Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the 2	2009 cale	ndar yea	r, or tax year beginning 07-01-2009 and ending 06-30-2010			
B Ch	eck if ap	pplicable	Please	C Name of organization FREEDOM HOUSE		D Employer i	dentification number
☐ Ad	dress ch	unge	ıse IRS abel or	13-16566			
Г№	me char	nge i	orint or	Doing Business As	E Telephone	number	
┌ Ind	tıal retur	rn S	ype. See Specific	Number and street (or P O box if mail is not delivered to street address	N Room/suite	(202) 296	-5101
Гте	mınated	d t	instruc- ions.	1301 Connecticut Ave NW Floor 6	, Room, sake	G Gross receip	ts \$ 34,922,777
┌ Am	ended r	return		City or town, state or country, and ZIP + 4	1		
☐ Ap	plication	pending		WASHINGTON, DC 20036			
			David k 1301 C WASHI	onnecticut A ve NW Floor 6 NGTON, DC 20036	affilia	l affiliates inclu	⊤Yes 🔽 No
I Ta	x-exem	npt status	「 501(c)	(3) ◀ (Insert no)	H(c) Grou	p exemption r	number ►
J W	ebsit e	∷ ⊨ www	/ FREEDO	MHOUSE ORG			
		ganization	✓ Corporat	on	L Year of for	rmation 1941	M State of legal domicile NY
Pa	rt I	Summ		e organization's mission or most significant activities			
Governance		the Unite	jhts defer d States,	eports, including Freedom in the World Its diverse programs iders in over 40 countries Advocacy and outreach are aimed to adopt and implement policies that effectively advance hum	at encourag ian rights an	ing democrati d democracy	c governments, including at home and abroad
26	2	Check th	ıs box 🛏	if the organization discontinued its operations or disposed o	f more than :	25% of its ne	t assets
Activities	3	Number	f voting r	nembers of the governing body (Part VI, line 1a)			3 37
Ĕ	4	Number	fındepen	dent voting members of the governing body (Part VI, line 1b)			437
្ន	5	Total nun	nber of en	nployees (Part V , line 2a)			5148
	6	Total nun	nber of vo	lunteers (estimate if necessary)			6 50
	7a	Total gro	ss unrelat	ed business revenue from Part VIII, column (C), line 12 .	•		7a 0
	b	Net unrel	ated busi	ness taxable income from Form 990-T, line 34			7b 0
					Prio	r Year	Current Year
ou.	8			I grants (Part VIII, line 1h)		24,537,640	33,501,344
enu	9	_		revenue (Part VIII, line 2g)			0
Ravenue	10			ne (Part VIII, column (A), lines 3, 4, and 7d)		132,901	-3,780
_	11 12			art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) dd lines 8 through 11 (must equal Part VIII, column (A), line		23,571	14,406
				<u> </u>		24,694,112	33,511,970
	13			ramounts paid (Part IX, column (A), lines 1-3)		7,278,542	15,700,081
	14 15		-	r for members (Part IX, column (A), line 4) mpensation, employee benefits (Part IX, column (A), lines 5-			0
Expenses		10)				8,382,165	9,671,088
<u>₹</u>	16a			raising fees (Part IX, column (A), line 11e)		50,135	0
五	Ь			enses (Part IX, column (D), line 25) ▶ 202,262			_
	17			Part IX, column (A), lines 11a-11d, 11f-24f)		8,816,818	7,605,439
	18			add lines 13–17 (must equal Part IX, column (A), line 25)		24,527,660	32,976,608
	19	Kevenue	e iess exp	enses Subtract line 18 from line 12	Regimeir	166,452	535,362
Net Assets or Fund Balances						of Current ear	End of Year
35.4E	20	Total as	sets (Par	t X, line 16)		7,526,066	9,284,227
# E	21			art X, line 26)		2,334,945	3,437,275
	22			d balances Subtract line 21 from line 20		5,191,121	5,846,952
Pa	rt II	Signa	ture Blo	ock			
				rjury, I declare that I have examined this return, including a			

Sign ***** Here Signature of officer Quoc-Huy Nguyen CFO Type or print name and title Preparer's signature Date Paid Preparer's Firm's name (or yours if self-employed), address, and ZIP + 4 RSM McGLADREY INC **Use Only** 8000 TOWERS CRESCENT DR STE 500 VIENNA, VA 221826205

