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DLN: 93493111006061

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

2009

2009

Open to Public Inspection

A Fo	r the :	2009 ca <u>l</u>	endar yea	r, or tax year beginning 07	7-01-2009	and ending 06-30	0-2010			
B Ch	eck ıf a	pplicable	Please	C Name of organization FREEDOM HOUSE					D Employer ide	entification number
☐ Add	iress ch	nange	use IRS label or	Doing Business As					13-165664 E Telephone nu	
∏ Naı	ne cha		print or type. See	Doing business As					•	
┌ Init	ial retu	rn	Specific	Number and street (or P O 1	box if mail is r	ot delivered to street	address)	Room/suite	(202) 296-	
Г Тег	mınate	d	Instruc- tions.	1301 Connecticut Ave NW Fk	oor 6				G Gross receipts	\$ 34,922,777
┌ Am	ended	return		City or town, state or country	y, and ZIP + 4	1				
	olication	pending		WASHINGTON, DC 20036						
		-	F Nan	ne and address of principa	lofficer			H(a) Ic thu	s a group retur	n for
			David k	Kramer			'	affilia		⊤Yes √ No
				Connecticut Ave NW Floor INGTON, DC 20036	6					
							'		affiliates includ	
I Ta	x-exem	npt status	▼ 501(c)) (3) ◄ (insert no)	'(a)(1) or	527			p exemption nu	(see instructions) imber ►
	ebsit e	•: ► WW\	N FREEDO	MHOUSE ORG				(0)		
							ı			
	n of org rt I			tion Trust Association	Other 🟲			L Year of for	mation 1941	State of legal domicile NY
Ра		Sumn Briefly de		e organization's mission o	r most sian	ificant activities				
	-	•		effective advocacy, and p	_		frontline	activists, F	reedom House	supports the spread of
				cracy throughout the world				•	-	
ą.				reports, including Freedom nders in over 40 countries						
Governance				to adopt and implement p						
Ě										
8										
	2	Check th	nis box ⊫F		ntinued its	operations or disp	osed of	more than 2	25% of its net a	assets
న క్ట్ర	3		•	members of the governing					3	
Activities	4			ndent voting members of th						37
ਓ	5			nployees (Part V, line 2a)	_		1110 107			
∢.									6	50
	6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, col						12 .	_	7:	
				iness taxable income from				71		
								Prio	r Year	Current Year
	8	8 Contributions and grants (Part VIII, line 1h)							24,537,640	33,501,344
를	9	Progran	n service	revenue (Part VIII, line 2)	g)		[0
Rayente	10	Investr	ment incor	me (Part VIII, column (A),	, lines 3, 4,	and 7d)	[132,901	-3,780
č	11	Otherr	evenue (P	art VIII, column (A), lines	5,6d,8c,	9c, 10c, and 11e)		23,571	14,406
	12			dd lines 8 through 11 (mus						
									24,694,112	33,511,970
	13			ar amounts paid (Part IX, o			F		7,278,542	15,700,081
	14			or for members (Part IX, co						0
8	15	Salarie:	s, other co	ompensation, employee be	nefits (Part	ines 5-		8,382,165	9,671,088	
Expenses	16a	·							50,135	0
춫	ь			enses (Part IX, column (D), line	Ī		,			
Ш	17			(Part IX, column (A), lines			<u> </u>		8,816,818	7,605,439
	18		-	Add lines 13–17 (must eq		•	-		24,527,660	32,976,608
	19			penses Subtract line 18 fr			·		166,452	535,362
				= 5				Beginning	of Current	·
<u>β</u> 68 −									ear	End of Year
35.4g	20			rt X, line 16)					7,526,066	9,284,227
Net Assets or Fund Balances	21	Total li	abılıtıes (F	Part X, line 26)			.		2,334,945	3,437,275
	22	Netass	ets or fun	d balances Subtract line :	21 from line	20			5,191,121	5,846,952
Pai	rt II	Signa	ature Blo	ock						
				erjury, I declare that I have exar correct, and complete Declaration						
			.,		I. propulci	(and officer)			prepar	
Sign		****						2011-0	04-21	
Here	e	Signat	ture of office	<u></u>				Date		
			Huy Nguyer							
		Туре	or print nam	ne and title			,			
		Preparer's			1	Date	Che-		Preparer's identi	
Paid		signature	•					olyed • 🖵	(see instructions	2)
•	arer's		me (or yours	s RSM McGLADREY INC			1		FIN L	
Use (Only	ıf self-em address, a	ployed), and ZIP + 4	8000 TOWERS CRESCENT	DR STE 500				EIN Þ	
		[VIENNA, VA 221826205					Phone no 🕨 (7	703) 336-6400

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Freedom House, an independent nongovernmental organization, supports the expansion of freedom in the world. Freedom is possible only in democratic political systems in which the governments are accountable to their own people, the rule of law prevails, and freedoms of expression, association, and belief, as well as respect for the rights of minorities and women, are guaranteed Freedom ultimately depends on the actions of committed and courageous men and women. We support nonviolent civic initiatives in societies where freedom is denied or under threat and we stand in opposition to ideas and forces that challenge the right of all people to be free. Freedom House functions as a catalyst for freedom, democracy and the rule of law through its analysis, advocacy and action

						Form 990 (2009)
4e	Total program servi	ce expenses►\$	32,764,541			
	(Expenses \$	16,544,798 ind	cluding grants of \$	3,953,1	.20) (Revenue \$)
	Other program serv	ıces (Describe in Sch	nedule O) See also	Additional Data fo	r Description	
		ts in CubaThis program is on second as well as conduct research			y and human rights defenders to deve	lop grassroots movements
4c	(Code) (Expenses \$, ,	uding grants of \$	176,030) (Revenue \$)
	RIGHTS Consortium incl National Democratic Ins program may be expan	udes Freedom House (as t titute for International Affa ded through additional fund	he grant recipient), in p irs (NDI) Additional ass ling awards, called asso	artnership with the Ame ociate partners are inclu ciate awards, by USAII	nties in the field of rule of law and hun erican Bar Association Rule of Law Initi uded in the RIGHTS Consortium on a p O missions and regional bureaus Progional networking, and multi-year field-	ative (ABA ROLI) and the project-by-project basis. The ram activities include
4b	(Code) (Expenses \$, ,	uding grants of \$	4,213,479) (Revenue \$)
		ts and Rule of Law in Zimb unions to advocate and m			vil society organizations, including chu	rch groups, student
4a	(Code) (Expenses \$, ,	uding grants of \$	7,357,452) (Revenue \$)
4	Section 501(c)(3) ar		tions and section 4	947(a)(1) trusts ar	argest program services by ex re required to report the amoun ervice reported	-
	If "Yes," describe the	ese changes on Sched	ule O			
3	Did the organization services?	cease conducting, or	make significant ch	anges in how it con		Yes 🔽 No
	If "Yes," describe the	ese new services on S	chedule O			
2	•	undertake any signific r 990-EZ?		es during the year	which were not listed on	Yes ▼ No

