required ny additional inforr	d by Part II, line	10; Part II, line 17a or 17b; a	and
			, po	.,			
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	7 * * * * * * * * * * * * * * * * * * *						
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				
• • • • • • • • • • • • • • • • • • • •							

							BORINGROUSE PROFESSION

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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

IDAHO FREEDOM	FOUNDATION, INC	26-3783048
Organization type(check one)):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	•	ee
General Rule		
or more (in money or pr	roperty) from any one contributor. Complete Parts I and II. See instructions for determining	
Special Rules		
regulations under section 13, 16a, or 16b, and the	ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II at received from any one contributor, during the year, total contributions of the greater of (1)	, line)
contributor, during the y	year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,	
contributor, during the y contributions totaled mo during the year for an e General Rule applies t	year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the total organization because it received nonexclusively religious, charitable, etc., contribution	i
Caution. An organization that is 990-EZ, or 990-PF), but it must	90-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See lotons. Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½ support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi)), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purposes, but no such contributions total were received during the year for an exclusively religious, charitable, etc., purposes, but no such contributions total wer	

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

Name of organization
IDAHO FREEDOM FOUNDATION, INC

Employer identification number 26-3783048

Part I	Contributors (see instructions). Use duplicate copies of Pa	rt I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 327,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 86,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4	Total contributions \$ 30,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and zir + 4	\$ 17,501	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Nam	e of organization IDAHO FREEDOM FOUNDA	ATION, INC		Employer iden 26-37830	tification number
Pa	t I-A Complete if the organization is exem		or is a section		
1	Provide a description of the organization's direct and indirect			oz. organización	
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa	t I-B Complete if the organization is exem	pt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organiza			▶\$	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form	m 4720 for this year?			Yes No
	Was a correction made?				Yes No
200000000	If "Yes," describe in Part IV.				
	t I-C Complete if the organization is exem			501(c)(3).	
1	Enter the amount directly expended by the filing organization activities			▶ \$	
2	Enter the amount of the filing organization's funds contribute	d to other organizations for sect	ion		
_	F07 (f 1' 1' - 1')			▶ \$	
3	Total exempt function expenditures. Add lines 1 and 2. Enter	r here and on Form 1120-POL.		· · · · · · · · · · · · · · · · · · ·	
	line 47h	······		▶ \$	
4	Did the filing organization file Form 1120-POL for this year?				Yes No
5	Enter the names, addresses and employer identification num	nber (EIN) of all section 527 poli	tical organizations to	which the filing	
	organization made payments. For each organization listed, e				
	the amount of political contributions received that were prom				
	as a separate segregated fund or a political action committee				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If
					none, enter -0
(1)					
(2)					
(-)					
(3)			771	100	
(4)					
(4)					
(5)					
(6)					

reporting section 4911 tax for this year?

Part II-A

90 or 990-EZ) 2014	IDAHO	FREEDOM	FOUNDATION,	INC	26-3783048	Page 2
Complete if the	organiza	tion is exemp	ot under section 5	01(c)(3) a	ind filed Form 5768 (election under	

			section 501(h)).
1	Check	•	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's
			name, address, EIN, expenses, and share of excess lobbying expenditures).

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

	name, address, EIN, e	xpenses, and share of excess lobbying exp	enditures).	
В	Check ▶ ☐ if the filing organization	checked box A and "limited control" provis	ions apply.	
		ying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence publi	c opinion (grass roots lobbying)	6,915	
b	Total lobbying expenditures to influence a leg	islative body (direct lobbying)	8,798	
С	Total lobbying expenditures (add lines 1a and	1b)	15,713	
d	Other exempt purpose expenditures		715,314	
е	Total exempt purpose expenditures (add lines	s 1c and 1d)	731,027	
f	Lobbying nontaxable amount. Enter the amou	int from the following table in both		
	columns.	Statut multiplate et en visch odd statut et et en 🕶 erekenn hann oktober et en	134,654	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of	line 1f)	33,664	
h	Subtract line 1g from line 1a. If zero or less, e	nter -0-	0	
i	Subtract line 1f from line 1c. If zero or less, et	nter -0-	0	

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditure	es During 4-Year A	veraging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	70,070	89,422	128,312	134,654	422,458
b Lobbying ceiling amount (150% of line 2a, column(e))					633,687
c Total lobbying expenditures	10,920	13,000	21,077	15,713	60,710
d Grassroots nontaxable amount	17,518	22,356	32,078	33,664	105,616
e Grassroots ceiling amount (150% of line 2d, column (e))					158,424
f Grassroots lobbying expenditures			5,753	6,915	12,668