May the IRS discuss this return with the preparer shown above? (see instructio

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	ice expenses►\$	32,764,541			
	(Expenses \$	16,544,798 inc	luding grants of \$	3,953,1	.20) (Revenue \$)
4d	Other program serv	rices (Describe in Sch	nedule O) See also /	dditional Data fo	r Description	
		nts in CubaThis program is on as well as conduct research			and human rights defenders to deve	lop grassroots movements
4c	(Code) (Expenses \$, ,	ding grants of \$	176,030) (Revenue \$)
	RIGHTS Consortium incl National Democratic Ins program may be expan	udes Freedom House (as tl titute for International Affai ded through additional fund	ne grant recipient), in pa rs (NDI) Additional asso ling awards, called assoc	rtnership with the Ame ciate partners are inclui late awards, by USAID	ities in the field of rule of law and hum erican Bar Association Rule of Law Initi ided in the RIGHTS Consortium on a p o missions and regional bureaus Progr onal networking, and multi-year field-l	ative (ABA ROLI) and the project-by-project basis. The arm activities include
4b	(Code) (Expenses \$, ,	ding grants of \$	4,213,479) (Revenue \$)
		nts and Rule of Law in Zimb unions to advocate and mo			vil society organizations, including chui	rch groups, student
4a	(Code) (Expenses \$	9,564,101 ınclu	ding grants of \$	7,357,452) (Revenue \$)
4	Section 501(c)(3) ai		ions and section 49	47(a)(1) trusts ar	argest program services by expressive required to report the amount ervice reported	
	If "Yes," describe the	ese changes on Sched	ule O			
3	Did the organization services?	cease conducting, or i	make significant cha	nges in how it con		Yes 🔽 No
	If "Yes," describe the	ese new services on S	chedule O			
2	•	undertake any signific r 990-EZ?	, ,	s during the year	which were not listed on	Yes 🔽 No

art TV	Checl	clist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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		No
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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		Νo
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? If "Yes," complete Schedule F, Part II	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 ? If "Yes," 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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		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		Νο

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		Νο
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		No
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		No
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		Νο
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		No
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		Νο
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		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		Νο
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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		No
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		No
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	

Form	Form 990 (2009)						
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	e					
					Yes	No	
1a	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				

Ia	of U.S. Information Returns. Enter -0- if not applicable					
	··	1a	192			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	-		
c	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	o vend	dors and reportable	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return	2a	148			
b	If at least one is reported on line 2a, did the organization file all required federal employee: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin return?	g the	year covered by this	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Scho	edule (o	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a sover, a financial account in a foreign country (such as a bank account, securities acaccount)?	-	•	4a	Yes	
ь	If "Yes," enter the name of the foreign country ►PE, KZ, KG, MX, KE, KU, JO, S	F				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Financial Accounts		of Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	elter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-E Prohibited Tax Shelter Transaction?	xemp	t Entity Regarding	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$1 organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	at sud	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribut services provided to the payor?			7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services p			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal prope file Form 8282?	٠.	which it was required to	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay benefit contract?	prem	iums on a personal	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8	3899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization frequired?	ıle a F	orm 1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) su the supporting organization, or a donor advised fund maintained by a sponsoring org business holdings at any time during the year?	 anızat	ion, have excess	8		
9	Sponsoring organizations maintaining donor advised funds.			٣		
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person			9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99	0 ın lı	eu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	12b				
	year]	l	

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		Νo
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.			
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 VII 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	/ curi	rent	or fo	rmer c	office	r, director, trustee	or key employee	
(A) Name and Title	me and Title A verage Position (check all hours that apply)							(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	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 99			-f Davisson					Page 9
	/!!!	Statement o	т кечепие		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
報告	1a	Federated cam	paigns 1a	4,566				
Contributions, gifts, grants and other similar amounts	Ь	Membership du	es 1b					
	c	Fundraising eve	ents 1 c					
<u>≅</u> ,≅	d	Related organiz	rations 1d					
۳۶, E	e	Government grant	s (contributions) 1e	31,406,443				
iti S la	f	All other contribute similar amounts no	ons, gifts, grants, and 1f ot included above	2,090,335				
€£	g	3.	butions included in					
Ħ B		• —	9,833	_ ا	22 504 244			
<u>ت ت</u>	h	Total. Add lines	s 1a-1f		33,501,344			
<u> 9</u>				Business Code				
Ke II	2a							
Program Serwce Revenue	b							
926	C							
3	d							
Ē	e							
200	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a – 2f					
	3	Investment inc	ome (including dividen	ds, interest				
			aramounts)		38,255			38,255
	4		stment of tax-exempt bond	proceeds	5.612			5.612
	5	Royalties			5,612			5,612
	6a	Gross Rents	(ı) Real	(II) Personal				
	Ь	Less rental						
	c	expenses Rental income						
		or (loss)						
	d	Net rental inco	me or (loss)	+				
	7a	Gross amount from sales of assets other than inventory	(1) Securities 1,368,772	(II) O ther				
	Ь	Less cost or other basis and sales expenses	1,410,807					
	c	Gain or (loss)	-42,035					
	d	Net gain or (los	s)		-42,035			-42,035
Other Revenue	8a	events (not inc \$ of contributions	rom fundraising luding reported on line 1c) le 18					
er B	Ь		a penses b					
₹	c		(loss) from fundraising	events 📂				
	9a	Gross income f See Part IV, lir	rom gaming activities ie 19					
	b c		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	ınventory, less					
	b c		oods sold b (loss) from sales of inv	entory ►				
		Miscellaneous		Business Code				
	11a	other income		900,099	8,794			8,794
	ь							
	C							
	d	All other reven	ue					
	е		s 11a-11d	▶	8,794			
	12	Total revenue.	See Instructions .	· · •	33,511,970	0	0	10,626