art TV	Check	dist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more 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 reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νο
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Part II</i>	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		N o
b	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 to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 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		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		N o
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Part I	31		N o
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		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		N o
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	rm 990 (2009)				Page
Pai	Part V Statements Regarding Other IRS Filings and Tax Compliance				<u> </u>
4 -			_	Yes	No
1a	a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable				
	1a	192			
b	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0			
c	c Did the organization comply with backup withholding rules for reportable payments to vendors are gaming (gambling) winnings to prize winners?		Lc	Yes	
2a	· · · · · · · · · · · · · · · · · · ·				
	Statements filed for the calendar year ending with or within the year covered by this return	148			
Ь	b If at least one is reported on line 2a, did the organization file all required federal employment tax Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return instructions)		2b	Yes	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year c return?	· ·	Ba		No
Ь	b If "Yes," has it filed a Form 990-T for this year? <i>If</i> " <i>No," provide an explanation in Schedule O</i> .		ВЬ		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or cover, a financial account in a foreign country (such as a bank account, securities account, or oth account)?	her financial	la	Yes	
b	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of For	reign Bank and			
_	Financial Accounts		_		
5a h	 Was the organization a party to a prohibited tax shelter transaction at any time during the tax yes Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter t 	transaction?	ia 		No No
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entit	y Regarding	5 b -		110
6a	Prohibited Tax Shelter Transaction?	· · —	5c ia		No
Va	organization solicit any contributions that were not tax deductible?	·	,,		NO
b	b If "Yes," did the organization include with every solicitation an express statement that such con were not tax deductible?		iЬ		
7	, , , , , , , , , , , , , , , , , , , ,				
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly services provided to the payor?	y for goods and	'a		No
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?		′ b		
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which file Form 8282?	-	7c		No
d	d If "Yes," indicate the number of Forms 8282 filed during the year				
e	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums of benefit contract?	·	'e		No
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	contract? 7	7f		No
_	g For all contributions of qualified intellectual property, did the organization file Form 8899 as req		' g		
h	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 10 required?		_{'h}		
8		ave excess	8		
9		 '	-		
	a Did the organization make any taxable distributions under section 4966?	9	a		
ь	b Did the organization make a distribution to a donor, donor advisor, or related person?	9	ь		
10	9 Section 501(c)(7) organizations. Enter				
а	a Initiation fees and capital contributions included on Part VIII, line 12 10a				
b	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	1 Section 501(c)(12) organizations. Enter				
	a Gross income from members or shareholders				
b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				
12a	2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	form 1041? 1	2a		
b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Section A. Governing Body and Management
processes, or changes in Schedule O. See instructions.
below, and for a No response to lines 8a, 8b, or 10b below, describe the circumstances,

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 37			
ь	Enter the number of voting members that are independent 1b 37	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	2		No.
3	other officer, director, trustee, or key employee?	3		No
4	supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its organizational documents since the prior Form 990 was			
_	filed?	4		No
5 6	Did the organization become aware during the year of a material diversion of the organization's assets?	5 6		No No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Re	venue Code.)			ī
		4.0	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
11	affiliates, and branches to ensure their operations are consistent with those of the organization?			
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990	11	Yes	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, CA, CO, CT, DC, I ID, IL, IN, KS, KY, LA, MA, MD, ME MO, MT, NC, ND, NE, NJ, NH, NM, OR, PA, RI, SC, SD, TN, TX, UT, V WV, WY	NV,N	MS , M Y , O H	N , , O K ,
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	ınızatıoı	1)
	Quoc Nguyen 1301 CONNECTICUT AVE NW 6TH FLOOR washington, DC 20036			
	(202) 296-5101			

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

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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee			organizations (W- 2/1099-	compensation from the organization and related organizations
See add'l data										

1b	Total	0		178,413
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 11			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	165	No
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Comper	
_				
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶0			
		F	orm 99 0	(2009)

Page **8**

Form 990 (2009)

Form 9			f. D					Page 9
Part		Statement of	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam	paigns 1a	4,566				
	Ь	Membership du	ies 1b					
કું ∰	C	Fundraising ev	ents 1c	·				
<u>#</u> ,a <u>*</u>	d		zations 1d					
an Sim	e	Government grant						
E E	f	All other contribute similar amounts no	ons, gifts, grants, and 1f ot included above	2,090,335				
き	g	2	ibutions included in 9,833					
Son	h	· -	s 1a-1f	🕨	33,501,344			
				Business Code				
ne eur	2a							
æ	b							
Program Serwce Revenue	C							
Ser.	d							
E E	e							
چ	f	All other progra	am service revenue					
	g	Total. Add lines	s 2a-2f	▶				
	3		ome (including dividen		38,255			38,255
	4		ar amounts)		36,233			36,233
	5			proceeds .	5,612			5,612
		,	(ı) Real	(II) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	c	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	1,368,772					
	b	Less cost or other basis and	1,410,807					
	_c	sales expenses Gain or (loss)	-42,035					
	d	Net gain or (los	ss)		-42,035			-42,035
an	8a	events (not inc	rom fundraising luding					
Other Revenue			s reported on line 1c)					
ē	Ь	1000 4	a noncos h					
돌	"		penses b (loss) from fundraising					
_	9a	Gross income f	rom gaming activities					
	b		penses b					
	10a			vities				
	ь	_	a oods sold b					
	С		(loss) from sales of inv					
	11a	Miscellaneous	s kevenue	Business Code 900,099	8,794			8,794
	ь	other income			3,731			5,7.5
	ر ا							
	d	All other reven	ue					
	e		s 11a-11d		8,794			
		Tabel v	Coo Inchiustica	▶	8,794			
	12	rotar revenue.	See Instructions .	· · · [33,511,970	0	0	10,626

