Form

(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) **U** Do not enter social security numbers on this form as it may be made public. **U** Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2019 Open to Public Inspection

A	For the 2019	calendar year, or tax year beginning , and ending				
В	Check if applicable:	C Name of organization	D	Employer	identification number	
	Address change	IDAHO FREEDOM FOUNDATION, INC				
Ħ	Name change	Doing business as		26-3	783048	
\equiv	· ·	Number and street (or P.O. box if mail is not delivered to street address) Room/suite		Telephone		
ш	Initial return	802 W BANNOCK STREET STE 405		208-	258-2280	
	Final retum/ terminated	City or town, state or province, country, and ZIP or foreign postal code				
	Amended return	BOISE ID 83702	G	Gross rea	eipts \$ 710,3	74
=		F Name and address of principal officer:	is a omun	return for su	ubordinates? Yes X	No
Ш	Application pending	WAINE HOFFMAN			H., F	1
				linates inclu		No
		10 03702	If "No," at	tach a list. ((see instructions)	
1	Tax-exempt status					
J	Website: U			tion number	u	
ĸ	Form of organization	n: X Corporation Trust Association Other U L Year of formatio	n: 20	80	M State of legal domicile:	ID
P	art I	Summary				
	1 Briefly	describe the organization's mission or most significant activities:				
Ф	TO	DEVELOP AND ADVOCATE THE PRINCIPLES OF INDIVIDUAL LIBERTY,	PERS	ONAL		
anc	RES	PONSIBILITY, PRIVATE PROPERTY RIGHTS, ECONOMIC FREEDOM, ANI	LIM	IITED,		
Ĕ	TRA	NSPARENT GOVERNMENT				
Governance	2 Check	his box u if the organization discontinued its operations or disposed of more than 25% of its net	assets.			
ن مع	3 Numbe	of voting members of the governing body (Part VI, line 1a)		3	4	
	4 Numbe	of independent voting members of the governing body (Part VI, line 1b)		4	4	
Activities	5 Total n	umber of individuals employed in calendar year 2019 (Part V, line 2a)		5	8	
Ċţ		umber of volunteers (estimate if necessary)		6	0	
٩		nrelated business revenue from Part VIII, column (C), line 12		7a		0
		elated business taxable income from Form 990-T, line 39		7b		0
			ior Year	1	Current Year	
a	8 Contrib	utions and grants (Part VIII, line 1h)	727	,436	708,7	33
Ž		n service revenue (Part VIII, line 2g)				0
Revenue	10 Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)		427	7	55
œ	11 Other r	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	78	,999	8	86
		venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	806	,862	710,3	74
	13 Grants	and similar amounts paid (Part IX, column (A), lines 1–3)				0
		paid to or for members (Part IX, column (A), line 4)				0
S	15 Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5–10)	476	,583	513,1	38
cpenses	16a Profess	ional fundraising fees (Part IX, column (A), line 11e)				0
ber	b Total fu	ndraising expenses (Part IX, column (D), line 25) u 260,701				
ŭ		xpenses (Part IX, column (A), lines 11a–11d, 11f–24e)	411	,738	203,4	41
		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)	888	,321	716,5	
	19 Revenu	e less expenses. Subtract line 18 from line 12	-81	,459	-6,2	
Net Assets or Fund Balances		Beginning			End of Year	
Sets	20 Total as	sets (Part X, line 16)	640	,277	634,0	<u>72</u>
A AS	21 Total lia	bilities (Part X, line 26)		0		0
<u>₹</u> ∄	22 Net ass	ets or fund balances. Subtract line 21 from line 20	640	,277	634,0	<u>72</u>
P	art II	ignature Block				
	•	f perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the		of my know	wledge and belief, it is	
tru	ue, correct, and	complete. Declaration of preparer (other than officer) is based on all information of which preparer has any know	vledge.			
Sig	ın 📗	Signature of officer		Date		
He	re 📗	WAYNE HOFFMAN PRESIDENT				
		Type or print name and title				
	Print/Ty	pe preparer's name Preparer's signature Da	ite	Check	if PTIN	
Paid	d GREG	ORY J BRAUN, CPA GREGORY J BRAUN, CPA		self-emp		
	parer Firm's	name } RIPLEY DOORN & COMPANY, P.L.L.C.	Firm	's EIN }	82-047613	2
Use	Only	217 W GEORGIA AVE STE 100				
	Firm's	address } NAMPA, ID 83686-2836	Pho	ne no.	208-466-92	64
Max		use this raturn with the propagar shown above? (see instructions)			Y Vos	N.