	990 (2009)				Page 10
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	other organizations must complete column (A) but are not required to bt include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	14,115,236			Скрепосо
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	' 	42,173
10	Payroll taxes	568,663	442,811	 	7,923
11	Fees for services (non-employees)	300,003	442,011	117,525	7,323
	Management				
a		47.677	22 502	25 175	
b	Legal	47,677	22,502	 	
С	Accounting	53,460	25,232	28,228	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	1,797,292	1,641,207	156,085	
12	Advertising and promotion				
13	Office expenses	279,699	194,364	,	10,037
14	Information technology	359,042	277,774	80,459	809
15	Royalties				
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				
19	Conferences, conventions, and meetings	292,544	284,791	7,692	61
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	156,213		156,213	
23	Insurance				
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
b	equipment & Main	214,657	136,907	76,177	1,573
С	staff training	27,709	17,362	10,157	190
d	indirect recovery	0	3,835,810	-3,877,411	41,601
e					<u> </u>
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 Complete this line only if the organization reported in column (B) joint costs from a combined educational	32,570,000	32,701,341	3,000	202,202
	campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 161.838 74.910 1 1 3,834,520 2 4,650,848 2 2,951,892 1,942,431 3 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 7 Inventories for sale or use 8 9 214,250 455.995 Land, buildings, and equipment cost or other basis Complete 1.062.194 10a 10a Part VI of Schedule D 10b 600.897 497,233 10c 461,297 b Less accumulated depreciation 736,848 528,355 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 138,946 15 15 160,930 7,526,066 9.284,227 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 17 1,787,797 17 1,554,510 Accounts payable and accrued expenses 18 18 400,709 19 19 1,661,966 Tax-exempt bond liabilities 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . Unsecured notes and loans payable to unrelated third parties 24 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 3,437,275 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. Unrestricted net assets 2,062,588 2,212,127 27 27 1.634.825 28 Temporarily restricted net assets 1.128.533 28 Fund 2.000.000 29 2.000.000 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ĕ 33 Total net assets or fund balances 5,191,121 33 5,846,952 Total liabilities and net assets/fund balances 34 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)

Employer identification number

The dien has print be not riveded.

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

FREEDOM HOUSE

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

		13-1656647			
Pa	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instruc	tions		
The	rganı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)			
1	\sqcap	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).			
2	\sqcap	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)			
3	\sqcap	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A) hospital's name, city, and state	(iii). Ente	r the	
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental university of the benefit of a college or university owned or operated by a governmental university of the benefit of a college or university owned or operated by a governmental university of the benefit of a college or university owned or operated by a governmental university of the benefit of a college or university owned or operated by a governmental university owned or operated by a governmental university of the benefit of the ben	t describe	_ !d in	
6	Г	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	ন	An organization that normally receives a substantial part of its support from a governmental unit or from th described in section 170(b)(1)(A)(vi) (Complete Part II)	e general	public	:
8	\sqcap	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)			
9	\sqcap	An organization that normally receives (1) more than 331/3% of its support from contributions, membersh	ıp fees, aı	nd gro	ss
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more tha	n 331/3%	of	
		its support from gross investment income and unrelated business taxable income (less section 511 tax) fr	om busin	esses	
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)			
10	\sqcap	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).			
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carrone or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See sective box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d	•	a)(3).	Check
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more d other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)	•	•	
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supposes this box	pporting o	rganız	ation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?			
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)		Yes	No
		and (III) below, the governing body of the the supported organization?	11g(i)		<u> </u>
		(ii) a family member of a person described in (i) above?	11g(ii)		<u> </u>
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		<u> </u>
h		Provide the following information about the supported organization(s)			

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organızatı col (ı) lıst your gove	(iv) Is the anization in (i) listed in r governing occument? (v) Did you notify the organization in col (i) of your support?		Did you notify the Is the organization in col (i) of your col (i) organization		on in anized	(vii) A mount of support?
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

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.)

