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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning JUL 1, 2007 and ending JUN 30, 2008

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization
Jorge Mas Canosa Freedom Foundation

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1312 SW 27th Avenue

City or town, state or country, and ZIP + 4
Miami, FL 33145

D Employer identification number
59-2122621

E Telephone number
305-406-1845

F Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶ N/A

H(c) Are all affiliates included? N/A ☐ Yes ☐ No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

G Website: ▶N/A

J Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number ▶ N/A

M Check ▶ ☒ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 924,609.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Contributions to donor advised funds	1a		
	b	Direct public support (not included on line 1a)	1b		
	c	Indirect public support (not included on line 1a)	1c		
	d	Government contributions (grants) (not included on line 1a)	1d		
	e	**Total** (add lines 1a through 1d) (cash $ ____ noncash $ ____)		1e	0.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	
	3	Membership dues and assessments		3	
	4	Interest on savings and temporary cash investments		4	88,409.
	5	Dividends and interest from securities		5	
	6 a	Gross rents	6a		
	b	Less: rental expenses	6b		
	c	Net rental income or (loss). Subtract line 6b from line 6a		6c	
	7	Other investment income ▶		7	
	8 a	Gross amount from sales of assets other than inventory	(A) Securities 557,341. 8a	(B) Other	
	b	Less: cost or other basis and sales expenses	501,557. 8b		
	c	Gain or (loss) (attach schedule)	55,784. 8c		
	d	Net gain or (loss). Combine line 8c, columns (A) and (B) Stmt 1		8d	55,784.
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ ☐			
	a	Gross revenue (not including $ 0. of contributions reported on line 1b)	9a	278,659.	
	b	Less: direct expenses other than fundraising expenses	9b	159,502.	
	c	Net income or (loss) from special events. Subtract line 9b from line 9a See Statement 2		9c	119,157.
	10 a	Gross sales of inventory, less returns and allowances	10a		
	b	Less: cost of goods sold	10b		
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a		10c	
	11	Other revenue (from Part VII, line 103)		11	200.
	12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11		12	263,550.
Expenses	13	Program services (from line 44, column (B))		13	135,684.
	14	Management and general (from line 44, column (C))		14	5,326.
	15	Fundraising (from line 44, column (D))		15	3,551.
	16	Payments to affiliates (attach schedule) See Statement 3		16	349,397.
	17	**Total expenses.** Add lines 16 and 44, column (A)		17	493,958.
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12		18	<230,408.>
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	6,096,528.
	20	Other changes in net assets or fund balances (attach explanation) See Statement 4		20	<986,341.>
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20		21	4,879,779.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash $ 0. noncash $ 0.) If this amount includes foreign grants, check here ▶ ☐	22a				
22b Other grants and allocations (attach schedule) (cash $ 116,861. noncash $ 0.) If this amount includes foreign grants, check here ▶ ☐	22b	116,861.	116,861.	Statement 5	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	0.	0.	0.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26				
27 Pension plan contributions not included on lines 25a, b, and c	27				
28 Employee benefits not included on lines 25a - 27	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	311.	156.	93.	62.
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36				
37 Equipment rental and maintenance	37	130.	65.	39.	26.
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42				
43 Other expenses not covered above (itemize):					
a PROFESSIONAL FEES	43a	2,192.	1,096.	658.	438.
b STORAGE FEES	43b	3,264.	1,632.	979.	653.
c BANK SERVICE CHARGES	43c	11,604.	5,802.	3,481.	2,321.
d PRINTING AND	43d				
e REPRODUCTION	43e	253.	126.	76.	51.
f VOTERS GUIDE	43f	9,946.	9,946.		
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	144,561.	135,684.	5,326.	3,551.

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $ N/A ; (ii) the amount allocated to Program services $ N/A ;

(iii) the amount allocated to Management and general $ N/A ; and (iv) the amount allocated to Fundraising $ N/A

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

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

What is the organization's primary exempt purpose? ▶ See Statement 6

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a LA VOZ DE LA FUNDACION, MAS FAMILY SCHOLARSHIPS, PROYECTO DERECHOS HUMANOS

(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐ 135,684.

b

(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐

c

(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐

d

(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐

e Other program services (attach schedule)

(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶ 135,684.