Pa	rt III Statement of Program Service Accomplishments	T.F
	Check if Schedule O contains a response or note to any line in this Part III	X
	Briefly describe the organization's mission:	
	O DEVELOP AND ADVOCATE THE PRINCIPLES OF INDIVIDUAL LIBERTY, PERSONAL	
	ESPONSIBILITY, PRIVATE PROPERTY RIGHTS, ECONOMIC FREEDOM, AND LIMITED,	
T	RANSPARENT GOVERNMENT	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Nο
	If "Yes," describe these new services on Schedule O.	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	Conditions?	No Z
	If "Yes," describe these changes on Schedule O.	
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
	the total expenses, and revenue, if any, for each program service reported.	
40	(Code:) (Expenses \$ 294,817 including grants of \$) (Revenue \$	١
4a Tr	(Code:) (Expenses \$ 294,817 including grants of \$) (Revenue \$ O DEVELOP AND ADVOCATE THE PRINCIPLES OF INDIVIDUAL LIBERTY, PERSONAL)
	·	
	ESPONSIBILITY, PRIVATE PROPERTY RIGHTS, ECONOMIC FREEDOM, AND LIMITED,	
1.	RANSPARENT GOVERNMENT	
	·	
	•	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	/A	
	*	
	•	
	*	
	·	
	•	
	•	
	•	
	•	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	١
	/A	/
	/ * *	
	·	
	·	
	•	
	•	
	•	
	·	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4-	Total program contino expanses LL 20/ 817	

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,"		v	
•	complete Schedule A	1	X	-
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	Λ	
3	The state of the s	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	-		
7	and the state of t	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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		X
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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in 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,"		٦,	
	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	L.,.		
	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	110		x
٨	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	11c		
d	reported in Part V. line 162 If "Voc." complete Schodule D. Part IV	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	1		
•	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			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	1.0		.
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-7		_ v
10	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	10		x
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		<u> </u>
ıJ	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?	20b		├ <u></u>
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

						Yes	No
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						
04-	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	246					
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines				24a		x
b	through 24d and complete Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?				24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year.				240		
	to defense any two support hands?				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						
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I				25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	orior					
	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 or 22, for receivables from or payables to any cu	rrent					
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%						
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II				26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee,	key					
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee						
	member, or to a 35% controlled entity (including an employee thereof) 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):	ır					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? "Yes," complete Schedule L, Part IV				28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV				28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If				200		
·					28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I				29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified						
	The state of the s				30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule	N, Par	rt I		31		Х
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 Regular						
	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, Part II,	III,					
	or IV, and Part V, line 1				34		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						.
07	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 of the first transfer of the state				1 27		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part Did the experience in Schedule O for Part VI, lines 11b.				37		_^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b 19? Note: All Form 990 filers are required to complete Schedule O.	anu			38	х	
P	art V Statements Regarding Other IRS Filings and Tax Compliance		_		1 30		
1 (Check if Schedule O contains a response or note to any line in this Part V						
_	2.138K ii Gariadaia G Gariania a raaparida di fidio ta diriy iiila li tilia i diri v					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a		9		1.50	
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 princ winners?				4.5	v	1

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X b If "Yes," enter the name of the foreign country **u** See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х b If "Yes," did the organization include with every solicitation an express statement that such contributions or 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Х and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? h 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х required to file Form 8282? d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? X g 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? а 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Section 501(c)(29) qualified nonprofit health insurance issuers. 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. Enter the amount of reserves the organization is required to maintain by the states in which b the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? Х 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 Х excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O.

X

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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

<u>Sec</u>	tion A. Governing Body and Management					
			4		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4			
	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 on Schedule O.	l	4			
b	Enter the number of voting members included on line 1a, above, who are independent	_1b	4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
_	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
						X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					X
5						X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year be	y the f	ollowing:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O					X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Inter	nal R	evenue	Code.)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			. 10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	e form?		. 11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			. 12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	ts?	. 12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			. 12c	X	
13	Did the organization have a written whistleblower policy?			. 13	X	
14	Did the organization have a written document retention and destruction policy?			. 14	X	
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a		Х
b	Other officers or key employees of the organization			456		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			. 16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed u ID					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990, and 990-T (Section 6104 or 1024-A, if applicable), 990-T (Section 6104 or 1024-A, if app					
	(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 on Schedule O)					
19	Describe on 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	u				
	AYNE HOFFMAN 802 W BANNOCK STREET STE 405					
В	DISE ID 8370)2	2	08-25	8-2	280

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the orga	anization nor any	relat	ed o	rgani	zatio	on co	mpe	ensated any current officer, of	director, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	ox, unle ficer a	Pos check ess pe	rson i	than of s both or/trust Highest compensated	an ee)	(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 and related organizations
(1) WAYNE HOFFMAN PRESIDENT	40.00			x				138,310	0	0
(2) LOEL FENWICK	0.00							130,310	0	0
DIRECTOR	0.25	х						0	0	0
(3) VICKI KEEN	0.25									
DIRECTOR (A) PDENT DECAN	0.00	Х						0	0	0
(4) BRENT REGAN CHAIRMAN	0.25	x		x				0	0	0
(5) GEORGE SYMMS	0.25	x						0	0	0
DIRECTOR (6)	0.00	^						0	0	0
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										