	(Complete only if y	ou checkeu the	E DOX OII IIIIE 5,	7, OI O OI Pait	1.)			
	ection A. Public Support							
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
1	Gifts, grants, contributions, and							
-	membership fees received (Do no	t 23,717,46	26,266,87	78 24,177,675	24,537,640	33 50	01,334	132,200,994
	ınclude any "unusual	23,717,40	20,200,87	24,177,073	24,337,040	33,30	,1,334	132,200,334
	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 26,266,87	78 24,177,675	24,537,640	33,50	01,334	132,200,994
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included on line 1 that exceeds 2% of the							
	amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5							132,200,994
	from line 4							132,200,994
S	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	,	(f) Total
_	beginning in)	` '						
7	A mounts from line 4	23,717,467	363,745	24,177,675	24,537,640	33,50	1,334	132,200,994
8	Gross income from interest,							
	dividends, payments received on securities loans, rents,	250,161	363,745	123,608	105,980	4	3,867	887,361
	royalties and income from	250,101	303,713	123,000	103,300	•	3,007	007,501
	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							
11	Total support (Add lines 7							
	through 10)							133,115,806
12	Gross receipts from related activit	ies, etc (See ins	structions)		•	12	<u> </u>	26,023
13	First Five Years If the Form 990 is	for the organizat	tion's first secon	d third fourth or	fifth tax vear as a		organiz	
	check this box and stop here	Tor the organizat		a, cima, roarcii, or	men eax year as a	301(0)(3)	organiz	▶ □
	·							
S	ection C. Computation of Pu	blic Support	Percentage					
14	Public Support Percentage for 200	9 (line 6 column	(f) divided by lin	e 11 column (f))		14		99 310 %
15	Public Support Percentage for 200	8 Schedule A, P	art II, line 14			15		99 100 %
16a	33 1/3% support test-2009. If the	e organization did	d not check the b	ox on line 13, and	line 14 is 33 1/3%	or more. c	heck t	
	and stop here. The organization qu	•		•				▶ ▽
b	33 1/3% support test-2008. If the	e organization die	d not check the b	ox on line 13 or 16	6a, and line 15 is	33 1/3% or	more,	check this
	box and stop here. The organization							► □
17a	10%-facts-and-circumstances test		-					
	is 10% or more, and if the organiza			•		•	•	
	in Part IV how the organization me	ers the "facts an	ia circumstances	test The organiz	ration qualifies as	a publicly s	upport	ed ▶□
h	organization 10%-facts-and-circumstances test	-2008 Ifthe or	nanization did not	t check a hov on li	ne 13 16a 16b 7	r 17a and	line	F1
-	15 is 10% or more, and if the orga							
	Explain in Part IV how the organiza							
	supported organization				- ,	r	,	► □
18	Private Foundation If the organiza	tıon dıd not chec	k a box on line 13	3, 16a, 16b, 17a c	or 17b, check this	box and se	e	
	instructions							▶ □

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

	(Complete only if you	checked the	box on line 9 of	f Part I.)			
	ction A. Public Support						•
Cale	ndar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	in)			+			
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						
3	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						
	A mounts included on lines 1, 2,						
7 a	and 3 received from disqualified						
	persons						
ь	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 Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
0	from line 6)						
Se	ction B. Total Support	<u>.I.</u>		<u> </u>		ı	I
	ndar year (or fiscal year beginning		(1) 2006	() 2007	/ IN 2000		(C) T
	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						
L	sources Unrelated business taxable						
Ь	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	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						
	IV)		<u> </u>				
13	Total support (Add lines 9, 10c,						
	11 and 12)						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and stop here						► □
	ction C. Computation of Publ	ic Support F)orcontago				
	-			1.2 column (f)		T 4- T	
15	Public Support Percentage for 2009	-		13 column (I))		15	
16	Public support percentage from 200	8 Schedule A , F	Part III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III. line 1	.7		18	
	33 1/3% support tests—2009. If the				line 15 is mars		dline 17 is not
TZG	more than 33 1/3%, check this box a					a.i 53 1/3%0 and	a iiiie 17 18 1100
	organization	F	organization q	aannes as a pabi	, Japporteu		
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	19a, and line 1	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	including grants of \$	1,235,947) (Revenue \$)
governmental civion organizations and	groups worldwide to conduct human rights defenders that p	effective advo	cacy, legal services, monit rights, democracy and rule t Internews, have been act	ds by strengthening the capacity of oring and reporting by independent moflaw Freedom House and its partnive in responding to threats and chall	nedia, civic ers, enges in
		t Asia, the Mido	lle East and North Africa, (Central Asia, the Caucasus and Russ	ıa, and
some of the most o			ile East and North Africa, () ia, and
some of the most of Central and East A (Code Reforming Family I Kuwait, Bahrain an analyses of curren	(Expenses \$ _aw in the Persian GulfFreedor d Saudi Arabia to review exist t practices from the point of v	1,381,661 m House works ing family laws iew of both civi	including grants of \$ with women's groups, acti , provide comparisons to it l and Islamic jurisprudence) erts in egal ing laws

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	(C tion (hat a	che)		1	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	we e k	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	×		х				0	0	0
thomas A Dine vice Chairman	1 00	Х		x				0	0	0
ruth Wedgwood vice Chairman	1 00	Х		х				0	0	0
walter J Schloss treasurer	1 00	Х		х				0	0	0
john Norton Moore secretary	1 00	Х		х				0	0	0
Kenneth Adelman tRUSTEE	1 00	Х						0	0	0
Golı Amerı 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	X						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
Sidney 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 Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours		((tion (hat a	che	')			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Ke) 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
Rıch 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 Director 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					х		112,240	0	26,944