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723021
12-27-07

Part IV Balance Sheets *(See the instructions.)*

	Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing			940.	45	940.
	46 Savings and temporary cash investments			1,723,681.	46	1,341,138.
	47 a Accounts receivable	47a				
	b Less: allowance for doubtful accounts	47b			47c	
	48 a Pledges receivable	48a				
	b Less: allowance for doubtful accounts	48b			48c	
	49 Grants receivable				49	
	50 a Receivables from current and former officers, directors, trustees, and key employees				50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				50b	
	51 a Other notes and loans receivable	51a				
	b Less: allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges				53	
	54 a Investments - publicly-traded securities Stmt 9 ▶ ☐ Cost ☒ FMV			4,094,196.	54a	3,259,990.
	b Investments - other securities ▶ ☐ Cost ☐ FMV				54b	
	55 a Investments - land, buildings, and equipment: basis	55a				
	b Less: accumulated depreciation	55b			55c	
	56 Investments - other				56	
	57 a Land, buildings, and equipment: basis	57a	195,665.			
	b Less: accumulated depreciation Stmt 7	57b	195,665.		57c	
	58 Other assets, including program-related investments (describe ▶ See Statement 8)			338,380.	58	323,230.
	59 **Total assets** (must equal line 74). Add lines 45 through 58			6,157,197.	59	4,925,298.
Liabilities	60 Accounts payable and accrued expenses				60	
	61 Grants payable				61	
	62 Deferred revenue				62	
	63 Loans from officers, directors, trustees, and key employees				63	
	64 a Tax-exempt bond liabilities				64a	
	b Mortgages and other notes payable			58,059.	64b	42,909.
	65 Other liabilities (describe ▶ Due to Freedom Tower)			2,610.	65	2,610.
	66 **Total liabilities.** Add lines 60 through 65			60,669.	66	45,519.
Net Assets or Fund Balances	**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted			5,752,151.	67	4,535,402.
	68 Temporarily restricted			<155,623.>	68	<155,623.>
	69 Permanently restricted			500,000.	69	500,000.
	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
	73 **Total net assets or fund balances.** Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)			6,096,528.	73	4,879,779.
	74 **Total liabilities and net assets/fund balances.** Add lines 66 and 73			6,157,197.	74	4,925,298.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	**Total revenue** (Part I, line 12). Add lines c and d	▶	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	**Total expenses** (Part I, line 17). Add lines c and d	▶	e	

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Irma Mas 1312 SW 27th Avenue Miami, FL 33145	Exec. President 0.00	0.	0.	0.
Juan C. Mas 1312 SW 27th Avenue Miami, FL 33145	Exec. Treasurer 0.00	0.	0.	0.
Jose R. Mas 1312 SW 27th Avenue Miami, FL 33145	Exec. Secretary 0.00	0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 3			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) See Statement 10	75b	X	
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."	75c		X
	If "Yes," attach a statement that includes the information described in the instructions.			
d	Does the organization have a written conflict of interest policy?	75d		X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
None				

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b	If "Yes," enter the name of the organization ▶ CUBAN AMERICAN FOUNDATION and check whether it is [X] exempt or [ ] nonexempt			
81 a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0.			
b	Did the organization file **Form 1120-POL** for this year?	81b		X

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Part VI Other Information *(continued)*

				Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?		83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	84b		
85 a	*501(c)(4), (5), or (6)* Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.				
c	Dues, assessments, and similar amounts from members	85c N/A			
d	Section 162(e) lobbying and political expenditures	85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	85h		
86	*501(c)(7) organizations.* Enter: a Initiation fees and capital contributions included on line 12	86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87	*501(c)(12) organizations.* Enter: a Gross income from members or shareholders	87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A			
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶		88b		X
89 a	*501(c)(3) organizations* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.				
b	*501(c)(3) and 501(c)(4) organizations* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.				
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0.				
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		89e		X
f	*All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?		89f		X
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		89g		X
90 a	List the states with which a copy of this return is filed ▶ None				
b	Number of employees employed in the pay period that includes March 12, 2007	90b 0			
91 a	The books are in care of ▶ Rene J. Silva Telephone no. ▶ 305 592-7768 Located at ▶ 1312 SW 27th Avenue, Miami, FL ZIP + 4 ▶ 33145				
b	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)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.		91b		X

Part VI Other Information *(continued)*

		Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c	X
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041**- Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A		

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue.					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			07	88,409.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					55,784.
101 Net income or (loss) from special events					119,157.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a Other Income					200.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		88,409.	175,141.
105 **Total** (add line 104, columns (B), (D), and (E))				▶	263,550.

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
101	FUNDRAISING TO GAIN ADDITIONAL CONTRIBUTIONS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☒ No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	☐ Yes	☒ No

Note: *If "Yes" to* **(b)**, *file Form 8870* **and** *Form 4720 (see instructions).*

Part XI Information Regarding Transfers To and From Controlled Entities. *Complete only if the organization is a controlling organization as defined in section 512(b)(13).* N/A

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here

▶ Signature of officer — Date 3/15/10

▶ Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Carlos Perez-Abreu — Date 3/8/10 — Check if self-employed ▶ ☐ — Preparer's SSN or PTIN (See Gen Inst X) P00226836

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Perez-Abreu Aguerrebere Sueiro Torres PL
2121 Ponce de Leon Blvd., Suite 650
Coral Gables, Florida 33134

EIN ▶ 65-0942623

Phone no. ▶ 305-567-0150

Form **990** (2007)

723164/12-27-07

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

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

OMB No 1545-0047

2007

Name of the organization: Jorge Mas Canosa Freedom Foundation

Employer identification number: 59 2122621

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ▶	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over $50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over $50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ _____ $ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) See Statement 11	3a	X	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966? N/A	4b		
c	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year ▶		N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year ▶		0.	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☒ An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
  ☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	(d) No	(e) Amount of support
Total ▶					

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting*

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	897,917.	0.	1,250.	32,056.	931,223.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	416,216.	330,340.	314,773.	361,485.	1,422,814.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	119,641.	95,026.	9,565.	9,556.	233,788.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	9,524.		See Statement 12		9,524.
23 Total of lines 15 through 22	1,443,298.	425,366.	325,588.	403,097.	2,597,349.
24 Line 23 minus line 17	1,027,082.	95,026.	10,815.	41,612.	1,174,535.
25 Enter 1% of line 23	14,433.	4,254.	3,256.	4,031.	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶	26a	N/A	
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶	26b	N/A	
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶	26c	N/A	
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____ ▶	26d	N/A	
e Public support (line 26c minus line 26d total) ▶	26e	N/A	
f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶	26f	N/A	%

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:
(2006) 0. (2005) 0. (2004) 0. (2003) 0.