Schedule C (Form 990 or 990-EZ) 2014

Yes

No

		(8	a)		(b)		
description of	es," response to lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity.	Yes	No		Amou	nt	
1 During the	he year, did the filing organization attempt to influence foreign, national, state or local						
legislatio	on, including any attempt to influence public opinion on a legislative matter or						
referend	dum, through the use of:						
a Voluntee				1			
	ff or management (include compensation in expenses reported on lines 1c through 1i)?						
	dvertisements?						_
2-2-2-30-2172-3024-0-0-3 -0 -2-2-3	to members, legislators, or the public?			-			
	ions, or published or broadcast statements?						_
	to other organizations for lobbying purposes?						
g Direct co	ontact with legislators, their staffs, government officials, or a legislative body?						
	demonstrations, seminars, conventions, speeches, lectures, or any similar means?		_	-			—
i Other ad							_
	dd lines 1c through 1i						
	activities in line 1 cause the organization to be not described in section 501(c)(3)?						
	enter the amount of any tax incurred under section 4912 enter the amount of any tax incurred by organization managers under section 4912			-			
	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5)	Sec	tion			****
	501(c)(6).						
W 1339					5.82	Yes	N
	ubstantially all (90% or more) dues received nondeductible by members?				1	\rightarrow	_
					2	-	
	organization agree to carry over lobbying and political expenditures from the prior year?	04/->/5>		4.	3		_
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."				ne 3, is	S	
1 Dues, as	ssessments and similar amounts from members		1	T			
	162(e) nondeductible lobbying and political expenditures (do not include amounts of						_
	Il expenses for which the section 527(f) tax was paid).						
politica	i expenses for which the section 527(f) tax was baid).						
•			2a				
a Current	year	******	2a 2b				_
a Current b Carryov	year er from last year	* 63000330000	2b				_
a Current b Carryov c Total	year er from last year		2b 2c				
a Currentb Carryovec Total3 Aggrega	year er from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2b				
a Currentb Carryovec Total3 Aggrega4 If notices	year er from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		2b 2c				
a Current b Carryov c Total 3 Aggrega 4 If notices excess of	year er from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		2b 2c				
a Current b Carryov c Total 3 Aggrega 4 If notices excess of and politic	year er from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		2b 2c 3				_

Schedule C (Form	990 or 990-EZ) 2014	IDAHO	FREEDOM	FOUNDATION,	INC	26-3783048	Page 4
Part IV	Supplemental	Informatio	n (continued)				

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		***********	*******				

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

Open to Public

OMB No. 1545-0047

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

II	DAHO FREEDOM FOUNDATION, INC	26-3783048
	art I Organizations Maintaining Donor Advised Funds or Other Similar Fu	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised fund	s (b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advise	ed
•	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used to be used t	
Ť	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purposes	
	conferring impermissible private benefit?	Yes No
Pa	art II Conservation Easements.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		torically important land area
	Protection of natural habitat Preservation of a cer	tified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	f a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	26
С	Number of conservation easements on a certified historic structure included in (a)	20
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the	organization during the
	tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements du	ring the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	the year
	▶\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense	statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial stateme	nts that describes the
	organization's accounting for conservation easements.	
P	art III Organizations Maintaining Collections of Art, Historical Treasures, o	r Other Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue staten	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes the	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research	ch in furtherance of
	public service, provide the following amounts relating to these items:	
	(i) Revenues included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	▶ \$
2		al gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а		
b	Assets included in Form 990, Part X	▶ \$

16,627

6,609

6,609

10,018

c Leasehold improvements

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

d Equipmente Other

line 25.

1. (a) Descri	iption of liability	(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 9	990, Part X, col. (B) line 25.) ▶		7

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Pa	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.						
1	Total revenue, gains, and other support per audited financial statements	ood, raitiv, inic 12a.	1 1				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		* * * * * * * * * * * * * * * * * * * *				
	Net unrealized gains (losses) on investments	2a					
	Donated services and use of facilities						
	Recoveries of prior year grants	2c					
d		2d					
	Add lines 2a through 2d		2e				
3	Subtract line 2e from line 1		3				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIII.)						
	Add lines 4a and 4b		4c				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.		*.******************				
Pa	rt XII Reconciliation of Expenses per Audited Financial						
	Complete if the organization answered "Yes" to Form		•				
1	Total expenses and losses per audited financial statements		1				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a					
b							
С	Other losses	1 2- 1					
d							
е	Add lines 2a through 2d		2e				
3	Subtract line 2e from line 1		3				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		Section 5 (5) (1) (1) (1) (1)				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII.)	4b					
	Other (Describe in Part XIII.)						
	Add lines 4a and 4b		4c				
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1		4c 5				
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 art XIII Supplemental Information.	8.)	5				
5 Pa Provi	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	8.) ; Part IV, lines 1b and 2b; Part V	/, line 4; Part X, line				
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5 Pa Provi 2; Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1: Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII, lines 2d and 4b.	8.) ; Part IV, lines 1b and 2b; Part V provide any additional information	/, line 4; Part X, line				
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Schedule D (Fo	orm 990) 2014	IDAHO	FREEDOM	FOUNDATION,	INC	26-3783048	Page 5
Part XIII	Supplemen	tal Inform	ation (continu	ued)			
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2014

Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number 26-3783048 IDAHO FREEDOM FOUNDATION, INC FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WILL BE CONDUCTED. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC. FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES DESCRIPTION PROGRAM SERVICE MGT & GENERAL FUNDRAISING POLLSTER \$ 26,910 0 PROFESSIONAL FEES 100,491 0 0

Form 4562

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2014

Attachment Seguence No

Identifying number

170

IDAHO FREEDOM FOUNDATION, INC 26-3783048 Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I 1 500,000 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 10 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 13 13 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.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 1,339 16 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 2,292 17 MACRS deductions for assets placed in service in tax years beginning before 2014 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (f) Method (g) Depreciation deduction (e) Convention (a) Classification of property (business/investment use placed in period only-see instructions) service 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 yrs. SIL 27.5 yrs. MM Residential rental property MM S/L 27.5 yrs. MM S/L Nonresidential real 39 yrs. property MM S/I Section C-Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L b 12-year 12 yrs S/L c 40-year 40 yrs MM Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 3,631 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23