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
			(B), (C), and (B)	(D).	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	14,115,236	14,115,236						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	1,584,845	1,584,845						
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	554,655	431,903	115,024	7,728				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$								
7	Other salaries and wages	5,319,983	4,142,605	1,103,255	74,123				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	200,915	156,450	41,666	2,799				
9	Other employee benefits	3,026,872	2,356,989	627,710	42,173				
10	Payroll taxes	568,663	442,811	117,929	7,923				
11	Fees for services (non-employees)								
а	Management								
ь	Legal	47,677	22,502	25,175					
С	Accounting	53,460	25,232	28,228	_				
d	Lobbying								
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g g	Other	1,797,292	1,641,207	156,085					
12	Advertising and promotion	1,737,232	1,011,207	130,003					
13	Office expenses	279,699	194,364	75,298	10,037				
14	Information technology	359,042	277,774	80,459	809				
15	Royalties	339,042	2/7,//4	00,439					
16	Occupancy	1,258,810	232,149	1,026,661					
17	Travel	2,601,445	2,556,953	41,818	2,674				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,001,443	2,330,933	41,010	2,074				
19	Conferences, conventions, and meetings	292,544	284,791	7,692	61				
20	Interest	232,311	20 1,731	,,032					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	156,213		156,213					
23	Insurance	150,213		130,213					
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	other expenses	516,891	308,651	197,669	10,571				
ь	equipment & Main	214,657	136,907	76,177	1,573				
c	staff training	27,709	17,362	10,157	190				
d	indirect recovery	0	3,835,810	-3,877,411	41,601				
e	·		, , ,	· · · · · ·					
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	32,976,608	32,764,541	9,805	202,262				
26	Joint costs. Check here ► ☐ If following SOP 98-2	32,570,000	32,707,341	2,003	202,202				
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			161,838	1	74,910
	2	Savings and temporary cash investments	•		3,834,520	2	4,650,848
	3	Pledges and grants receivable, net			1,942,431	3	2,951,892
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key e	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II o		4958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			214,250	9	455,995
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	1,062,194			
	ь	Less accumulated depreciation	10b	600,897	497,233	10c	461,297
	11	Investments—publicly traded securities			736,848	11	528,355
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		•	138,946	15	160,930
	16	Total assets. Add lines 1 through 15 (must equal line 34)			7,526,066	16	9,284,227
	17	Accounts payable and accrued expenses .			1,787,797	17	1,554,510
	18	Grants payable				18	
	19	Deferred revenue			400,709	19	1,661,966
	20	Tax-exempt bond liabilities				20	
<u>ē</u>	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			146,439	25	220,799
	26	Total liabilities. Add lines 17 through 25			2,334,945	26	3,437,275
م		Organizations that follow SFAS 117, check here $\blacktriangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	lete lir	nes 27			
9		through 29, and lines 33 and 34.					
<u> </u>	27	Unrestricted net assets			2,062,588		2,212,127
Fund Balance	28	Temporarily restricted net assets			1,128,533		1,634,825
Ĕ	29	Permanently restricted net assets			2,000,000	29	2,000,000
丑		Organizations that do not follow SFAS 117, check here ► and	d comp	olet e			
ě	30	lines 30 through 34.				30	
Assets	30	Capital stock or trust principal, or current funds					
ر ارج	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	iius		5,191,121	32	5,846,952
Net	33	Total liabilities and not essets (find belonge				33	
l	34	Total liabilities and net assets/fund balances			7,526,066	34	9,284,227

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
C	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both Separate basis Consolidated basis Both consolidated and separated basis			
3a	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	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

FREEDOM HOUSE

Name of the organization

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

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection **Employer identification number**

									13-165664	47		
Pa	rt I	Reaso	n for Pu	blic Charity Stat	us (All org	anızatıons	must comp	plete this p	art.) See ins	structions		
he o	organiz	zation is	not a privat	e foundation because	ıtıs (Forlı	nes 1 throu	ıgh 11, check	only one bo	x)			
1	Γ	A churc	h, conventi	on of churches, or as:	sociation of	churches s	section 170(b)(1)(A)(i).				
2	Γ	A schoo	l described	ın section 170(b)(1)	(A)(ii). (Att	ach Sched	ule E)					
3	Γ	A hospi	tal or a coop	perative hospital serv	vice organiza	atıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).			
4	Γ			organization operate ty, and state	ed in conjunc	ction with a	hospital desc	cribed in sec	tion 170(b)(1	.)(A)(iii). Ent	erthe	
5	Γ	An orga	nızatıon ope	erated for the benefit	of a college	or universi	ty owned or o	perated by a	governmenta	al unit describ	— ed ın	
		section	170(b)(1)(A)(iv). (Complete Pa	rt II)							
6	Г	A federa	al, state, or	local government or	governmenta	al unit desc	rıbed ın secti	ion 170(b)(1)(A)(v).			
7		describe	ed in	it normally receives a A)(vi) (Complete Pa		l part of its	support from	a governme	ntal unit or fro	om the genera	l public	:
8	Г					(vi) (Cor	nplete Part II	[)				
9	·	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, members									nd aro	SS
	,			ities related to its ex								
		-		oss investment incom	•	_		-				
			_	anization after June 3				•		ax,		
10	\vdash	•		anized and operated	•			•	•			
11	<u>'</u>	•	_	janized and operated	•		•			carry out the	nurnos	sas of
e	Г	one or n the box a By chec	nore publici that descril Type I king this bo	y supported organiza bes the type of suppo b Type II ox, I certify that the o	tions descri orting organi: c organization	bed in sect zation and o Type III is not conti	ion 509(a)(1) complete line : - Functional rolled directly) or section ! s 11e throug ly integrated v or indirectl	509(a)(2) Se gh 11h i d y by one or mo	e section 509 Type II ore disqualifie	(a)(3). I - Oth d pers	Check her ons
f		section If the or check th	509(a)(2) ganızatıon ı nıs box	on managers and other	termination i	from the IR	S that it is a [.]	Туре I, Туре	e II or Type II			
g			ugust 17,2 jpersons?	006, has the organiz	ацоп ассер	ted any gnt	or contributi	on from any	or the			
				rectly or indirectly co	ntrols, eithe	r alone or t	ogether with	persons des	cribed in (ii)		Yes	No
		and (III)	below, the	governing body of the	the support	ed organiza	ation?			11g(i)		
				r of a person describ		_				11g(ii)		
		• •	•	led entity of a person	• •		ibove?			11g(iii		
h				, , ig information about t							1	
				· 9		· · 3 - · · · - · · ·	, ,					
	(i) Name suppor rganiza	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) lis your gove docume	e Ion In ted In Erning	Did you no organiza col (i) co	otify the ation in of your	(vi Is th organiza col (i) org in the U	re tion in ganized	A m	vii) ount of oport?
				instructions))	Yes	No	Yes	No	Yes	No]	
						1					+	