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:
(2006) 0. (2005) 0. (2004) 0. (2003) 0.

c Add. Amounts from column (e) for lines: 15 931,223. 16 _____ 17 1,422,814. 20 _____ 21 _____ ▶	27c	2,354,037.	
d Add: Line 27a total 0. and line 27b total 0. ▶	27d	0.	
e Public support (line 27c total minus line 27d total) ▶	27e	2,354,037.	
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f 2,597,349.			
g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶	27g	90.6323%	
h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶	27h	9.0010%	

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See page 9 of the instructions.) N/A

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

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.) N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ a ☐ if the organization belongs to an affiliated group. Check ▶ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
Not over $500,000 / 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 / $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 / $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 / $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 / $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

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

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 instructions for lines 45 through 50 on page 13 of the instructions.)

N/A

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B **Lobbying Activity by Nonelecting Public Charities**

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

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of:		
	(i) Cash	51a(i) X	
	(ii) Other assets	a(ii)	X
b	Other transactions:		
	(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)	X
	(ii) Purchases of assets from a noncharitable exempt organization	b(ii)	X
	(iii) Rental of facilities, equipment, or other assets	b(iii)	X
	(iv) Reimbursement arrangements	b(iv)	X
	(v) Loans or loan guarantees	b(v)	X
	(vi) Performance of services or membership or fundraising solicitations	b(vi)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c	X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
51A	334,247.	CUBAN AMERICAN FOUNDATION	

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ [X] Yes [ ] No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
CUBAN AMERICAN FOUNDATION	501(C)(4)	See Statement 13

Form 990 Page 2 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	Office equipment	06 30 98	200DB	5.00	17	94,954.			94,954.	94,954.		0.
2	office equipment	05 03 99	200DB	5.00	17	10,363.			10,363.	10,363.		0.
3	gateway computer	07 01 98	200DB	5.00	17	4,770.			4,770.	4,770.		0.
4	copier	08 14 98	200DB	5.00	17	753.			753.	753.		0.
5	computer	05 11 01	200DB	5.00	17	1,823.			1,823.	1,823.		0.
6	furniture	06 30 98	200DB	7.00	17	65,905.			65,905.	65,905.		0.
7	vehicle	06 30 98	200DB	5.00	17	4,550.			4,550.	4,550.		0.
8	vehicle	01 11 99	200DB	5.00	17	12,547.			12,547.	12,547.		0.
	* Total 990 Page 2 Depr					195,665.		0.	195,665.	195,665.	0.	0.

728102
04-27-07

(D) - Asset disposed

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

Form 990 Gain (Loss) From Publicly Traded Securities Statement 1

Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
Various - Statement A	557,341.	501,557.	0.	55,784.
To Form 990, Part I, line 8	557,341.	501,557.	0.	55,784.

Form 990 Special Events and Activities Statement 2

Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income or (Loss)
JMC GOLF TOURNAMENT	278,659.		278,659.	159,502.	119,157.
To Fm 990, Part I, line 9	278,659.		278,659.	159,502.	119,157.

Form 990 Payments to Affiliates Statement 3

Affiliate's Name	Affiliate's Address
Cuban American National Foundation	Same

Purpose of Payment	Amount
GRANT TO ASSIST IN PROMOTING AWARENESS OF CUBAN ISSUES AND HUMAN RIGHTS	349,397.
Total to Form 990, Part I, line 16	349,397.

Form 990 Other Changes in Net Assets or Fund Balances Statement 4

Description	Amount
UNREALIZED GAIN ON INVESTMENT SECURITIES	<987,014.>
OTHER	673.
Total to Form 990, Part I, line 20	<986,341.>

Form 990 Cash Grants and Allocations to Others Statement 5

Class of Activity/Donee's Name and Address	Amount
MAS FAMILY SCHOLARSHIPS	116,861.
Total Included on Form 990, Part II, line 22b	116,861.

Form 990 Statement of Organization's Primary Exempt Purpose Part III Statement 6

Explanation

TO GATHER AND DISSEMINATE INFORMATION CONCERNING THE ECONOMIC, POLITICAL AND SOCIAL ISSUES OF THE CUBAN PEOPLE.

Form 990 Depreciation of Assets Not Held for Investment Statement 7

Description	Cost or Other Basis	Accumulated Depreciation	Book Value
Office equipment	94,954.	94,954.	0.
office equipment	10,363.	10,363.	0.
gateway computer	4,770.	4,770.	0.
copier	753.	753.	0.
computer	1,823.	1,823.	0.
furniture	65,905.	65,905.	0.
vehicle	4,550.	4,550.	0.
vehicle	12,547.	12,547.	0.
Total to Form 990, Part IV, ln 57	195,665.	195,665.	0.