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DLN: 93493111006061

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

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

• Se	ction 501(c)(3) organizations. Col	mplete Parts I-A and B Do not complete	e Part I-C		
	` , `	01(c)(3)) organizations Complete Part	s I-A and C below	Do not complete Part I-B	
	ction 527 organizations Complete	-			
		s," to Form 990, Part IV, Line 4, or		,	•
	` ,` ,	t have filed Form 5768 (election under s t have NOT filed Form 5768 (election ur	` ''	•	•
	, ,, ,	s," to Form 990, Part IV, Line 5 (Pro	,	•	•
	ction 501(c)(4), (5), or (6) organiz	•	ony run, or rorn	r ooo-be, iiiic ood (regurt	amy proxy taxy, then
Na	me of the organization			Employer iden	tification number
FRE	EEDOM HOUSE			12 1656647	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c	13-1656647) or is a section 527	organization.
1	-	ganization's direct and indirect politic	_		
2	Political expenditures	'	, 3	.	¢
3	Volunteer hours			r	Ψ
	V Oranteer mours				
Par	t I-B Complete if the or	ganization is exempt under s	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization und	er section 4955	▶	\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4720	O for this year?		┌ Yes
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c) except section 501	l(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	tion 527 exempt	function activities 🕨	\$
2	Enter the amount of the filing o	rganization's funds contributed to oth	ner organizations	for section 527	
	exempt funtion activities			▶	\$
3	Total exempt function expendit	tures Add lines 1 and 2 Enter here a	nd on Form 1120	-POL, line 17b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes ☐ No
5		nd employer identification number (EI			
		ion listed, enter the amount paid from re promptly and directly delivered to a			
		nttee (PAC) If additional space is ne			separate segregated
		, , , , , , , , , , , , , , , , , , , ,	,,,		
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from	(e) A mount of political
				filing organization's	contributions received and promptly and
			l	funds If none, enter -0-	I and promptly and

(a) Name	(b) A ddress	(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-

Grassroots non-taxable amount

Grassroots lobbying expenditures

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

	under section 501(h)).		section 501(c)(3) and file	ed Form 5768	(election
	Check fithe filing organization belongs to a Check fithe filing organization checked bo		l" provisions apply			
<u> </u>	Limits on Lobbying E (The term "expenditures" means a	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
С	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount columns	from the following table	ın both			
	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				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, ent	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er-O-				
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 repo	rtıng	┌ Yes ┌ No
	4-Year A (Some organizations that made a columns below. See t		ection do not l	havè to com		he five
	Lobbying Exp	enditures During	4-Year Averag	jing Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					

Sche	edule C (Form 990 or 990-EZ) 2009				Р	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)).	IOT fi	led F	orm	5768	3
		(;	a)		(b)	
		Yes	No	'	A mour	it
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	V olunteers?		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			
е	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		ı			1,552
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
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?					
Pai	rt III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01 (c)(5),	or s	ectio	n
	· · · · · · · · · · · · · · · · · · ·				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		[1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		[2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5				ectio	n
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".	II-A,	line 3	3 is		
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				
Ь	·	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				
P	art IV Supplemental Information		1			
Со	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and	d Part	II-B, lır	ne 11		
A IS	so, complete this part for any additional information Identifier Return Reference Explanat					

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DLN: 93493111006061

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

	<u> </u>	orni 990. F See separate instructions.	F	Lispection
	e of the organization DOM HOUSE		Employer identifica	tion number
			13-1656647	
ar	Torganizations Maintaining Donor Active organization answered "Yes" to Form 99		unds or Accounts	. Complete if
	0.3424.0 4	(a) Donor advised funds	(b) Funds and o	ther accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advi funds are the organization's property, subject to the o	_	or advised	┌ Yes ┌ I
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit			ΓYes ΓΙ
ar	Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990, Part I\	/, lıne 7.
	Purpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of a G	historically important certified historic struc i of a conservation	-
	easement on the last day of the tax year		Held at the	End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified his	toric structure included in (a)	2c	
d	Number of conservation easements included in (c) ac	equired after 8/17/06	2d	
	Number of conservation easements modified, transfe the taxable year - Number of states where property subject to conserva			during
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand		Г Yes
	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents during the year I	<u>-</u>
	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during the year 🟲 🕏 _	
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	ΓYes ΓΙ
	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's financial		
art	Organizations Maintaining Collection Complete if the organization answered "		or Other Similar	Assets.
-	If 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 fin	for public exhibition, education or research	ch in furtherance of pu	
_	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p provide the following amounts relating to these items	public exhibition, education, or research i		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$	
	(ii) Assets included in Form 990, Part X			
	If the organization received or held works of art, histofollowing amounts required to be reported under SFA:			
а	Revenues included in Form 990, Part VIII, line 1		► \$	