Support Schedule for Organizations Described in IRC 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.) Part II

	(Complete only if y	ou checkeu the	box on line 9,	7, 01 0 01 Talt 1	•••/			
	ection A. Public Support			T				
Cale	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09	(f) Total
1	ın) Gıfts, grants, contributions, and							
-	membership fees received (Do no	t 32.717.4	26 266 076	24 177 675	24 527 640	22.1	E01 224	122 200 004
	include any "unusual	23,717,46	26,266,878	24,177,675	24,537,640	33,:	501,334	132,200,994
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its							
	behalf							
3	The value of services or facilities							
	furnished by a governmental unit							
	to the organization without charge							
4	Total. Add lines 1 through 3	23,717,46	57 26,266,878	3 24,177,675	24,537,640	33.	501,334	132,200,994
5	The portion of total contributions						,	
3	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)							
6	Public Support. Subtract line 5							132,200,994
	from line 4							
	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
_	beginning in)	23,717,467	363,745	24,177,675	24,537,640	33.5	501,334	132,200,994
7	A mounts from line 4	23,717,407	303,743	24,177,073	24,337,040	33,3	01,334	132,200,334
8	Gross income from interest, dividends, payments received							
	on securities loans, rents,	250,161	363,745	123,608	105,980		43,867	887,361
	royalties and income from	250,101	333,7.13	125,555	100,500		.5,557	557,551
	similar sources							
9	Net income from unrelated							
-	business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income (Explain in Part							
	IV) Do not include gain or loss				18,657		8,794	27,451
	from the sale of capital				·		·	•
	assets							
11	Total support (Add lines 7							133,115,806
12	through 10) L Gross receipts from related activit	uas ats (Saa ins	tructions \			1 45 1		26.022
	·		•			12		26,023
13	First Five Years If the Form 990 is	for the organizat	tion's first, second	l, third, fourth, or f	ifth tax year as a	501(c)(3)) organız	
	check this box and stop here							►
S	ection C. Computation of Pu	blic Support	Percentage					
14	Public Support Percentage for 200			11 column (f))		14		99 310 %
15	Public Support Percentage for 200			(.,,		_		
		•	•			15		99 100 %
16a	33 1/3% support test—2009. If the and stop here. The organization qu				line 14 is 33 1/3%	or more,	checkti	nis box ⊭ ▼
h	33 1/3% support test—2008. If th	•			ia and line 15 is 3	3 1/3% o	rmore (•
_	box and stop here. The organization	-			oa, and thie 15 is s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i illore, v	► F
17a	10%-facts-and-circumstances test			-	ne 13, 16a, or 16b	and line	14	- ,
	is 10% or more, and if the organiz		-		· · · · · · · · · · · · · · · · · · ·			
	in Part IV how the organization me							ed
	organization			•	•			▶ ┌
b	10%-facts-and-circumstances test							
	15 is 10% or more, and if the orga							
	Explain in Part IV how the organize	ation meets the "	facts and circums	tances" test The	organization qual	ifies as a	publicly	
	supported organization	الماجيد فرام سمرة	le a have and the size	16- 16- 17-	- 476 - b	ha '		▶┌
18	Private Foundation If the organiza	tion aid not chec	карох on line 13	, тьа, 16b, 17а о	r 1 / b, check this	oox and s	ee	▶ □
	ınstructions							- 1

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support	T			1	T	I
cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 Gross receipts from activities that						
3	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 Amounts included on lines 1, 2,						
/a	and 3 received from disqualified				1		
	persons						
b	A mounts included on lines 2 and 3						
	received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	rom line 6) ction B. Total Support						
	ndar year (or fiscal year beginning						
cuic	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	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						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and stop here						► □
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	-		.,,		16	
	Table support personage nom 200	o o o modulo m, n	arc 111, mrs 15			10	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ae			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	•		•		18	
	33 1/3% support tests—2009. If the		•		d line 15 is more		line 17 is not
1.7a	more than 33 1/3%, check this box a					u.ii 23 1/3/0 dill	. IIIC 17 13 110t
	organization	•厂		•			
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	e 19a, and line 16	5 is more than 33	1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID: Software Version:

EIN: 13-1656647

Name: FREEDOM HOUSE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	2,224,277	ıncludıng grants of \$	1,235,947) (Revenue \$)
governmental civic organizations and h	groups worldwide to conduct iuman rights defenders that p	effective advoc romote human	cacy, legal services, monit rights, democracy and rule	ds by strengthening the capacity of oring and reporting by independent m of law Freedom House and its partn ve in responding to threats and chal	nedia, civic ers,
	ıffıcult countries in Southeast	•	•	entral Asia, the Caucasus and Russ	_
some of the most d	ıffıcult countries in Southeast	•	•		_
some of the most d Central and East A (Code Reforming Family L Kuwait, Bahrain and analyses of current	officult countries in Southeast frica) (Expenses \$ aw in the Persian GulfFreedor I Saudi Arabia to review exist practices from the point of v	1,381,661 In House works Ing family laws ew of both civil	Ile East and North Africa, C including grants of \$ with women's groups, activ , provide comparisons to in and Islamic jurisprudence	entral Asia, the Caucasus and Russ	erts in egal