Part VII Section A. Officers	s, Directors, Tru	stee	s, Ke	еу Е	mplo	yee	s, ar	nd Highest Compensated	Employees (continued)				
(A) Name and title	(B) Average hours per week (list any	Average hours per week (list any Position (do not check more than one box, unless person is both a officer and a director/trustee						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	c	timated of oth compens from t	(F) nated amount of other mpensation from the	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		ganizatio		6
1b Subtotal							u	138,310					
c Total from continuation shed d Total (add lines 1b and 1c) 2 Total number of individuals (in-							u u ove)	138,310 who received more than \$1	00,000 of				
reportable compensation from	the organization	u _	1					The received more than \$1				Yes	No
3 Did the organization list any fo								, or highest compensated				103	
employee on line 1a? <i>If "Yes,"</i> 4 For any individual listed on line	e 1a, is the sum of	of rep	ortal	ble c	omp	ensa	tion				3		Х
organization and related orgar individual											4		х
5 Did any person listed on line 1 for services rendered to the or	a receive or accr	ue c	ompe	ensat	tion 1	rom	any	unrelated organization or in-	dividual		5		Х
Section B. Independent Contracto	ors												
1 Complete this table for your fix compensation from the organization								year ending with or within	the organization's tax year.				
Name an	(A) d business address							Descrip	(B) tion of services		Co	(C) mpensat	ion
							-						
2 Total number of independent of received more than \$100,000								listed above) who	0				

Forn	n 990	(2019) IDAH	ю і	FREEDOM 1	FOUN	DATIC	ON, INC	26	-3783048		Page
Pa	rt V			f Revenue edule O cont	ains a	respon	se or note t	o anv line in this	s Part VIII		
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated camp	aigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership due	es		1b						
Α, Ā	С	Fundraising eve	nts		1c						
Sifts lar	d	Related organiza	ations		1d						
s, e	е	Government grants (d			1e						
tion S	f	All other contributions,									
ĕĕ		and similar amounts n	ot include	ed above	1f		708,733				
ontr	g	Noncash contributions			1g		14,785				
<u> </u>	h	Total. Add lines	1a–1f					708,733			
							Business Code				
ġ	2a	• • • • • • • • • • • • • • • • • • • •									
Program Service Revenue	b c										
es es	4										
502	e										
₫	f	All other prograr		ice revenue							
	l	Total. Add lines					u				
	3	Investment incor									
		other similar am	ounts)				u	755			75!
	4	Income from inv	estme	nt of tax-exempt	bond p	proceeds .	u				
	5	Royalties	. <u></u>								
				(i) Real		(ii)	Personal				
	6a		6a								
	b	Less: rental expenses	6b 6c				-				
		Rental inc. or (loss) Net rental incom		000)			u				
		Gross amount from	01 (1	(i) Securities			Other				
		sales of assets other than inventory	7a	()		1					
ne	b	Less: cost or other	1 41								
ent		basis and sales exps.	7b								
Other Reven	С	Gain or (loss)	7с								
ЭĒ		Net gain or (loss				· · · · · · · · · · · · · · · · · · ·	u				
₹	8a	Gross income from									
		(not including \$									
		of contributions rep		,	_						
		See Part IV, line 18			8a						
		Less: direct expenses or (I			8b	<u> </u>					
	l	Gross income fron			vents .		u				
	Ja	See Part IV, line 19	-	-	9a	[
	b	Less: direct expe			9b						
		Net income or (I			$\overline{}$		u				
	l	Gross sales of in									
		returns and allow	wance	s	10a						
		Less: cost of goo	ods so	old	10b						
	С	Net income or (l	oss) fr	om sales of inve	ntory		u				

u Business Code

u

u

555

331

886

0

710,374

0

555

331

Miscellaneous Revenue

11a REIMBURSED EXPENSES

e Total. Add lines 11a-11d ...

12 Total revenue. See instructions

SHARED SERVICES

d All other revenue

Part IX Statement of Functional Expenses

Form 990 (2019)

Sect	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a response	•		e column (A).	П
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	Bb, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
3	individuals. See Part IV, line 22				
3	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,				
3	trustees, and key employees	138,310	67,772	15,214	55,324
6	Compensation not included above to disqualified	130/310	01/112	15/211	33/321
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	313,742	153,733	34,512	125,497
8	Pension plan accruals and contributions (include	313,712	2337733	31,312	123,137
٥	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	20,454	10,022	2,250	8,182
10	Dourell toyon	40,632	19,909	4,470	16,253
11	Fees for services (nonemployees):			-,-,-	
	Management				
b	Legal				
c	Accounting	2,335		2,335	
d	Labbuing				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
q	Other. (If line 11g amount exceeds 10% of line 25, column				
J	(A) amount, list line 11g expenses on Schedule O.)	49,974	21,905	16,740	11,329
12	Advertising and promotion	9,767	3,246	6,436	85
13	Office expenses	12,944	875	9,508	2,561
14	Information technology				
15	Royalties				
16	Occupancy	38,017		38,017	
17	Travel	18,676	1,021	10,130	7,525
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,962			6,962
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,805	9,805		
23	Insurance	2,402		2,402	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	DONOR ACQUISITION	13,961		308	13,653
b	DUES & SUBSCRIPTIONS	11,049	330	682	10,037
С	STATIONERY & PRINTING	9,829	662	7,897	1,270
d	APPLICATION SOFTWARE	6,371	1,801	3,910	660
е	All other expenses	11,349	3,736	6,250	1,363
25	Total functional expenses. Add lines 1 through 24e	716,579	294,817	161,061	260,701
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign a <u>nd</u>				
	fundraising solicitation. Check here u if				
	following SOP 98-2 (ASC 958-720)			l	