b Assets included in Form 990, Part X

Organizations Maintaining Co	llections of Art	<u>, Hist</u>	<u>tori</u>	<u>cal Tre</u>	easu	res, or C)the	<u>r Simila</u>	<u>r Asse</u>	ts (co	ontinued)
Using the organization's accession and othe items (check all that apply)	r records, check any	of the	e foll	owing th	at are	a signific	ant u	se of its c	ollection	ı	
Public exhibition		d	Γ	Loan or	rexch	ange prog	rams				
Scholarly research		e	Γ	Other							
Preservation for future generations											
Provide a description of the organization's co	ollections and explai	ın how	they	y further	the o	rganızatıor	ı's ex	cempt pur	ose in		
								nılar	Г	Yes	∏ No
t IV Escrow and Custodial Arrang	ements. Comple	te ıf t	the	organız	atıon			es" to Fo	rm 990	١,	
Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontrıbutı	ons o	r other ass	ets	not	Γ	Yes	Г No
If "Yes," explain the arrangement in Part XI	/ and complete the 1	followi	ng ta	able		Г			A mou	nt	
Beginning balance							1c				
Additions during the year						Ī	1d				
·						Ī	1e				
						ŀ	1f				
	orm 990, Part X. line	21?				L		1		Yes	□ No
•	, ,								,		,
		ansv	were	ed "Yes'	" to F	orm 990	. Par	t IV. line	10		
Endownient Fanasi Complete	(a)Current Year) Four Y	ears Back
Beginning of year balance	2,000,000		2	2,000,000							
Contributions											
Investment earnings or losses											
Grants or scholarships											
Other expenditures for facilities and programs											
Administrative expenses											
End of year balance	2,000,000		2	2,000,000							
Provide the estimated percentage of the yea	r end balance held a	ıs		'							
Board designated or quasi-endowment	%										
Permanent endowment 100 000 % %											
	ssion of the organiza	ation t	hat a	are held a	and ac	dministere	d for	the			
organization by		•								Yes	No
(i) unrelated organizations			•				•		3a(i)		Νο
• •									3a(ii)	<u> </u>	No
	•						•		3b		<u> </u>
					0 0:		10				
investments—Land, Buildings	s, and Equipme	iit. 56							1		
Description of investment						, ,		1 ' '		(d) B	ook value
_and		•									
Buildings		•									
			1			I	4 051	1	96 506		260 445
_easehold improvements		•				35	4,951		86,506		268,445
Leasehold improvements						35	4,951		86,306		200,445
·		· ·					7,243		514,391		192,852
	Using the organization's accession and other items (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's corpart XIV During the year, did the organization solicit cassets to be sold to raise funds rather than the sasets to be sold that the	Using the organization's accession and other records, check any items (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain part XIV During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as tive in the part IV, line 9, or reported an amount on Form 99 part IV, line 9, or reported an amount on Form 99 included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line If "Yes," explain the arrangement in Part XIV TV Endowment Funds. Complete if the organization in Part XIV TV Endowment Funds. Complete if the organization investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year end balance held a Board designated or quasi-endowment Permanent endowment Industriative expenses End of year balance Permanent endowment Industriative expenses on of the organization by (i) unrelated organizations If "Yes," to 3a(ii), are the related organizations listed as required pescribe in Part XIV the intended uses of the organization's end to I Investments—Land, Buildings, and Equipment and the possession of investment and the organization's end to I Investments—Land, Buildings, and Equipment and I Investments—I Investments—I Investments—I Investments—I Investments—I Investments—I Investments—I Investments—I Investments—I Investments—	Using the organization's accession and other records, check any of the items (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how Part XIV During the year, did the organization solicit or receive donations of art assets to be sold to raise funds rather than to be maintained as part of Part IV, line 9, or reported an amount on Form 990, Part XIV line 9, or reported an amount on Form 990, Part XIV and complete the following the organization and agent, trustee, custodian or other intermediary included on Form 990, Part XIV and complete the following the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV and complete the following balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV ***********************************	Using the organization's accession and other records, check any of the folititems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they Part XIV During the year, did the organization solicit or receive donations of art, his assets to be sold to raise funds rather than to be maintained as part of the Part IV, line 9, or reported an amount on Form 990, Part X Is the organization an agent, trustee, custodian or other intermediary for cincluded on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following to the organization and using the year Distributions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV **TV*** Endowment Funds. Complete if the organization answers (a) Current Year (b) Pror Beginning of year balance Contributions Contributions Contributions Contributions Contributions Contributions Contributions Contributions Conditions Contributions Contributions	Using the organization's accession and other records, check any of the following thems (check all that apply) Public exhibition Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further Part XIV During the year, did the organization solicit or receive donations of art, historical trassets to be sold to raise funds rather than to be maintained as part of the organization? Escrow and Custodial Arrangements. Complete if the organization? Part IV, line 9, or reported an amount on Form 990, Part X, line 2 If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV TV Endowment Funds. Complete if the organization answered "Yes Beginning of year balance 2,000,000 2,000,000 Contributions	Using the organization's accession and other records, check any of the following that a retiteris (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization and explain how they further the organization assets to be sold to raise funds rather than to be maintained as part of the organization's explored and amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions of included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Ending balance Additions during the arrangement in Part XIV ***********************************	Using the organization's accession and other records, check any of the following that are a significitems (check all that apply) Public exhibition Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization assets to be sold to raise funds rather than to be maintained as part of the organization is collection. The maintained as part of the organization answere Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assembled on Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Ending balance Additions during the year Distributions during the year Distributions during the year Ending balance (a)Cument Year (b)Prior Year (c)Two Years Bad (a)Cument Year (b)Prior Year (c)Two Years Bad (a)Cument Year (c)Two Yea	Using the organization's accession and other records, check any of the following that are a significant uterms (check all that apply) Public exhibition Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's expart XIV During the year, did the organization solicit or receive donations of ert, historical treasures or other assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part XIV Burng the year, did the organization solicit or receive donations of ert, historical treasures or other assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part XIV IV Escrow and Custodial Arrangements. Complete if the organization answered "Ye Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Let Additions during the year In Use organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Fundowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV If "Yes and the organization in the organization answered "Yes" to Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV In the organization of the organization that are held and administered for organization by the part of the organization that are held and administered for organization by the part of the organization of the organization that are held and administered for organization by the part XIV the intended uses of the	Using the organization's accession and other records, check any of the following that are a significant use of its others (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpler than 1 to be sold to raise funds rather than to be maintained as part of the organization's collection? EXV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form Part IV, line 9, or reported an amount on Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Did the organization include an amount on Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV TV Endowment Funds. Complete if the organization answered "Yes" to Form 990. Part IV, line 9, or received an amount on Form 990, Part X, line 21. Try se," explain the arrangement in Part XIV TV Endowment Funds. Complete if the organization answered "Yes" to Form 990. Part IV, line 9, or received an amount on Form 990, Part X, line 21. In the organization include an amount on Form 990, Part X, line 21. Try se," explain the arrangement in Part XIV TV Endowment Funds. Complete if the organization answered "Yes" to Form 990. Part IV, line 9, or received and programs. (a) Cuntributions Contributions C	Using the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply) Public exhibition	Using the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply) Fulfic exhibition Scholarly research Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV Beginning the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? If yes If yes If yes Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an assent, trustee, custodian or other intermediary for contributions answered "Yes" to Form 990, Part X, line 21. Is the organization answered "Yes" to Form 990, Part X, line 21. If the organization answered "Yes" to Form 990, Part X, line 21. If yes are also during the year Ending balance Additions during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year Ending balance If yes are also during the year and balance and are also during the year and balance and year balance are also during the year and balance held are also designated or quasi-endowment Port and year balance If yes are also during the year and balance held are also designated or quasi-endowment Port and year balance If yes are also during the year and balance held are also designated or quasi-endowment Port and year ba