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		tion (hat a	che	')	_		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
william H Taft IV chairman of the Board	1 00	x		x				0	0	0
thomas A Dine vice Chairman	1 00	Х		х				0	0	0
ruth Wedgwood	1 00	х		х				0	0	0
vice Chairman walter J Schloss										
treasurer	1 00	X		X				0	0	0
john Norton Moore secretary	1 00	х		х				0	0	0
Kenneth Adelman tRUSTEE	1 00	×						0	0	0
Goli Ameri truSTEE	1 00	х						0	0	0
Susan J Bennett Trustee	1 00	х						0	0	0
James H Carter truSTEE	1 00	х						0	0	0
Antonia Cortese TrustEE	1 00	х						0	0	0
Lee Cullum tRUSTEE	1 00	Х						0	0	0
Paula J Dobriansky truSTEE	1 00	Х						0	0	0
Alan P Dye Chair, Audit Committee	1 00	х						0	0	0
Stuart Eizenstat tRUSTEE	1 00	Х						0	0	0
Carleton S Fiorina TRUSTEE	1 00	Х						0	0	0
Sıdney Harman trustee	1 00	Х						0	0	0
D Jeffrey Hırschberg truSTEE	1 00	Х						0	0	0
Lionel Johnson tRUSTEE	1 00	Х						0	0	0
Kenneth I Juster TRUSTEE	1 00	Х						0	0	0
Max M Kampelman Chairman Emeritus	1 00	Х						0	0	0
Kathryn Dickey Karol tRUSTEE	1 00	Х						0	0	0
Bette Bao Lord Chairman Emeritus	1 00	Х						0	0	0
Jay Mazur trustee	1 00	Х						0	0	0
Theodore N Mirvis tRUSTEE	1 00	Х						0	0	0
Dalia Mogahed TRUSTEE	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compe Compensated Employees, a								ecs, key Emplo	yees, ingliest	
(A) Name and Title	(B) A verage hours	Average Position (check all hours that apply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other				
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Alberto Mora TRUSTEE	1 00	х						0	0	0
Joshua Muravchik TRUSTEE	1 00	Х						0	0	0
David Nastro trustee	1 00	Х						0	0	0
Andrew Nathan TRUSTEE	1 00	Х						0	0	0
Diana Villiers Negroponte TRUSTEE	1 00	Х						0	0	0
Lisa B Nelson TRUSTEE	1 00	Х						0	0	0
Mark Palmer tRUSTEE	1 00	Х						0	0	0
Scott Siff tRUSTEE	1 00	Х						0	0	0
Arthur Waldron TrusteE	1 00	Х						0	0	0
Rich Williamson truSTEE	1 00	Х						0	0	0
Wendell L Willkie II tRUSTEE	1 00	Х						0	0	0
Richard Winfield truSTEE	1 00	Х						0	0	0
jenNIFER WINDSOR eXECUTIVE DIRECTOR	40 00			х				169,999	0	24,397
thomas melia deputy Director	40 00			х				156,000	0	22,797
Quoc-Huy Nguyen CFO	40 00			х				146,783	0	25,431
robert herman Dırector of Programs	40 00					Х		124,682	0	23,221
Daniel CALINGAERT Deputy Director of Programs	40 00					х		113,070	0	22,056
Lisa Davis Deputy Director of Programs	40 00					х		117,230	0	17,085
Jennifer Koliba DIRECTOR OF compliance	40 00					х		109,400	0	16,482
Archer Puddington Director of Research	40 00					x		112,240	0	26,944

DLN: 93493111006061

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

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

- ◆ 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

f th	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47	(Lobbying	g Activ	ities), the।	n
	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II				
	ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete				
	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line	35a (rega	arding	proxy tax)	, then
	ction 501(c)(4), (5), or (6) organizations Complete Part III				
	me of the organization EDOM HOUSE	mployer ıd	entifica	ation numbe	er
1 101		3-165664	7		
Par	t I-A Complete if the organization is exempt under section 501(c) or is a se	ction 52	27 or	ganizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Part				
2		IV			
	Political expenditures	•	\$ _		
3	Volunteer hours		_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	þ -	\$ <u>_</u>		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶	\$ _		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	☐ No
4a	Was a correction made?			☐ Yes	☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection 5	01(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function acti	vities 🕨	\$ _		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5.	27			
	exempt funtion activities	•	\$ _		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b 🕨	\$_		
4	Did the filing organization file Form 1120-POL for this year?			☐ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 political were made. For each organization listed, enter the amount paid from the filing organization's funds	-			

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	t II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).										
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,							
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals					
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)								
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)								
c	Total lobbying expenditures (add lines 1a and 18	b)									
d	Other exempt purpose expenditures										
e	Total exempt purpose expenditures (add lines 1	c and 1d)									
f	Lobbying nontaxable amount Enter the amount f										
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir									
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00							
	Over \$17,000,000	\$1,000,000									
		•									
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)									
h	Subtract line 1g from line 1a If zero or less, enter	er -0-									
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -									
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No					
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five					
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı					
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total					
2a	Lobbying non-taxable amount										
b	Lobbying ceiling amount (150% of line 2a, column(e))										
c	Total lobbying expenditures										
d	Grassroots non-taxable amount										

Sche	edule C (Form 990 or 990-EZ) 2009					age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	OT fi	led F	orm	5768	B
		(a	a)		(b)	
		Yes	No	4	A mour	nt
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					
а	Volunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
e	Publications, or published or broadcast statements?	Yes				
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				1,552
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities? If "Yes," describe in Part IV		Νo			
j	Total lines 1c through 1i					1,552
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		F	3		
Par	t III-B Complete if the organization is exempt under section $501(c)(4)$, section 5	01(c)(5),	or s	ectio	n
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	_				
	expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	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				
	art IV Supplemental Information	~				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and	l Part	II-B lin	ر 1 م		
	on complete this part to provide the descriptions required for Part 1-A, fine 1, Part 1-B, fine 4, Part 1-C, fine 5, and to complete this part for any additional information		וווו , ט־יוו	IC II		
	Identifier Reference Explanat	ion				