Form 990 (2019) IDAHO FI

	u ,	Check if Schedule O contains a response or note to	anv line in th	is Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing		L	44,241		169,586
	2	Savings and temporary cash investments			572,175	2	450,430
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or former of	officer, director	,			
		trustee, key employee, creator or founder, substantial con	ntributor, or 35	5%			
		controlled entity or family member of any of these person	S			5	
	6	Loans and other receivables from other disqualified person					
Ŋ		under section 4958(f)(1)), and persons described in section	on 4958(c)(3)((B)		6	
Assets	7	Notes and loans receivable, net		7			
Ä	8	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·		8	
	9	Prepaid expenses and deferred charges				9	
	10a		. 1				
		basis. Complete Part VI of Schedule D	10a	57,866			
	b	Less: accumulated depreciation	10b	43,810	23,861	10c	14,056
	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	0		15			
	16	Other assets. See Part IV, line 11			640,277	16	634,072
	17	Accounts payable and accrued expenses			<u> </u>	17	001,011
	18					18	
	19	Grants payable Deferred revenue		19			
	20	Tarrana and band Balditian		20			
	21	Escrow or custodial account liability. Complete Part IV of			21		
	22	Loans and other payables to any current or former officer					
Liabilities		trustee, key employee, creator or founder, substantial col		:0/2			
Ρij		controlled entity or family member of any of these person	_			22	
Ë	23	Secured mortgages and notes payable to unrelated third				23	
	24	Unsecured notes and loans payable to unrelated third pa				24	
	25	Other liabilities (including federal income tax, payables to				24	
	23	parties, and other liabilities not included on lines 17-24).		Y			
		,	•	l		25	
	26	of Schedule D Total liabilities. Add lines 17 through 25			0		0
	20	Organizations that follow FASB ASC 958, check here	x			20	
Ś		and complete lines 27, 28, 32, and 33.	: u <u>M</u>				
nce	27	Material State Communication			640,277	27	634,072
Balances	27				040,211	28	034,072
B	28	Net assets with donor restrictions		· 		20	
Fund		Organizations that do not follow FASB ASC 958, che	ck nere u	\sqcup			
P	20	and complete lines 29 through 33.			20		
ts c	29				29		
Assets	30	Paid-in or capital surplus, or land, building, or equipment			30		
	31	Retained earnings, endowment, accumulated income, or		1	640,277	31	624 072
Net	32	Total light little and and accept found belonges				32	634,072 634,072
	33	Total liabilities and net assets/fund balances			640 , 277	33	034,0/4

Form **990** (2019)

Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7:	10,	374				
2	Total expenses (must equal Part IX, column (A), line 25)	2	7:	16,	579				
3	Revenue less expenses. Subtract line 2 from line 1	3		-6,2	205				
4									
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
	32, column (B))	10	6.	34,0	072				
Pa	rt XII Financial Statements and Reporting	•							
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: X Cash Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in								
	Schedule O.								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or								
	reviewed on a separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b		х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a								
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of								
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c						
	If the organization changed either its oversight process or selection process during the tax year, explain on								
	Schedule O.								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Single Audit Act and OMB Circular A-133?		3a						
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 on Schedule O and describe any steps taken to undergo such audits		3b						

Form **990** (2019)

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.

2019

Open to Public

Department of the Treasury Internal Revenue Service

u Attach to Form 990 or Form 990-EZ.