Form 990 Other Assets Statement 8

Description	Beginning of Year	End of Year
EXCHANGE	1,169.	1,169.
LOAN COSTS	47,736.	47,736.
DUE FROM CANF	289,475.	274,325.
Total to Form 990, Part IV, line 58	338,380.	323,230.

Form 990 Non-Government Securities Statement 9

Security Description	Cost/FMV	Corporate Stocks	Corporate Bonds	Other Publicly Traded Securities	Total Non-Gov't Securities
EQUITY SECURITIES	FMV	3,259,990.			3,259,990.
To Form 990, line 54a, Col B		3,259,990.			3,259,990.

Form 990 Explanation of Relationship Part V-A, Line 75b Statement 10

Individual's Name	Title or Role
Irma Mas	Exec. President
Individual's Name	Title or Role
Juan C. Mas	Exec. Treasurer

Explanation of Relationship

Mother/Son

Individual's Name	Title or Role
Irma Mas	Exec. President
Individual's Name	Title or Role
Jose R. Mas	Exec. Secretary

Explanation of Relationship

Mother/Son

Individual's Name	Title or Role
Juan C. Mas	Exec. Treasurer
Jose R. Mas	Exec. Secretary

Explanation of Relationship

Brothers

Schedule A Explanation of Qualifications to Receive Payments Statement 11
Part III, Line 3a

GRADUATE AND UNDEGRADUATE SCHOLARSHIPS ARE AVAILABLE IN VARIOUS FIELDS INCLUDING BUT NOT LIMITED TO ENGINEERING, BUSINESS AND ECONOMICS. AWARDS ARE BASED ON THE RECIPIENTS' ACADEMIC PERFORMANCE, LEADERSHIP QUALITIES, POTENTIAL TO CONTRIBUTE TO THE ADVANCEMENT OF A FREE SOCIETY, AND LIKELIHOOD OF SUCCEEDING IN ONE'S CHOSEN FIELD. ANY FINANCIALLY NEEDY, TOP OF THEIR CLASS, CUBAN-AMERICAN STUDENT WHO IS A DIRECT DESCENDANT OF THOSE WHO LEFT CUBA OR WAS BORN IN CUBA MAY APPLY.

Schedule A Other Income Statement 12

Description	2006 Amount	2005 Amount	2004 Amount	2003 Amount
OTHER INCOME	9,524.	0.	0.	0.
Total to Schedule A, line 22	9,524.	0.	0.	0.

Schedule A Affiliation with Tax-Exempt Organizations Statement 13
Part VII, Line 52, Column (c)

Name of Affiliated or Related Organization

CUBAN AMERICAN FOUNDATION

Description of Relationship with Affiliated or Related Organization

COMMON DIRECTORS

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss							
031162100 / AMGEN INC							
50 00	3/17/2006	7/31/2007	$2,701 85	$3,670 75	$0 00	$3,670 75	($968 90)
25 00	7/7/2006	7/31/2007	$1,350 93	$1,667 91	$0 00	$1,667 91	($316 98)
25 00	5/22/2006	7/31/2007	$1,350 93	$1,703 12	$0 00	$1,703 12	($352 19)
35 00	8/13/2004	7/31/2007	$1,891 29	$1,899 10	$0 00	$1,899 10	($7 81)
15 00	10/1/2004	7/31/2007	$810 56	$863 09	$0 00	$863 09	($52 53)
90 00	8/13/2004	8/1/2007	$4,617 69	$4,883 40	$0 00	$4,883 40	($265 71)
Total			**$12,723.25**	**$14,687.37**	**$0.00**	**$14,687.37**	**($1,964.12)**
035229103 / ANHEUSER BUSCH COS.							
25 00	9/26/2006	5/28/2008	$1,384 07	$1,192 48	$0 00	$1,192 48	$191 59
25 00	9/21/2006	5/28/2008	$1,384 06	$1,192 95	$0 00	$1,192 95	$191 11
25 00	9/25/2006	5/28/2008	$1,384 06	$1,188 66	$0 00	$1,188 66	$195 40
75 00	9/7/2006	6/12/2008	$4,601 64	$3,554 62	$0 00	$3,554 62	$1,047 02
Total			**$8,753.83**	**$7,128.71**	**$0.00**	**$7,128.71**	**$1,625.12**
219350105 / CORNING INC							
100 00	9/28/2006	4/9/2008	$2,542 37	$2,454 46	$0 00	$2,454 46	$87 91
50 00	9/27/2006	4/9/2008	$1,271 18	$1,219 60	$0 00	$1,219 60	$51 58
100 00	9/27/2006	4/10/2008	$2,543 27	$2,439 20	$0 00	$2,439 20	$104 07
Total			**$6,356.82**	**$6,113.26**	**$0.00**	**$6,113.26**	**$243.56**
26875P101 / EOG RES INC							
50 00	9/21/2006	10/19/2007	$4,016 94	$3,135 79	$0 00	$3,135 79	$881 15
25 00	9/27/2006	10/19/2007	$2,008 47	$1,608 67	$0 00	$1,608 67	$399 80
25 00	9/25/2006	2/12/2008	$2,455 60	$1,550 24	$0 00	$1,550 24	$905 36
25 00	9/22/2006	2/12/2008	$2,455 59	$1,546 87	$0 00	$1,546 87	$908 72
50 00	9/20/2006	3/5/2008	$6,007 39	$3,054 43	$0 00	$3,054 43	$2,952 96