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DLN: 93493111006061

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

rnal F	evenue Service	orm 990. ► See separate instructions.		Ins	pecu	on
	e of the organization		Emp	loyer identification n	umber	1
KLL	ON HOUSE		13-	1656647		
ar	Organizations Maintaining Donor A		ınds	or Accounts. Cor	nplete	e if the
	organization answered "Yes" to Form 99	•		(h) Funda and athen a		<u> </u>
	atal musel and at usan	(a) Donor advised funds		(b) Funds and other a	ccoun	ts
	otal number at end of year					
	ggregate contributions to (during year) .ggregate grants from (during year)					
	ggregate grants from (during year) ggregate value at end of year					
	Old the organization inform all donors and donor advi unds are the organization's property, subject to the		or advi	rsed r.	⁄es	∏ No
	Old the organization inform all grantees, donors, and ised only for charitable purposes and not for the ber conferring impermissible private benefit				í es	┌ No
ar	III Conservation Easements. Complete	ıf the organization answered "Yes" to	o Forn	n 990, Part IV, line	7.	
	Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	Preservation of a c	ertifie	ically importantly land historic structure onservation	d area	
				Held at the End o	f the \	/ear
_	otal number of conservation easements		2a			
b	otal acreage restricted by conservation easements	•	2b			
_	Number of conservation easements on a certified his	` '	2c			
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
	Number of conservation easements modified, transfer the taxable year Number of states where property subject to conservations the organization have a written policy regarding the conservation easements it holds:	ation easement is located F		violations, and	í es	∏ No
	Staff and volunteer hours devoted to monitoring, insp		ents d	uring the year ►		
	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during	g the year ► \$		
	Does each conservation easement reported on line 2 .70(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2 (d) above satisfy the requirements of sec	tıon	Γ,	⁄es	┌ No
	n Part XIV, describe how the organization reports coalance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financial				
art	Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8.	or Otl	her Similar Asse	ts.	
	f the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	h ın fu			
_	f the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii				
	i) Revenues included in Form 990, Part VIII, line 1			► \$		
	ii) Assets included in Form 990, Part X			<u> </u>		
	f the organization received or held works of art, hist ollowing amounts required to be reported under SFA		r fınan			
	Revenues included in Form 990, Part VIII, line 1	-		► \$		
				· +		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tre</u>	asu	res, or C	<u>)the</u>	<u>r Simila</u>	ar Asse	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e foll	owing th	at are	a signific	ant u	se of its o	collection	n	
а	Public exhibition		d	Γ	Loan or	exch	ange prog	rams				
b	Scholarly research		e	Γ	Other							
с	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	v the	/ further	the o	rnanizatioi	n's ex	empt pur	nosein		
•	Part XIV	onections and expla		, ,,,,,,	rarener		rgamzacioi	15 0	cempt par	p050 III		
5	During the year, did the organization solicit			,					ıılar	_		
Do	assets to be sold to raise funds rather than t								ooll to F		Yes	│ No
Pal	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	u i	es 10 F	טפפ וווופ	J ,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						rotherass	ets	not	Г	Yes	
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ing ta	able							
										A mou	unt	
c	Beginning balance							1 c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance						ſ	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				_			Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	1										
Pai	rt V Endowment Funds. Complete	ıf the organızatıor	n ans	were	ed "Yes	" to F	orm 990	, Par	t IV, line	e 10.		
		(a)Current Year	(b) Prior		(c) Tw	o Years Bacl	< (d)) Three Year	s Back (e	∍) Four Y	ears Back
1a	Beginning of year balance	2,000,000		2	2,000,000							
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	2,000,000		2	2,000,000							
2	Provide the estimated percentage of the yea	r end balance held a	ıs									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment ► 100 000 % %											
c	Term endowment ► %											
3a	Are there endowment funds not in the posse	ssion of the organiza	ation 1	that a	re held a	and a	dmınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•		. 3a(i)	1	No
L	(ii) related organizations					•		•		3a(ii)	1	N o
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIV the intended uses of the	•						•		3b	1	<u> </u>
	t VI Investments—Land, Buildings					0. Pa	rt X. line	10				
	<u> </u>	-, and Equipme			Cost or		(b)Cost or		(c) Accu	mulated	Ι.	
	Description of investment				sis (investr		basis (oth		depred		(d) B	ook value
1a	Land											
ь	Buildings											
С	Leasehold improvements						35	4,951		86,506		268,445
	Equipment									· ·		· · ·
	• •						70	7,243		514,391		192,852
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colun	nn (B)	, line	10(c).)			.,		,		461,297
d e	Equipment	orm 990, Part X, colun	nn (B)	, line	10(c).)		70	7,243	•	,		192 461

Part VII Investments—Other Securities. See (a) Description of security or category			of valuation
(including name of security)	(b)Book value		year market value
Financial derivatives			
Closely-held equity interests Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		1.2	
Part VIII Investments—Program Related. See			of valuation
(a) Description of investment type	(b) Book value		year market value
		1	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III (a) Descrip			(b) Book value
			(-/ -
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	220.700		
Deferred rent	220,799		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	220,799		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	33,511,970
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	32,976,608
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	535,362
4	Net unrealized gains (losses) on investments	4	120,469
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	120,469
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	655,831
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	34,578,850
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 694,125		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 252,286		
е	Add lines 2a through 2d	2e	1,066,880
3	Subtract line 2e from line 1	3	33,511,970
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 XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	33,511,970
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	33,923,019
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	946,411
3	Subtract line 2e from line 1	3	32,976,608
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	A dd lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	32,976,608
Pai	t XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The Board of Trustees authorize the Executive Director to use the earned interests in excess of \$2 million as required for ongoing operations
Part X	Description of Uncertain Tax Positions Under FIN 48	Management evaluated the organization's tax positions and concluded that the organization had taken no uncertain tax positions that require adjustment to the financial statements
Part XII, Line 2d - Other Adjustments		Freedom House - Europe included in Consolidated Financial Statements 411287 Eliminations in Consolidated Financial Statements -159001
Part XIII, Line 2d - Other Adjustments		Freedom House - Europe included in Consolidated Financial Statements 411287 Eliminations in Consolidated Financial Statements -159001

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DLN: 93493111006061

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

> Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Name of the organization FREEDOM HOUSE

Employer identification number

13-1656647

Part I	General Information on	Activities Outside the United States.	. Complete if the organization a	nswered
	"Yes" to Form 990, Part IV,	line 14b.	-	

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or			
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award			
	the grants or assistance?	Yes	\vdash	No