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation	
(including name of security)	(b)Book value	Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12	
Part VIII Investments—Program Related. See		(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III		1 00-	
(a) Descrip	tion	(b) Book value	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability			
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		

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
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	 turn
1 Total revenue, gains, and other support per audited financial statements	1	34,578,850
A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)		
e 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		
a 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
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	33,511,970
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per F	
1 Total expenses and losses per audited financial statements	1 1	33,923,019
2 A mounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments	1	
c Other losses	1	
d Other (Describe in Part XIV) 2d 252,286	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:		
a 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 expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	32,976,608
Part XIV Supplemental Information		

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

Par	General Information on Activities Outside the United States. Complete if the organization answered "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	

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 add	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	e. see the Instruc	tions for Form 990.	Cat No 50082W Scho	edule F (Form 990) 2009

(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 i se or counsel has pro					54
3 Enter total n	umber of other o	rganızatıons or er	itities				. ▶	0

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	r-1 (roilli 990) ii ad	ullional 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 A frica	12	13,850	Wire and/or Cash Transfers			
Humanitarian Grant	Middle East and North Africa	1		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			

Schedule F (Form 990) 2009

Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.									
Identifier	ReturnReference	Explanation							
Procedure for Monitoring Grants Outside the U S		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 Schade	ule E Part II	- Grants or Entiti	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			
		Middle 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	9,405	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	6,074	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	6,615	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	13,143	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	6,800	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	7,439	Wire and/or cash transfers			
		Middle 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	7,381	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	8,731	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	6,002	Wire and/or cash transfers			
		Middle East and North Africa	Supporting human rights and/or rule of law	12,079	Wire and/or cash transfers			
		Middle 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		Wire and/or cash transfers			
			Supporting human rights and/or rule of law		Wire and/or cash transfers			
		Sub-Saharan Africa	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		Sub-Saharan Afrıca	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		Sub-Saharan Afrıca	Supporting human rights and/or rule of law		Wire and/or cash transfers			
		South America	Supporting human rights and/or rule of law		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 valuatıon (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	5,500	Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law	20,000	Wire and/or cash transfers			
		East Asia and the Pacific	Supporting human rights and/or rule of law	26,100	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			
		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		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	Supporting human rights and/or rule of law	7,400	wire and/or cash transfers			
		Europe (Including Iceland & Greenland)	Supporting human rights and/or rule of law	13,000	wire and/or cash transfers			

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DLN: 93493111006061

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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 **Inspection**

Name of the organization						Employer identifica	ation number
FREEDOM HOUSE	13-1656647						
Part I General Infor	mation on Gra	nts and Assistance					
the selection criteria use Describe in Part IV the	ed to award the gra organization's proc	substantiate the amount of t nts or assistance? edures for monitoring the us	e of grant funds in the	United States			√ Yes ┌
Part II Grants and Ot Form 990, Part Part IV and Sch	IV, line 21 for a	e to Governments and ny recipient that receive 990) if additional space	d more than \$5,000	. Check this box if n	o one recipient receiv	ved more than \$5,00	00. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(5)	(h) Purpose of gran or assistance
2 Enter total number of se	ction 501(c)(3) and	d government organizations				·	

	,		
Part III	Grants and Other Assistance to Individuals in the United State	s. Complete if the organization answered "Yes" to Form	n 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

DLN: 93493111006061

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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.