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss							
26875P101 / EOG RES INC							
50 00	9/20/2006	3/20/2008	$5,566 52	$3,054 42	$0 00	$3,054 42	$2,512 10
Total			**$22,510.51**	**$13,950.42**	**$0.00**	**$13,950.42**	**$8,560.09**
30231G102 / EXXON MOBIL CORP							
25 00	8/13/2004	7/5/2007	$2,122 86	$1,125 25	$0 00	$1,125 25	$997 61
50 00	3/17/2006	7/5/2007	$4,245 73	$3,070 25	$0 00	$3,070 25	$1,175 48
50 00	8/13/2004	7/26/2007	$4,419 09	$2,250 50	$0 00	$2,250 50	$2,168 59
75 00	8/13/2004	3/7/2008	$6,188 38	$3,375 75	$0 00	$3,375 75	$2,812 63
Total			**$16,976.06**	**$9,821.75**	**$0.00**	**$9,821.75**	**$7,154.31**
3133XGLE2 / FEDERAL HOME LOAN BANK 5.125% 09/10/2010							
20,000 00	10/3/2006	2/13/2008	$21,109 60	$20,166 80	$0 00	$20,166 80	$942 80
38141G104 / GOLDMAN SACHS GROUP							
45 00	8/13/2004	7/26/2007	$8,759 42	$3,779 10	$0 00	$3,779 10	$4,980 32
428236103 / HEWLETT-PACKARD CO							
125 00	12/11/2006	1/24/2008	$5,467 17	$5,007 94	$0 00	$5,007 94	$459 23
200 00	10/4/2006	1/24/2008	$8,747 46	$7,561 56	$0 00	$7,561 56	$1,185 90
25 00	10/5/2006	1/24/2008	$1,093 44	$941 46	$0 00	$941 46	$151 98
Total			**$15,308.07**	**$13,510.96**	**$0.00**	**$13,510.96**	**$1,797.11**
443683107 / HUDSON CITY BANCORP INC							
100 00	1/3/2007	4/3/2008	$1,857 34	$1,400 57	$0 00	$1,400 57	$456 77
100 00	1/8/2007	4/3/2008	$1,857 34	$1,401 00	$0 00	$1,401 00	$456 34
50 00	1/5/2007	4/3/2008	$928 67	$699 15	$0 00	$699 15	$229 52
100 00	1/4/2007	4/4/2008	$1,854 47	$1,398 00	$0 00	$1,398 00	$456 47
50 00	1/5/2007	4/4/2008	$927 23	$699 14	$0 00	$699 14	$228 09

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss							
443683107 / HUDSON CITY BANCORP INC							
50 00	10/24/2006	4/7/2008	$911 42	$686 83	$0 00	$686 83	$224 59
Total			**$8,336.47**	**$6,284.69**	**$0.00**	**$6,284.69**	**$2,051.78**
458140100 / INTEL CORP							
40 00	8/13/2004	11/16/2007	$1,016 20	$857 20	$0 00	$857 20	$159 00
100 00	10/1/2004	11/16/2007	$2,540 50	$2,068 90	$0 00	$2,068 90	$471 60
50 00	3/17/2006	11/16/2007	$1,270 25	$984 25	$0 00	$984 25	$286 00
10 00	9/21/2006	11/16/2007	$254 05	$194 73	$0 00	$194 73	$59 32
350 00	9/20/2006	11/16/2007	$8,891 76	$6,846 00	$0 00	$6,846 00	$2,045 76
90 00	9/21/2006	11/19/2007	$2,269 56	$1,752 58	$0 00	$1,752 58	$516 98
Total			**$16,242.32**	**$12,703.66**	**$0.00**	**$12,703.66**	**$3,538.66**
55616P104 / MACY'S INC							
100 00	1/27/2006	8/17/2007	$3,071 52	$3,392 25	$0 00	$3,392 25	($320 73)
25 00	1/27/2006	8/20/2007	$773 66	$848 06	$0 00	$848 06	($74 40)
50 00	11/4/2005	8/20/2007	$1,547 31	$1,597 75	$0 00	$1,597 75	($50 44)
Total			**$5,392.49**	**$5,838.06**	**$0.00**	**$5,838.06**	**($445.57)**
580135101 / MCDONALD'S CORP							
50 00	3/17/2006	7/26/2007	$2,497 55	$1,757 75	$0 00	$1,757 75	$739 80
50.00	8/13/2004	7/26/2007	$2,497 54	$1,295 00	$0 00	$1,295 00	$1,202 54
75 00	9/21/2006	1/15/2008	$4,039 20	$2,869 59	$0 00	$2,869 59	$1,169 61
25 00	8/13/2004	1/15/2008	$1,346 40	$647 50	$0 00	$647 50	$698 90
125 00	8/13/2004	1/24/2008	$6,718 75	$3,237 50	$0 00	$3,237 50	$3,481 25
Total			**$17,099.44**	**$9,807.34**	**$0.00**	**$9,807.34**	**$7,292.10**
61166W101 / MONSANTO CO NEW COM							
50 00	8/13/2004	9/17/2007	$3,772 62	$886 50	$0 00	$886 50	$2,886 12