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (U	se Schedule F-1	(Form 990) ıf ado	ditional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	for region
Middle East and North Africa	3	15	Grants to recipients		196,225
Sub-Saharan Africa	3	17	Grants to recipients		236,870
South America	2	14	Grants to recipients		50,875
East Asia and the Pacific	4	11	Grants to recipients		427,605
Europe (Including Iceland & Greenland)	1	3	Grants to recipients		13,000
	13	60			924,575
For Privacy Act and Paperwork R	eduction Act Notic	re, see the Instruc	tions for Form 990.	Cat No 50082W Sche	edule F (Form 990) 2009

	and Other Ass		nizations or Entiti					
		recipient who rec 990) if additional	eived more than \$5, space is needed.	.000. Check this box	k if no one recipient	received more thai	า \$5,000	▶ ┌
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
See Add'l Data								
			sted above that are see or counsel has pro					54
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Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

OSE Scriedule	2 1-1 (101111 330) 11 au	iuitional space	is needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Humanitarian Grant	Europe (Including Iceland & Greenland)	1	13,000	Wire and/or Cash Transfers			
Humanitarian Grant	Central America and the Caribbean	1	5,648	Wire and/or Cash Transfers			
Humanitarian Grant	Sub-Saharan Africa	12	13,850	Wire and/or Cash Transfers			
Humanitarian Grant	Mıddle East and North Afrıca	1	7,800	Wire and/or Cash Transfers			
Humanitarian Grant	East Asia and the Pacific	56	11,200	Wire and/or Cash Transfers			
Humanitarian Grant	South Asia	8	7,400	Wire and/or Cash Transfers			
		1					

Schedule F (Form 990) 2009

Part IV Supplemental Information							
		Part I, line 2, and any additional information.					
Identifier Procedure for Monitoring Grants Outside the U S		Explanation Schedule F, Part I, Line 2 Grantees submit to us periodic financial reports (monthly or quarterly) and receipts Finance staff then review those documents to ensure that they substantiate the					
		expenditures as stated in the reports and may raise additional questions and requesting documentation as we deem necessary In addition, our program staff stay in close contacts with the					
		grantees to ensure that they are in compliance with their programmatic requirements and funds are spent in accordance with the agreements					

Software ID: Software Version:

EIN: 13-1656647
Name: FREEDOM HOUSE

Form 990 Schedu	ıle F Part II	- Grants or Entitio	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Supporting human rights and/or rule of law	6,039	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	18,543	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	9,447	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	6,750	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	9,405	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	6,074	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	6,615	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	13,143	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	6,800	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	7,439	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	6,750	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	8,731	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	6,002	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	12,079	Wire and/or cash transfers			
		Mıddle East and North Africa	Supporting human rights and/or rule of law	58,057	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	6,970	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	6,000	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	5,575	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	10,000	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	132,651	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	27,085	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	6,174	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	10,160	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	10,000	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	7,250	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	7,800	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	6,600	Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law	7,575	Wire and/or cash transfers			
		South America	Supporting human rights and/or rule of law	14,650	Wire and/or cash transfers			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		South America	Supporting human rights and/or rule of law	15,000	Wire and/or cash transfers			
		South America	Supporting human rights and/or rule of law	10,000	Wire and/or cash transfers			
		South America	Supporting human rights and/or rule of law	5,648	Wire and/or cash transfers			
		South America	Supporting human rights and/or rule of law	5,577	Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law	·	Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		Pacıfic	Supporting human rights and/or rule of law	·	Wire and/or cash transfers			
		East Asia and the Pacific East Asia and the	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		Pacific East Asia and the	Supporting human rights and/or rule of law		Wire and/or cash transfers Wire and/or cash			
		Pacific East Asia and the	Supporting human rights and/or rule of law Supporting human		transfers Wire and/or cash			
		Pacific East Asia and the	rights and/or rule of law Supporting human		transfers wire and/or cash			
		Pacific East Asia and the	rights and/or rule of law Supporting human		transfers wire and/or cash			
		Pacific East Asia and the	rights and/or rule of law		transfers			
		Pacıfic	Supporting human rights and/or rule of law		Supporting human rights and/or rule of law			
		East Asia and the Pacific	Supporting human rights and/or rule of law		wire and/or cash transfers			
		East Asia and the Pacific Europe (Including	Supporting human rights and/or rule of law		wire and/or cash transfers			
		Iceland & Greenland)	Supporting human rights and/or rule of law	13,000	wire and/or cash transfers			

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493111006061

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

Open to Public Inspect ion

Name of the organization **Employer identification number** FREEDOM HOUSE 13-1656647 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable (book, FMV, appraisal, non-cash assistance or assistance grant cash other) or government assistance Enter total number of section 501(c)(3) and government organizations

	•	
Part III	Grants and Other Assistance to Individuals in the United States	. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
				•	•

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Grantees submit to us periodic financial reports (monthly or quarterly) and receipts Finance staff then review those documents to ensure that they substantiate the expenditures as stated in the reports and may raise additional questions and requesting documentation as we deem necessary. In addition, our program staff stay in close contacts with the grantees to ensure that they are in compliance with their programmatic requirements and funds are spent in accordance with the agreements.
-		

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DLN: 93493111006061

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** FREEDOM HOUSE 13-1656647 Questions Regarding Compensation

				Yes	Νο
1a	Check the appropiate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to pro				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?				
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply				
	Compensation committee	Written employment contract			
	☐ Independent compensation consultant	·			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization				
а	a Receive a severance payment or change-of-control payment?				Νο
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				Νo
c					Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only must cor	nplete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of				
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of				
а	a The organization?				
b	b Any related organization?				
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III				Νο
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III				No
9	If "Yes" to line 8, did the organization also follow the rebusection 53 $4958\text{-}6(c)\text{?}$	ttable presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	(iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior
		compensation	incentive compensation	reportable compensation	compensation			Form 990 or Form 990-EZ
	(I) (II)	169,999 0	0 0	0 0	17,000 0	10,479 0	197,478 0	
	(I) (II)	154,000 0	2,000 0	0 0	15,400 0	10,479 0	181,879 0	0 0
	(I) (II)	146,033 0	750 0		14,603 0		175,296 0	0 0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization FREEDOM HOUSE

Employer identification number

13-1656647

		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of de reven	etermı	nıng	
1	Art-Works of art	пррисседи		- 9				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
_	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	3	29,833	FMV			
10	Securities—Closely held stock $$.							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	Other ► ()							
29	Number of Forms 8283 received for which the organization compl	, ,			29		Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangeme					30a		
31	Does the organization have a gif	tacceptand	ce policy that requires the i	eview of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
	If "Yes," describe in Part II If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 13-1656647