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

Inspection

Name	of th	e organization	IDAHO FREEDO	M FOUNDATION, I	NC		Employer ident 26-378	ification number
P	art	Reas		Status (All organizations		mnlete		
				it is: (For lines 1 through 12, che		•	uns part.) Occ instruction	J.
1			•	ciation of churches described in	•	,	A)(i).	
2	Н			A)(ii). (Attach Schedule E (Form			- 7(-7-	
3	Н			e organization described in sect			.	
4	П		·	in conjunction with a hospital de	•			oital's name.
	ш	city, and state		, , , , , , , , , , , , , , , , , , , ,			- (-), // // · · · · · · · · · · · · · · · ·	,
5				a college or university owned or	operated	by a gove	ernmental unit described in	
	\equiv	section 170	(b)(1)(A)(iv). (Complete Part	II.)				
6	Ш		-	vernmental unit described in se			•	
7	X		on that normally receives a section 170(b)(1)(A)(vi). (Co	ubstantial part of its support from implete Part II.)	n a govern	mental un	it or from the general public	
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part I	l.)			
9		An agricultura	al research organization desc	ribed in section 170(b)(1)(A)(ix) operated	l in conjur	nction with a land-grant college	
		•	or a non-land-grant college of	agriculture (see instructions). Er	nter the na	me, city,	and state of the college or	
		university:						
10	Ш	•	•	more than 33 1/3% of its support functions—subject to certain ex				
		•		I unrelated business taxable inco	•	` ,		
		acquired by the	ne organization after June 30	1975. See section 509(a)(2).	(Complete	Part III.)	,	
11	Ш	An organization	on organized and operated ex	clusively to test for public safety	. See sec	tion 509(a)(4).	
12	Ш	_		clusively for the benefit of, to pe				
				ations described in section 509 (at describes the type of supportin				
	а		· ·	rated, supervised, or controlled b				.y.
	•			er to regularly appoint or elect a		-	.,	
		supporting	g organization. You must co	mplete Part IV, Sections A an	d B.			
	b			ervised or controlled in connecti				
				ng organization vested in the sa	me persor	s that cor	ntrol or manage the supported	
	_		on(s). You must complete	•	:n aannaat	المائيين مما	and franctionally integrated with	
	С			upporting organization operated ructions). You must complete F				
	d			. A supporting organization oper)
				organization generally must satis	•			
			,	ust complete Part IV, Sections				
	е			ved a written determination from -functionally integrated supportin			Type I, Type II, Type III	
	f		nber of supported organization	, , , , , , , , , , , , , , , , , , , ,	9 - 9			
	g	Provide the fo	ollowing information about the	e supported organization(s).				
	i) Nan	ne of supported	(ii) EIN	(iii) Type of organization	, ,	organization	(v) Amount of monetary	(vi) Amount of
	or	ganization		(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
				above (see instructions))	Yes	No	instructions)	instructions)
(A)					1			
()								
(B)								
(C)								
(D)								
(E)								
Tota	.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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 996,695 495,706 711,124 727,436 708,733 3,639,694 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 996,695 711,124 495,706 727,436 708,733 3,639,694 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) 1,649,855 Public support. Subtract line 5 from line 4... 1,989,839 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Amounts from line 4 996,695 495,706 711,124 727,436 708,733 3,639,694 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from 535 635 454 427 755 2,806 similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets 27,865 78,999 886 (Explain in Part VI.) 5,223 112,973 11 Total support. Add lines 7 through 10 3,755,473 Gross receipts from related activities, etc. (see instructions) 12 12 87,409 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 14 52.99% 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 47.79% 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

18

supported organization

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

(Complete only if you checked the box on line 10 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						
Cale	ndar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)	<u>-</u>
	organization, check this box and stop here	<u>'</u>				· · · · · · · · · · · · · · · · · · ·	▶
Sec	tion C. Computation of Public Su						_
15	Public support percentage for 2019 (line 8,	column (f), divided	by line 13, column	(f))		15	%
16	Public support percentage from 2018 Sched					16	%
	tion D. Computation of Investme						
17	Investment income percentage for 2019 (lin	ne 10c, column (f),	divided by line 13,	column (f))		17	<u>%</u>
18	Investment income percentage from 2018	Schedule A, Part III	ok the how on line		oro than 22 4/20/	18_	%_
19a	33 1/3% support tests—2019. If the organ 17 is not more than 33 1/3%, check this box						▶ □
b	33 1/3% support tests—2018. If the organ	-					
J	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did		_				. —

Page 4

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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 3a (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b 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 12a or 12b 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)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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 9a) 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 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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		
	3a		
	3b		
	_		
	3c		
	4a		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	00		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
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	ule A (Form 990 or 990-EZ) 2019	8		Page 5
Pa	rt IV Supporting Organizations (continued)		Vec	No.
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
··· a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
b		11b		
C		11c		
	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations		I	T
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			T
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Coot	supported organizations played in this regard.	3		
	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	. 1		
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	s).		
2	Activities Test. Answer (a) and (b) below.	1	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
		22		
L	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	24		
•	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	2b		
-5	I GIGHL OF SUPPOREU CHUCHILANICHS. ALISWEL I <i>al a</i> HU IDI DEIOW.			

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

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

trustees of each of the supported organizations? Provide details in Part VI.