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss							
61166W101 / MONSANTO CO NEW COM							
50 00	3/17/2006	9/17/2007	$3,772 63	$2,121 62	$0 00	$2,121 62	$1,651 01
50 00	8/13/2004	1/17/2008	$4,998 24	$886 50	$0 00	$886 50	$4,111 74
Total			**$12,543.49**	**$3,894.62**	**$0.00**	**$3,894.62**	**$8,648.87**
620076109 / MOTOROLA INC							
100 00	3/17/2006	2/1/2008	$1,253 80	$2,246 50	$0 00	$2,246 50	($992 70)
130 00	8/13/2004	2/1/2008	$1,629 93	$1,663 81	$0 00	$1,663 81	($33 88)
95 00	10/1/2004	2/1/2008	$1,191 11	$1,594 22	$0 00	$1,594 22	($403 11)
25 00	7/19/2005	2/1/2008	$313 45	$497 25	$0 00	$497 25	($183 80)
90 00	8/13/2004	2/4/2008	$1,102 58	$1,151 86	$0 00	$1,151 86	($49 28)
10 00	8/13/2004	2/4/2008	$122 51	$127 98	$0 00	$127 98	($5 47)
120 00	8/13/2004	2/6/2008	$1,376 96	$1,535 82	$0 00	$1,535 82	($158 86)
Total			**$6,990.34**	**$8,817.44**	**$0.00**	**$8,817.44**	**($1,827.10)**
717081103 / PFIZER INC							
25 00	6/1/2007	6/5/2008	$462 85	$690 87	$0 00	$690 87	($228 02)
100 00	5/31/2007	6/5/2008	$1,851 42	$2,755 51	$0 00	$2,755 51	($904 09)
125 00	5/30/2007	6/6/2008	$2,287 45	$3,432 74	$0 00	$3,432 74	($1,145 29)
100 00	5/31/2007	6/6/2008	$1,829 96	$2,755 51	$0 00	$2,755 51	($925 55)
Total			**$6,431.68**	**$9,634.63**	**$0.00**	**$9,634.63**	**($3,202.95)**
74251V102 / PRINCIPAL FINL GROUP INC							
25 00	5/26/2006	10/3/2007	$1,585 37	$1,355 23	$0 00	$1,355 23	$230 14
25 00	6/7/2006	10/3/2007	$1,585 36	$1,345 17	$0 00	$1,345 17	$240 19
25 00	6/6/2006	11/16/2007	$1,664 31	$1,343 65	$0 00	$1,343 65	$320 66
25 00	7/19/2005	11/16/2007	$1,664 31	$1,101 75	$0 00	$1,101 75	$562 56
25 00	3/17/2006	11/16/2007	$1,664 31	$1,259 12	$0 00	$1,259 12	$405 19

	Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss								
74251V102 / PRINCIPAL FINL GROUP INC								
	75 00	7/19/2005	12/3/2007	$4,814 12	$3,305 25	$0 00	$3,305 25	$1,508 87
Total				**$12,977.78**	**$9,710.17**	**$0.00**	**$9,710.17**	**$3,267.61**
744320102 / PRUDENTIAL FINANCIAL								
	50 00	3/17/2006	12/3/2007	$4,653 55	$3,819 25	$0 00	$3,819 25	$834 30
	25 00	9/22/2006	12/3/2007	$2,326 77	$1,876.73	$0 00	$1,876 73	$450 04
Total				**$6,980.32**	**$5,695.98**	**$0.00**	**$5,695.98**	**$1,284.34**
806605101 / SCHERING PLOUGH CORP								
	100 00	9/22/2005	12/18/2007	$2,684 62	$2,055 00	$0 00	$2,055 00	$629 62
	100 00	9/22/2005	1/15/2008	$2,398 21	$2,055 00	$0 00	$2,055 00	$343 21
	150 00	11/4/2005	1/15/2008	$3,597 32	$3,009 00	$0 00	$3,009 00	$588 32
	75 00	3/17/2006	1/16/2008	$1,782 43	$1,390 88	$0 00	$1,390 88	$391 55
	25 00	11/4/2005	1/16/2008	$594 15	$501 50	$0 00	$501 50	$92 65
	25 00	1/27/2006	1/16/2008	$594 15	$495 87	$0 00	$495 87	$98 28
	25 00	3/17/2006	1/17/2008	$551 22	$463 62	$0 00	$463 62	$87 60
Total				**$12,202.10**	**$9,970.87**	**$0.00**	**$9,970.87**	**$2,231.23**
808513105 / SCHWAB CHARLES CORP NEW								
	200 00	3/17/2006	9/19/2007	$4,319 83	$3,587 00	$0 00	$3,587 00	$732 83
	50 00	3/17/2006	9/20/2007	$1,060 12	$896 75	$0 00	$896 75	$163 37
	50 00	8/2/2006	9/20/2007	$1,060 12	$802 42	$0 00	$802 42	$257 70
	50 00	5/22/2006	9/21/2007	$1,050 92	$797 75	$0 00	$797 75	$253 17
	25 00	7/31/2006	11/16/2007	$585 99	$397 23	$0 00	$397 23	$188 76
	50 00	8/1/2006	11/16/2007	$1,171 99	$796 01	$0 00	$796 01	$375 98
	25 00	5/22/2006	11/16/2007	$585 99	$398 87	$0 00	$398 87	$187 12
	25 00	7/31/2006	11/19/2007	$573 57	$397 22	$0 00	$397 22	$176 35

	Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss								
808513105 / SCHWAB CHARLES CORP NEW								
	50 00	7/31/2006	1/8/2008	$1,173 29	$794 45	$0 00	$794 45	$378 84
	75 00	6/16/2006	1/8/2008	$1,759 93	$1,164 75	$0 00	$1,164 75	$595 18
	125 00	6/16/2006	1/9/2008	$2,751 27	$1,941 25	$0 00	$1,941 25	$810 02
Total				**$16,093.02**	**$11,973.70**	**$0.00**	**$11,973.70**	**$4,119.32**
855030102 / STAPLES INC								
	50 00	9/22/2006	1/31/2008	$1,176 09	$1,224 27	$0 00	$1,224 27	($48 18)
	75 00	5/22/2006	1/31/2008	$1,764 13	$1,810 13	$0 00	$1,810 13	($46 00)
Total				**$2,940.22**	**$3,034.40**	**$0.00**	**$3,034.40**	**($94.18)**
913017109 / UNITED TECHNOLOGIES								
	50 00	3/17/2006	2/26/2008	$3,663 34	$2,949 75	$0 00	$2,949 75	$713 59
	25 00	6/16/2006	2/26/2008	$1,831 67	$1,542 88	$0 00	$1,542 88	$288 79
	25 00	12/23/2005	2/27/2008	$1,826 22	$1,436 92	$0 00	$1,436 92	$389 30
	25 00	11/11/2005	2/27/2008	$1,826 21	$1,332 75	$0 00	$1,332 75	$493 46
	25 00	7/19/2005	3/7/2008	$1,696 72	$1,293 25	$0 00	$1,293 25	$403 47
	50 00	8/13/2004	3/7/2008	$3,393 44	$2,267 50	$0 00	$2,267 50	$1,125 94
	60 00	5/5/2004	3/10/2008	$3,992 78	$2,577 30	$0 00	$2,577 30	$1,415 48
Total				**$18,230.38**	**$13,400.35**	**$0.00**	**$13,400.35**	**$4,830.03**
Total Long term gain loss				**$254,957.61**	**$199,924.28**	**$0.00**	**$199,924.28**	**$55,033.33**
Short term gain loss								
14149Y108 / CARDINAL HEALTH INC								
	25 00	5/1/2007	11/16/2007	$1,458 90	$1,748 75	$0 00	$1,748 75	($289 85)
	100 00	1/18/2007	11/16/2007	$5,835 59	$6,901 59	$0 00	$6,901 59	($1,066 00)
	50 00	1/17/2007	11/19/2007	$2,884 30	$3,431 19	$0 00	$3,431 19	($546 89)

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Short term gain loss							
14149Y108 / CARDINAL HEALTH INC							
25 00	1/12/2007	11/19/2007	$1,442 15	$1,668 54	$0 00	$1,668 54	($226 39)
50 00	10/9/2007	11/20/2007	$2,853 78	$3,286 74	$0 00	$3,286 74	($432 96)
Total			**$14,474.72**	**$17,036.81**	**$0.00**	**$17,036.81**	**($2,562.09)**
428236103 / HEWLETT-PACKARD CO							
25 00	3/28/2007	1/24/2008	$1,093 43	$997 75	$0 00	$997 75	$95 68
25 00	3/28/2007	1/25/2008	$1,101 30	$997 75	$0 00	$997 75	$103 55
Total			**$2,194.73**	**$1,995.50**	**$0.00**	**$1,995.50**	**$199.23**
580037109 / MCDERMOTT INTL INC							
25 00	7/5/2007	4/3/2008	$1,439 96	$1,099 87	$0 00	$1,099 87	$340 09
25 00	7/5/2007	4/4/2008	$1,453 27	$1,099 87	$0 00	$1,099 87	$353 40
25 00	6/11/2007	4/4/2008	$1,453 27	$969 53	$0 00	$969 53	$483 74
50 00	8/2/2007	4/4/2008	$2,906 53	$2,111 00	$0 00	$2,111 00	$795 53
Total			**$7,253.03**	**$5,280.27**	**$0.00**	**$5,280.27**	**$1,972.76**
620076109 / MOTOROLA INC							
200 00	4/25/2007	2/1/2008	$2,507 59	$3,618 82	$0 00	$3,618 82	($1,111 23)
717081103 / PFIZER INC							
150 00	11/6/2007	6/4/2008	$2,834 94	$3,590 99	$0 00	$3,590 99	($756 05)
150 00	6/26/2007	6/4/2008	$2,834 94	$3,850 84	$0 00	$3,850 84	($1,015 90)
50 00	11/7/2007	6/5/2008	$925 71	$1,180 91	$0 00	$1,180 91	($255 20)
50 00	11/6/2007	6/5/2008	$925 71	$1,196 99	$0 00	$1,196 99	($271 28)
Total			**$7,521.30**	**$9,819.73**	**$0.00**	**$9,819.73**	**($2,298.43)**
78462F103 / S&P 500 DEP RCPTS							
50 00	8/2/2007	3/17/2008	$6,367 23	$7,341 12	$0 00	$7,341 12	($973 89)

	Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Short term gain loss								
78462F103 / S&P 500 DEP RCPTS								
	25 00	8/3/2007	3/17/2008	$3,183 61	$3,654 49	$0 00	$3,654 49	($470 88)
Total				**$9,550.84**	**$10,995.61**	**$0.00**	**$10,995.61**	**($1,444.77)**
806605101 / SCHERING PLOUGH CORP								
	100 00	6/26/2007	12/18/2007	$2,684 62	$3,039 61	$0 00	$3,039 61	($354 99)
855030102 / STAPLES INC								
	100 00	9/20/2006	8/20/2007	$2,334 37	$2,500 00	$0 00	$2,500 00	($165 63)
	100 00	9/21/2006	8/20/2007	$2,334 36	$2,473 85	$0 00	$2,473 85	($139 49)
Total				**$4,668.73**	**$4,973.85**	**$0.00**	**$4,973.85**	**($305.12)**
912828EN6 / US TREASURY NOTES			**4.500% 11/15/2015**					
	215,000 00	3/15/2007	10/29/2007	$218,275 39	$214,613 67	$27 81	$214,641 48	$3,633 91

Trade date basis

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Short term gain loss							
912828FY1 / US TREASURY NOTES 4.625% 11/15/2016							
25,000 00	10/29/2007	3/12/2008	$27,252 93	$25,531 25	$0 00	$25,531 25	$1,721 68
Total Short term gain loss			**$296,383.88**	**$296,905.12**	**$27.81**	**$296,932.93**	**($549.05)**
Total sub-account			**$551,341.49**	**$496,829.40**	**$27.81**	**$496,857.21**	**$54,484.28**

Shares / par value	Date acquired	Date sold	Proceeds	Original cost basis	Adjustments	Adjusted cost basis	Gain/ loss
Long term gain loss							
680414604 / OLD WEST GL SM & MD CAP FD							
133 07	4/5/2005	10/25/2007	$2,000 00	$1,330 67	$0 00	$1,330 67	$669 33
680414208 / OLD WESTBURY MID CAP EQ FD							
45 02	8/13/2004	10/25/2007	$783 40	$612 76	$0 00	$612 76	$170 64
680414109 / OLD WESTBURY NON-US LC FD							
90 20	8/13/2004	10/25/2007	$1,315 05	$824 38	$0 00	$824 38	$490 67
Total Long term gain loss			**$4,098.45**	**$2,767.81**	**$0.00**	**$2,767.81**	**$1,330.64**
Short term gain loss							
680414208 / OLD WESTBURY MID CAP EQ FD							
69 92	6/19/2007	10/25/2007	$1,216 61	$1,237 58	$0 00	$1,237 58	($20 97)
680414109 / OLD WESTBURY NON-US LC FD							
46.98	6/18/2007	10/25/2007	$684 95	$694 35	$0 00	$694 35	($9 40)
Total Short term gain loss			**$1,901.56**	**$1,931.93**	**$0.00**	**$1,931.93**	**($30.37)**
Total sub-account			**$6,000.01**	**$4,699.74**	**$0.00**	**$4,699.74**	**$1,300.27**

Form 8688 Explanation for Extension Statement 7

Explanation

INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN IS NOT AVAILABLE AT THIS TIME. AN EXTENSION OF TIME TO FILE IS REQUESTED TO PRECLUDE THE FILING OF AN AMENDED RETURN.

Form **8868**
(Rev. April 2008)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization	**Employer identification number**
	Jorge Mas Canosa Freedom Foundation	59-2122621
	Number, street, and room or suite no. If a P.O box, see instructions. 1312 SW 27th Avenue	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Miami, FL 33145	

Check type of return to be filed(file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ Rene J. Silva
  Telephone No ▶ 305 592-7768 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until February 15, 2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year _____ or
▶ [X] tax year beginning JUL 1, 2007, and ending JUN 30, 2008.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$
c	**Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** You must file original and one copy.

Type or print	Name of Exempt Organization		Employer identification number
File by the extended due date for filing the return See instructions	Jorge Mas Canosa Freedom Foundation		59-2122621
	Number, street, and room or suite no. If a P.O. box, see instructions. 1312 SW 27th Avenue		For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions. Miami, FL 33145		

Check type of return to be filed (File a separate application for each return)

[X] Form 990 [ ] Form 990-EZ [ ] Form 990-T (sec. 401(a) or 408(a) trust) [ ] Form 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [ ] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ Rene J. Silva
  Telephone No. ▶ 305 592-7768 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ] If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until May 15, 2009.

5 For calendar year _____, or other tax year beginning JUL 1, 2007, and ending JUN 30, 2008.

6 If this tax year is for less than 12 months, check reason. [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
See Statement 7

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$	
c	**Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$	N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Title ▶ Date ▶