Name of the organization FREEDOM HOUSE

Employer identification number

13-1656647

Pai	It I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ide any relevant information regarding these items			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement orprovision of all the expenses des			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		,	2		
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all Compensation committee					
	Independent compensation consultant	ر حا	, ,			
		on consultant Compensation survey or study Approval by the board or compensation committee on listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization				
	1 offit 990 of other organizations	ear, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization				
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a		Νo
ь	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII					
	subject to the initial contract exception described in Part III	in Regs	section 53 4958-4(a)(3)? If "Yes," describe			
_				8		No
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	ne rebutta	able 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)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name			W-2 and/or 1099-MI	SC compensation (iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior
		(i) Base compensation	incentive compensation	reportable compensation	compensation		()()	Form 990 or Form 990-EZ
	(ı) (ıı)	169,999 0	0	0 0	17,000 0	10,479 0	197,478 0	0 0
	(ı) (ıı)	154,000 0	2,000 0	0	15,400 0	10,479 0	181,879 0	0 0
Q uoc-Huy Nguyen	(i) (ii)	146,033 0	750 0	0 0	14,603 0	13,910 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

|--|

Schedule J (Form 990) 2009

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization FREEDOM HOUSE

Employer identification number

13-1656647

Pa	Title Types of Property							
		(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	аррпсавіе		± 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			·				
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization comp				29		. I	
30a	During the year, did the organize	ation receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it		Yes	No
	must hold for at least three year	rs from the o	date of the initial contribution	on, and which is not required	d to be used			
	for exempt purposes for the ent	re holding p	eriod?			30a		No
b	If "Yes," describe the arrangem	ent in Part 1	I					
31	Does the organization have a gr	ft acceptano	ce policy that requires the r	eview of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell r	non-cash • • • • •	32a		N o
b	If "Yes," describe in Part II							
33	If the organization did not repor describe in Part II	t revenues i	n column (c) for a type of p	roperty for which column (a	ıs 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

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DLN: 93493111006061

OMB No 1545-0047

Inspection

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information. ► Attach 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

Identifier	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

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

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

Part III Identific because I				s a Partnership (C d as a partnership d			wered "	'Yes" c	n For	m 990, F	Part IV, line	34	
(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) Disproprtionate allocations?		Disproprtionate Code V—UBI		(j) General of managi partne	
								Yes	No			Yes	No
				s a Corporation or s treated as a corpor			ar.)		ed "Y	es" on Fo	orm 990, Pa	art IV,	
(a) Name, address, and EIN o	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)	(f) Share o Incor	f total	Sh end-	(g) nare of -of-year essets	(h) Percentage ownership		

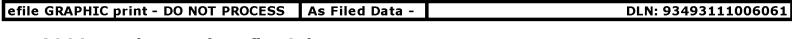
(6)

Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV	, line 34, 35, or 36.)				
Not e.	Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No	
1 During t	he tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-	IV?				
a Rece	pt of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty		1a		No	
b Gıft,	grant, or capital contribution to other organization(s)		1b		No	
c Gift,	grant, or capital contribution from other organization(s)		1 c		No	
d Loan	s or loan guarantees to or for other organization(s)		1d		No	
e Loan	s or loan guarantees by other organization(s)		1e		No	
f Sale	of assets to other organization(s)		1f		No	
g Purcl	nase of assets from other organization(s)		1 g		No	
h Exch	ange of assets		1h		No	
i Lease	of facilities, equipment, or other assets to other organization(s)		1i		No	
j Lease	of facilities, equipment, or other assets from other organization(s)		1j		No	
k Perfo	rmance of services or membership or fundraising solicitations for other organization(s)		1k		No	
I Perfo	Performance of services or membership or fundraising solicitations by other organization(s)					
m Sharing of facilities, equipment, mailing lists, or other assets						
n Shar	n Sharing of paid employees					
o Reim	bursement paid to other organization for expenses		10	Yes		
p Reim	bursement paid by other organization for expenses		1 p		No	
q Othe	r transfer of cash or property to other organization(s)		1 q		No	
r Othe	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 thres	holds			
	(a) Name of other organization	(b) Transaction type(a-r)	Amount	(c) : involve	·d	
(1) Freedom	House Hungary	0		15	9,001	
<u> </u>	onal Data Table					
(2)						
(3)						
(4)						
(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)	(d Are parti sect 501(d organiz	ners ion :)(3) ations?	(e) Share of end-of-year assets) ortionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General managır 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

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493111006061

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