3a

3b

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations								
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See								
instructions. All other Type III non-functionally integrated supporting organizations must of	omplete	Sections A through E.						
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
1 Net short-term capital gain	1							
2 Recoveries of prior-year distributions	2							
3 Other gross income (see instructions)	3							
4 Add lines 1 through 3.	4							
5 Depreciation and depletion	5							
6 Portion of operating expenses paid or incurred for production or								
collection of gross income or for management, conservation, or								
maintenance of property held for production of income (see instructions)	6							
7 Other expenses (see instructions)	7							
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1 Aggregate fair market value of all non-exempt-use assets (see								
instructions for short tax year or assets held for part of year):								
a Average monthly value of securities	1a							
b Average monthly cash balances	1b							
c Fair market value of other non-exempt-use assets	1c							
d Total (add lines 1a, 1b, and 1c)	1d							
e Discount claimed for blockage or other								
factors (explain in detail in Part VI):								
2 Acquisition indebtedness applicable to non-exempt-use assets	2							
3 Subtract line 2 from line 1d.	3							
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,								
see instructions).	4							
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6 Multiply line 5 by .035.	6							
7 Recoveries of prior-year distributions	7							
8 Minimum Asset Amount (add line 7 to line 6)	8							
Section C - Distributable Amount			Current Year					
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1							
2 Enter 85% of line 1.	2							
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3							
4 Enter greater of line 2 or line 3.	4							
5 Income tax imposed in prior year	5							
6 Distributable Amount. Subtract line 5 from line 4, unless subject to								
emergency temporary reduction (see instructions).	6							
7 Check here if the current year is the organization's first as a non-functionally integrated Type	oe III su	pporting organization (see						
instructions).		`						

Schedule A (Form 990 or 990-EZ) 2019

Par	t V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organization	ions (continued)					
Sect	ion D - Distributions			Current Year				
1_	Amounts paid to supported organizations to accomplish exempt purpose	S						
2	2 Amounts paid to perform activity that directly furthers exempt purposes of supported							
	organizations, in excess of income from activity							
3_	Administrative expenses paid to accomplish exempt purposes of support	ted 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 organization	on is responsive						
	(provide details in Part VI). See instructions.							
9	Distributable amount for 2019 from Section C, line 6							
10	Line 8 amount divided by line 9 amount	1						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
1_	Distributable amount for 2019 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2019							
	(reasonable cause required-explain in Part VI). See							
	instructions.							
3	Excess distributions carryover, if any, to 2019							
	From 2014							
	From 2015							
	From 2016							
	From 2017							
	From 2018							
	Total of lines 3a through e							
	Applied to underdistributions of prior years							
	Applied to 2019 distributable amount							
<u>-</u>	Carryover from 2014 not applied (see instructions)							
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.							
4	Distributions for 2019 from							
	Section D, line 7: \$							
	Applied to underdistributions of prior years							
	Applied to 2019 distributable amount							
<u>c</u>	Remainder. Subtract lines 4a and 4b from 4.							
Э	Remaining underdistributions for years prior to 2019, if							
	any. Subtract lines 3g and 4a from line 2. For result							
	greater than zero, explain in Part VI . See instructions.							
6	Remaining underdistributions for 2019. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2020. Add lines 3j							
8	and 4c. Breakdown of line 7:							
	Excess from 2015							
	Excess from 2017 Excess from 2018							
	Excess from 2018 Excess from 2019							
E	EAGGOOD HOLLI ZUIU							

Schedule A (Form 990 or 990-EZ) 2019

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

U Complete if the organization is described below. U Attach to Form 990 or Form 990-EZ. U Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on 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.

If the organization answered "Yes," on 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," on 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

• 5	Section 501(c)(4), (5), or (6) organizations: Complete Part III.				
Name	e of organization			1	ification number
	IDAHO FREEDOM FOUNDA			26-37830	
Pai	t I-A Complete if the organization is exem	pt under section 501(c)	or is a section	n 527 organizatio	<u>n. </u>
1	Provide a description of the organization's direct and indirect	political campaign activities in	Part IV. (see instru	ctions for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)				
3	Volunteer hours for political campaign activities (see instruct				
	t I-B Complete if the organization is exem				
1	Enter the amount of any excise tax incurred by the organizat	ion under section 4955		u\$	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		u\$	
3	If the organization incurred a section 4955 tax, did it file Form				
4a					Yes No
	If "Yes," describe in Part IV. rt I-C Complete if the organization is exem	nt under section 501(c	Avcent secti	on 501(c)(3)	
<u>га</u>	Enter the amount directly expended by the filing organization	•	•	011 301(0)(3).	
•		•		2.1	
2	activities Enter the amount of the filing organization's funds contributed			G y	
_				118	
3	Total exempt function expenditures. Add lines 1 and 2. Enter			4 v	
	line 17b	•		u\$	
4	Did the filing organization file Form 1120-POL for this year?				☐Yes ☐ No
5	Enter the names, addresses and employer identification num				
	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)					
(4)					
(5)					
(3)					
(6)					
/					