Name: FREEDOM HOUSE

As Filed Data -

DLN: 93493111006061

OMB No 1545-0047

Inspection

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SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Supplemental Information to Form 990

Name of the organization FREEDOM HOUSE

Employer identification number

13-1656647

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Executive committee of the Board has designated the chairs of Audit and Finance committees to review the 990 before it is filed with the IRS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		A conflict of interest exists whenever an individual could benefit directly or indirectly from a decision over which they might have influence, or where a third party might reasonably perceive there to be such a benefit and influence "Related-party transactions" are the most frequent case in point. This is when a transaction, such as the award of a contract or the provision of a benefit, is made between two parties with a separate personal or business relationship wherein one or both would benefit from the transaction, financially or otherwise. One of the best antidotes to a real or perceived conflict of interest is disclosure, so that the potentially "conflicted" decision-maker or beneficiarly takes a decision that could later be called into question in a transparent and informed manner and in consultation with others who are removed from the potential conflict. Individuals joining the Board of Trustees assume a duty to disclose any personal, family, business, or related or affiliated interests they have that could benefit from transactions with Freedom House or from the activities or advocacy undertaken by the Organization and hence bring into question the propriety of decisions taken by or on behalf of Freedom House. Almost any "related-party transaction" is worthy of disclosure and discussion. Not all related-party transactions are illegal or improper, but only a rounded discussion can clarify this. In any case in which a Trustee believes that his or her conduct or activities could be construed by a reasonable third party to constitute, or could appear to constitute, a possible conflict of interest, the Trustee should disclose the situation to the Board's Governance and Ethics Officer, who will review the matter and recommend to the Executive Committee a course of action to remove the conflict of interest (if indeed one is determined to exist) and preserve the integrity of decisions made by or on behalf of Freedom House. At the discretion of the Executive Committee the matter may be brought to the attention

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Based on a recommendation for the Board Committee on Governance and Ethics Committee, the Full Board of Trustees acts annually to determine the compensation of the executive director. Further, as part of the annual evaluation process for the Executive Director, and to ensure compliance with Section 4958 of the Internal Revenue Code (which imposes penalties on NGOs that provide excessive compensation to CEOs), Freedom House is obliged to examine salaries of chief executives of similar organizations. Compensation for other senior officials is determined by the executive director, as part of an annual performance review process conducted for all employees. The process for this review is overseen by the Board's Committee on Governance and ethics

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Freedom House's financial statements are available to the public upon request and a snapshot of our financials are included in the annual report which is posted on our website. However, governing documents and conflict of interest policy are internal documents and not available to the public

ldentifier	Return Reference	Explanation
form 990, part Xı, line 2c		the process has been consistent with prior years

DLN: 93493111006061

2009

OMB No 1545-0047

Open to Public . Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization FREEDOM HOUSE				Employer identific	ation number	
TREESON HOUSE				13-1656647		
Part I Identification of Disregarded Entities (Complete	e if the organization	answered "Yes" on	Form 990, Part 1	V, line 33.)		
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
						_
						_
						_
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the		the organization an	swered "Yes" on	Form 990, Part IV,	line 34 because it had one	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	
Freedom House - Ukraine						_
B Khmelnytskoho 68/68 kyıv 01030 UP	chantable organization	UP			N/A	
Freedom House - Hungary						_
Falk Miksa Utsca 30 IV/2 budapest 1055 HU	charitable organization	ни			N/A	
						_
					+	_

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end asset	-of-year	(h Disprop allocat	ortionate	Code amount ır Sched	(i) V—UBI n box 20 of ule K-1 n 1065)	Gener mana	al or Iging
								Yes	No			Yes Yes , Part IV,	No
												+	
								nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it flad offe t		elated organizations				(f))		(-)	(5)		
	f related organization	(b) Primary a	ctivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share o	f total	Sh end-	(g) nare of -of-year ssets	(h) Percentag ownership		
	(a) address, and EIN of ted organization (b) Primary activity (state or foreign country) Direct controlling entity												
												(j) General or managing partner? Yes No	
									1				

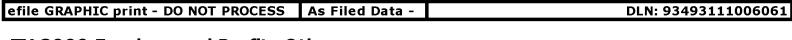
(6)

	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-	IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b	Gift, grant, or capital contribution to other organization(s)		1b		No
c	Gift, grant, or capital contribution from other organization(s)		1c		No
d	Loans or loan guarantees to or for other organization(s)		1d		No
e	Loans or loan guarantees by other organization(s)		1e		No
f	Sale of assets to other organization(s)		1f		No
g	Purchase of assets from other organization(s)		1g		No
h	Exchange of assets		1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)		1 i		No
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No
1	Performance of services or membership or fundraising solicitations by other organization(s)		11		No
m	Sharing of facilities, equipment, mailing lists, or other assets		1m		No
	Sharing of paid employees		1n		No
o	Reimbursement paid to other organization for expenses		10	Yes	
p	Reimbursement paid by other organization for expenses		1 p		No
q	O ther transfer of cash or property to other organization(s)		1 q		No
r	O ther transfer of cash or property from other organization(s)		1 r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationsh	nips and transaction thre	sholds		
	(a) Name of other organization	(b) Transaction type(a-r)	Amount	(c) : involve	ed
(1) Fr	eedom House Hungary	0		15	9,001
<u> </u>	e Additional Data Table				
(2)					
(3)					
(4)					
(E)					
(5)					

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	501(c)(3) organizations?		(e) Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) Teneral or Tenaging Partner?	
			Yes	No		Yes	No		Yes	N	
										+	
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TY 2009 Earnings and Profits Other Adjustments Statement

Name: FREEDOM HOUSE

EIN: 13-1656647

Description	Amount
Federal Grants - Non Taxable	-298,913



TY 2009 Earnings and Profits Other Adjustments Statement

Name: FREEDOM HOUSE

EIN: 13-1656647

Description	Amount
Federal Grants - Non Taxable	-890,472

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TY 2009 Other Deductions Schedule

Name: FREEDOM HOUSE

EIN: 13-1656647

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
Program Services	80,669,462	411,287