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

Schedule C (Form 990 or 990-EZ) 2019

Pa	art II-A		Complete if the organiz	ation is exempt under section 501(c)(3) an	d filed Form 5768 (ele	ection under				
			section 501(h)).							
Α	Check	Check u lif 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).						
В	Check	u	if the filing organization	checked box A and "limited control" provisions app	ly.					
			Limits on Lol	bying Expenditures	(a) Filing	(b) Affiliated				
			(The term "expenditures"	neans amounts paid or incurred.)	organization's totals	group totals				
1	a Total lo	obby	ing expenditures to influence put	lic opinion (grassroots lobbying)	0					
I	b Total lo	obby	ing expenditures to influence a le	gislative body (direct lobbying)	12,800					
(c Total lo	obby	ing expenditures (add lines 1a ar	d 1b)	12,800					
(703,779					
(e Total e	xem		es 1c and 1d)	716,579					
				unt from the following table in both						
	column	is.			132,487					
	If the a	mou	nt on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	Not ove	er \$5	00,000	20% of the amount on line 1e.						
	Over \$5	500,0	000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
	Over \$	1,000	0,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.						
	Over \$	1,500	0,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.						
	Over \$	17,00	00,000	\$1,000,000.						
,	g Grassr	oots	nontaxable amount (enter 25% of	of line 1f)	33,122					
ı	h Subtra	ct lin	e 1g from line 1a. If zero or less,	enter -0-	0					
			e 1f from line 1c. If zero or less,		0					
	j If there	is a	n amount other than zero on eith	er line 1h or line 1i, did the organization file Form 4720						
	reportir	ng se	ection 4911 tax for this year?			Yes No				

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 Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total				
2a Lobbying nontaxable amount	127,594	129,673	160,498	132,487	550,252				
b Lobbying ceiling amount (150% of line 2a, column (e))					825,378				
c Total lobbying expenditures	11,011	10,375	31,011	12,800	65,197				
d Grassroots nontaxable amount	31,899	32,418	40,125	33,122	137,564				
e Grassroots ceiling amount (150% of line 2d, column (e))					206,346				
f Grassroots lobbying expenditures				0					

Schedule C (Form 990 or 990-EZ) 2019

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT find (election under section 501(h)).	led F	orm 5	768			g
	(a)		(b)		
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No		Amou	ınt	
1 During the year, did the filing organization attempt to influence foreign, national, state, or local						
legislation, including any attempt to influence public opinion on a legislative matter or						
referendum, through the use of:						
a Volunteers?						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c Media advertisements?						
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		-				
i Other activities?		_				
j Total. Add lines 1c through 1i						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		_				
b If "Yes," enter the amount of any tax incurred under section 4912		_				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d If the filing 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 501(c)	(5), o	r sect	ion			
501(c)(6).				I		Ι
			Г		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			}	1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 				3		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes."				ne 3,	is	
1. Dues aggregate and similar amounts from members		1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of						
political expenses for which the section 527(f) tax was paid).						
a Current year		2a				
b Carryover from last year		2b				
c Total	• • •	2c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	• •					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
and political expenditure next year?		4				
5 Taxable amount of lobbying and political expenditures (see instructions)		5				
Part IV Supplemental Information		•				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, I	ines 1	and				
2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.						
				•		•
				•		•

Schedul	e C (For	m 990 or 990-EZ) 2019	IDAHO	FREEDOM	FOUNDATION,	INC	26-3783048	Page 4
	t IV	Supplemental	Information	on (continued	()			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

U Attach to Form 990.

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

2019
Open to Public Inspection

OMB No. 1545-0047

Name of the organization Employer identification number IDAHO FREEDOM FOUNDATION, INC 26-3783048 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located u 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X u \$_____ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part III Organizations Maintaining	g Collections of			Other Simila	ar Assets	(continu	ed)
3 Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records,	check any of the follo	wing that make s	significant use of	its	•	,
a Public exhibition	d 🗌	Loan or exchange pro	ogram				
b Scholarly research	е 🗌	Other					
c Preservation for future generations							
4 Provide a description of the organization's co	ollections and explain h	now they further the or	rganization's exe	mpt purpose in F	Part		
XIII.							
5 During the year, did the organization solicit of	or receive donations of	art, historical treasure	s, or other simila	ır			
assets to be sold to raise funds rather than t		art of the organization's	collection?			Ye	s No
Part IV Escrow and Custodial And Complete if the organization 990, Part X, line 21.	_	on Form 990, Pa	art IV, line 9,	or reported a	n amount o	on Form	
1a Is the organization an agent, trustee, custodi	an or other intermedia					Ye	s No
b If "Yes," explain the arrangement in Part XIII						. 🗀	
	·	· ·				Amount	
c Beginning balance					1c		
d Additions during the year					1d		
e Distributions during the year					1e		
f Ending balance					1f		
2a Did the organization include an amount on F	orm 990, Part X, line 2	21, for escrow or custo	odial account liab	ility?		Ye	s No
b If "Yes," explain the arrangement in Part XIII.	Check here if the exp	planation has been pro	vided on Part XII	<u> </u>			
Part V Endowment Funds.							
Complete if the organizatio						T	
	(a) Current year	(b) Prior year	(c) Two years	back (d) Th	ree years back	(e) Four	r years back
1a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and							
losses							
d Grants or scholarships						+	
e Other expenditures for facilities and							
programs							
f Administrative expenses							
g End of year balance2 Provide the estimated percentage of the curr	ront year and balance	(line 1g column (a)) h	old oo:				
a Board designated or quasi-endowment U	•	(iiile 1g, coluitiii (a)) ti	leiu as.				
b Permanent endowment u %							
c Term endowment u % The percentages on lines 2a, 2b, and 2c sho	ould equal 100%						
3a Are there endowment funds not in the posse	•	on that are held and a	administered for t	he			
organization by:	ssion of the organization	on that are new and a	iuministered for t	iie		ſ	Yes No
· ·						3a(i)	7.55 140
(i) Unrelated organizations						3a(ii)	
(ii) Related organizationsb If "Yes" on line 3a(ii), are the related organization	ations listed as require	d on Schedule R?				3b	
4 Describe in Part XIII the intended uses of the						. [52]	
Part VI Land, Buildings, and Equ		mont fands.					
Complete if the organization	•	on Form 990. Pa	art IV. line 11a	a. See Form	990. Part X	(. line 10).
Description of property	(a) Cost or other		r other basis	(c) Accumulate		(d) Book	
	(investment)	''	her)	depreciation		-	
1a Land							
b Buildings							
c Leasehold improvements							
d Equipment			57,866	43	,810	:	14,056
e Other			•		-		
Total Add lines 1a through 1e (Column (d) must a		X column (R) line 10c	·)			-	14 056

Schedule D (Fo	orm 990) 2019 IDAHO FREEDOM FOUNDATI Investments – Other Securities.	O11/ 111C	26-3783048	Page
I GIT VII	Complete if the organization answered "Yes" on F	orm 990. Part IV lin	e 11b. See Form 990 P	art X. line 12
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial of	derivatives			
(2) Closely hel	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)u			
Part VIII	Investments – Program Related.	000 D. (I) (I'.	44. O. F 000 D	
	Complete if the organization answered "Yes" on F			· · · · · · · · · · · · · · · · · · ·
	(a) Description of investment	(b) Book value	(c) Method of	
(4)			Cost or end-of-ye	ai iriainet value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)u			
Part IX	Other Assets.			
i di C D C	Complete if the organization answered "Yes" on F	orm 990. Part IV. lin	e 11d. See Form 990. P	art X. line 15.
	(a) Description	,		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 15.)		u	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on F line 25.	orm 990, Part IV, lir	e 11e or 11f. See Form	990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal i	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Tatal (Caluman	(h) must equal Form 000, Part V, col. (R) line 25.)			I

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Pa	art XI Reconciliation of Revenue per Audited Financial Statemer	<u>-</u>	turn.	
	Complete if the organization answered "Yes" on Form 990, Pa	·		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b		2b		
С		2c		
d		2d		
е			2e	
3		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		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
5		5		
Pa	art XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 12a.		
1	Total auraneae and leave non sudited financial atataments		1	
2				
а		2a		
b	Prior year adjustments	2b		
С		2c		
d				
	Add lines 2a through 2d		2e	
3			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1		
а		4a		
	Other (Describe in Part XIII.)			
	Add lines 4s and 4h		4c	
С	. AOO IIDES 44 AOO 40			
			5	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			
5 Pa			5	
5 Pa Provi	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information.	es 1b and 2b; Part V, line 4; Part)	5	
5 Pa Provi	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	es 1b and 2b; Part V, line 4; Part)	5	
5 Pa Provi	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	es 1b and 2b; Part V, line 4; Part)	5	
5 Pa Provi	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	es 1b and 2b; Part V, line 4; Part)	5	
5 Pa Provi	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	es 1b and 2b; Part V, line 4; Part)	5	
Provi 2; Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	es 1b and 2b; Part V, line 4; Part 2 additional information.	X, line	
Provi 2; Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	es 1b and 2b; Part V, line 4; Part 2 additional information.	X, line	
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5 Pe Provi 2; Pe	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	es 1b and 2b; Part V, line 4; Part 2 additional information.	X, line	
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Schedule D (Fo	rm 990) 2019	IDAHO	FREEDOM	FOUNDATION,	INC	26-3783048	Page 5
Part XIII	Supplement	al Inform	nation (continu	ued)			

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
2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

U Attach to Form 990 or 990-EZ.
U Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

IDAHO FREEDOM FOUNDATION, INC 26-3783048 FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS TO DEVELOP AND ADVOCATE THE PRINCIPLES OF INDIVIDUAL LIBERTY, PERSONAL RESPONSIBILITY, PRIVATE PROPERTY RIGHTS, ECONOMIC FREEDOM, AND LIMITED, TRANSPARENT GOVERNMENT FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE PRIOR TO FILING. COPY OF THE FORM 990 IS PROVIDED TO ALL BOARD MEMBERS BEFORE IT HAS BEEN FILED. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY ALL BOARD MEMBERS AND KEY EMPLOYEES ANNUALLY DISCLOSE ANY POSSIBLE CONFLICTS OF INTEREST DURING THE FIRST BOARD MEETING HELD EACH YEAR. NONE WERE NOTED. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC.