

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)

Department of the Treasury
Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
 Please use IRS label or print or type. See Specific Instructions.
FreedomWorks, Inc.
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
601 Pennsylvania Avenue, NW, N. Building 700
 City or town, state or country, and ZIP + 4
Washington, DC 20004

D Employer identification number
52-1349353

E Telephone number
202-783-3870

F Accounting method Cash Accrual
 Other (specify) _____

G Website: **www.freedomworks.org**

J Organization type (check only one) 501(c) (4) (insert no.) 4947(a)(1) or 527

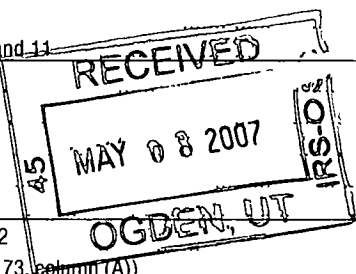
K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **6,165,233.**

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number **N/A**
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

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

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	5,862,198.		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d			
e	Total (add lines 1a through 1d) (cash \$ 5,862,198. noncash \$ _____)	1e		5,862,198.	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4		25,168.	
5	Dividends and interest from securities	5			
6 a	Gross rents See Statement 1	6a	132,918.		
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a	6c		132,918.	
7	Other investment income (describe _____)	7			
8 a	Gross amount from sales of assets other than inventory	(A) Securities (B) Other			
b	Less: cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c			
8d					
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c			
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
11	Other revenue (from Part VII, line 103)	11		144,949.	
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		6,165,233.	
13	Program services (from line 44, column (B))	13		5,461,994.	
14	Management and general (from line 44, column (C))	14		638,331.	
15	Fundraising (from line 44, column (D))	15		406,873.	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses. Add lines 16 and 44, column (A)	17		6,507,198.	
18	Excess or (deficit) for the year Subtract line 17 from line 12	18		<341,965.>	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,608,320.	
20	Other changes in net assets or fund balances (attach explanation)	20		<14,560.>	
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		1,251,795.	



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Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/> 22a				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/> 22b				
23 Specific assistance to individuals (attach schedule) 23				
24 Benefits paid to or for members (attach schedule) 24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A Stnt 4 25a	353,612.	198,647.	74,317.	80,648.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B 25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 25c				
26 Salaries and wages of employees not included on lines 25a, b, and c 26	561,640.	342,668.	191,771.	27,201.
27 Pension plan contributions not included on lines 25a, b, and c 27	17,528.	11,203.	5,790.	535.
28 Employee benefits not included on lines 25a - 27 28	61,196.	37,377.	19,232.	4,587.
29 Payroll taxes 29	53,964.	29,543.	17,642.	6,779.
30 Professional fundraising fees 30	62,336.	62,336.		
31 Accounting fees 31	30,318.	6,755.	23,563.	
32 Legal fees 32	80,158.	2,333.	77,825.	
33 Supplies 33	8,238.	2,632.	5,311.	295.
34 Telephone 34	45,915.	33,121.	9,505.	3,289.
35 Postage and shipping 35	73,442.	10,309.	2,384.	60,749.
36 Occupancy 36	288,621.	158,052.	94,325.	36,244.
37 Equipment rental and maintenance 37	9,967.	5,395.	2,989.	1,583.
38 Printing and publications 38	135,877.	30,918.	1,934.	103,025.
39 Travel 39	126,729.	107,206.	9,090.	10,433.
40 Conferences, conventions, and meetings 40	5,439.	5,339.	100.	
41 Interest 41				
42 Depreciation, depletion, etc. (attach schedule) 42	18,950.	10,375.	6,195.	2,380.
43 Other expenses not covered above (itemize) a 43a b 43b c 43c d 43d e 43e f 43f g See Statement 3 43g	4,573,268.	4,407,785.	96,358.	69,125.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) 44	6,507,198.	5,461,994.	638,331.	406,873.

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

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

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

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

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

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

What is the organization's primary exempt purpose? ► <u>See Statement 5</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	
a Federal and State Campaigns: Advocacy, research and education on reforming Federal and state policies in areas such as taxation, social security, spending policy, litigation reform, and other related issues.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	5,198,677.
b Public Affairs: Advocacy, research and education on how reducing Federal regulations will improve the economy by disseminating information through print, broadcast media, and on-line education.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	134,881.
c Other Programs: Various programs aimed at promoting consumer-focused economic policies through education and research in both domestic and international economic markets.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	128,436.
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	5,461,994.

Form **990** (2006)

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	766,128.	45	288,747.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	47a 375,690.		
	b Less: allowance for doubtful accounts	47b 2,812.	47c	372,878.
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	154,169.	53	273,140.
	54 a Investments - publicly-traded securities Stmt 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	192,039.	54a	139,434.
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
55 a Investments - land, buildings, and equipment - basis	55a			
b Less: accumulated depreciation	55b	55c		
56 Investments - other	See Statement 6	357,840.	56	0.
57 a Land, buildings, and equipment - basis	57a 646,330.			
b Less: accumulated depreciation Stmt 7	57b 511,075.	84,393.	57c	135,255.
58 Other assets, including program-related investments (describe ▶ Due from related parties)		135,938.	58	909,610.
59 Total assets (must equal line 74) Add lines 45 through 58		2,163,995.	59	2,119,064.
Liabilities	60 Accounts payable and accrued expenses	447,259.	60	691,437.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶ See Statement 8)		108,416.	65
66 Total liabilities. Add lines 60 through 65		555,675.	66	867,269.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	1,158,320.	67	1,183,457.
	68 Temporarily restricted	450,000.	68	68,338.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		1,608,320.	73	1,251,795.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		2,163,995.	74	2,119,064.

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

a	Total revenue, gains, and other support per audited financial statements	a	6,150,673.
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify). <u>Net unrealized investment losses</u>	b4	<14,560.>
	Add lines b1 through b4	b	<14,560.>
c	Subtract line b from line a	c	6,165,233.
d	Amounts included on Part I, line 12, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	0.
e	Total revenue (Part I, line 12) Add lines c and d	e	6,165,233.

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

a	Total expenses and losses per audited financial statements	a	6,507,198.
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	0.
c	Subtract line b from line a	c	6,507,198.
d	Amounts included on Part I, line 17, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	0.
e	Total expenses (Part I, line 17) Add lines c and d	e	6,507,198.

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Matt Kibbe 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	President 18.00	116,755.	8,021.	4,538.
Judy Mulcahy 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	Vice President/Treasurer 18.00	53,477.	6,779.	873.
Jaci Brown 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	Vice President/Secretary 18.00	54,013.	6,203.	2,120.
Honorable Richard K. Armey 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	Board Member 4.00	100,833.	0.	0.
Honorable James H. Burnley, IV 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	Board Member 1.00	0.	0.	0.
Thomas Knudsen 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	Board Member 1.00	0.	0.	0.
Richard J. Stephensen 601 Pennsylvania Ave, NW #700 North Washington, DC 20004	Board Member 1.00	0.	0.	0.

Part VI Other Information (continued)	Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82a	X
82b	N/A	
83 a Did the organization comply with the public inspection requirements for returns and exemption applications? b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83a	X
83b	N/A	
84 a Did the organization solicit any contributions or gifts that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84a	X
84b	X	
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85a	X
85b	X	
85c	N/A	
85d	N/A	
85e	N/A	
85f	N/A	
85g	N/A	
85h	N/A	
86 501(c)(7) organizations Enter. a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities	86a	N/A
86b	N/A	
87 501(c)(12) organizations. Enter. a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)	87a	N/A
87b	N/A	
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88a	X
88b	X	
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under: section 4911 <u>N/A</u> ; section 4912 <u>N/A</u> ; section 4955 <u>N/A</u> b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u> d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u> e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? <u>N/A</u>	89a	X
89b	X	
89c	0.	
89d	0.	
89e	X	
89f	X	
89g	N/A	
90 a List the states with which a copy of this return is filed <u>See Statement 12</u> b Number of employees employed in the pay period that includes March 12, 2006	90b	23
91 a The books are in care of <u>The Organization</u> Telephone no. <u>(202) 783-3870</u> Located at <u>Organization's address, Washington, DC</u> ZIP + 4 <u>20004</u> b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X

Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

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

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	25,168.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	132,918.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>List Rental</u>			15	18,443.	
b <u>Affinity Program</u>			15	126,344.	
c <u>Other Revenue</u>			01	162.	
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		303,035.	0.
105 Total (add line 104, columns (B), (D), and (E))					303,035.

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

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

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

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

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Natu	(D)	(E)
Citizens for a Sound Economy, Inc. - 601 Pennsylvania Ave., NW #700N, Washington	100%	Dormant		

Part X Information Regarding Transfers Associated

(a) Did the organization, during the year, receive any funds, directly or indirectly,
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on
Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	X

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

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

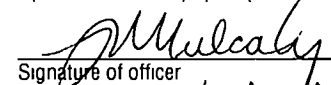
Yes	No
	X

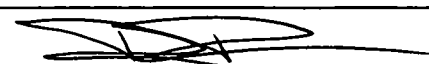
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	X

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

Please Sign Here:  Date: 5/2/07
 Signature of officer: _____
 Type or print name and title: Judith M. Mulcahy, Treasurer

Paid Preparer's Use Only: Preparer's signature:  Date: 5-2-07 Check if self-employed: Preparer's SSN or PTIN (See Gen Inst X): _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: Rogers & Company PLLC
 8300 Boone Boulevard, Suite 600
 Vienna, Virginia 22182
 EIN: _____ Phone no.: (703) 893-0300

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	Various property and equipment	Varies	SL	.000	16	646,330.			646,330.	511,075.		0.
	* Total 990 Page 2					646,330.		0.	646,330.	511,075.	0.	0.
	Depr											

Form 990	Rental Income	Statement	1
Kind and Location of Property		Activity Number	Gross Rental Income
Subleasing of facilities		1	132,918.
Total to Form 990, Part I, line 6a			132,918.

Form 990	Other Changes in Net Assets or Fund Balances	Statement	2
Description			Amount
Net unrealized loss on investments			<14,560.>
Total to Form 990, Part I, line 20			<14,560.>

Form 990	Other Expenses			Statement	3
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising	
Professional fees	130,226.	70,602.	27,596.	32,028.	
Advertising	4,285,167.	4,277,727.	6,765.	675.	
Insurance	21,564.	11,810.	7,049.	2,705.	
Noncapital expenses	8,311.	1,414.	6,897.		
Rentals	16,122.	8,418.	2,423.	5,281.	
Miscellaneous	22,605.	6,799.	14,291.	1,515.	
Novelties	525.	525.			
Dues	2,029.	983.	226.	820.	
Photography	310.	310.			
Subscriptions	7,255.	4,305.	2,922.	28.	
Database management	49,706.	23,633.		26,073.	
Computer services	26,134.	964.	25,170.		
Clipping services	295.	295.			
Payroll fees	3,019.		3,019.		
Total to Fm 990, ln 43	4,573,268.	4,407,785.	96,358.	69,125.	

Name of Officer, etc.	Compensation	Employee Ben. Plans	Expense Accounts	Totals
Honorable Richard K. Arney	100,833.			100,833.
A. Program Services	87,032.			87,032.
B. Management and General	5,778.			5,778.
C. Fundraising	8,023.			8,023.

Total Program Services				198,647.
Total Management and General				74,317.
Total Fundraising				80,648.
Total Officer, etc., Compensation Included on Part II, Line 25a				353,612.

Form 990	Statement of Organization's Primary Exempt Purpose Part III	Statement	5
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Explanation

Public policy, advocacy and educational organization that supports consumers freedom of choice in a market economy.

Form 990	Other Investments	Statement	6
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Description	Valuation Method	Amount
	Cost	0.
Total to Form 990, Part IV, line 56, Column B		0.

Form 990	Depreciation of Assets Not Held for Investment	Statement	7
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Description	Cost or Other Basis	Accumulated Depreciation	Book Value
Various property and equipment	646,330.	511,075.	135,255.
Total to Form 990, Part IV, ln 57	646,330.	511,075.	135,255.

Form 990	Other Liabilities	Statement	8
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Description	Amount
Deferred rent	169,862.
Capital lease obligations	5,970.
Total to Form 990, Part IV, line 65, Column B	175,832.

Form 990	Non-Government Securities	Statement	9
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Security Description	Cost/FMV	Corporate Stocks	Corporate Bonds	Other Publicly Traded Securities	Total Non-Gov't Securities
Money market funds	FMV			139,434.	139,434.
To Form 990, line 54a, Col B				139,434.	139,434.

Form 990	Identification of Related Organizations Part VI, Line 80b	Statement	10
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Name of Organization	Exempt	NonExempt
FreedomWorks Foundation, Inc.	X	
FreedomWorks Political Action Committee	X	
Oregon CSE Political Action Committee	X	
Taxpayer Defense Fund	X	
Citizens for PERS Reform	X	
The FreedomWorks Fund	X	
League of Freedom Voters	X	
CSE FreedomWorks, Inc.	X	
Judicial Integrity Coalition	X	
Citizens for a Sound Economy, Inc.		X

Form 990

Part V-A Officer Compensation from
Related Organizations

Statement 11

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Matt Kibbe	165,126.	11,344.	6,418.
<u>Name of Related Organization</u>		<u>Employer ID Number</u>	
FreedomWorks Foundation, Inc.		52-1526916	
<u>Relationship Between Organizations</u>			
Historical relationship/common officers and board members			
<u>Compensation Description</u>			
Employee compensation			

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Jaci Brown	76,390.	8,773.	2,998.
<u>Name of Related Organization</u>		<u>Employer ID Number</u>	
FreedomWorks Foundation, Inc.		52-1526916	
<u>Relationship Between Organizations</u>			
Historical relationship/common officers and board members			
<u>Compensation Description</u>			
Employee compensation			

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Honorable Richard K. Armev	403,333.		
<u>Name of Related Organization</u>		<u>Employer ID Number</u>	
FreedomWorks Foundation, Inc.		52-1526916	
<u>Relationship Between Organizations</u>			
Historical relationship/common officers and board members			
<u>Compensation Description</u>			
Non-employee compensation			

<u>Officer's Name</u>	<u>Compensation</u>	<u>Employee Benefit Plan Contribution</u>	<u>Expense Account</u>
Judy Mulcahy	75,632.	9,586.	1,235.
<u>Name of Related Organization</u>		<u>Employer ID Number</u>	
FreedomWorks Foundation, Inc.		52-1526916	
<u>Relationship Between Organizations</u>			
Historical relationship/common officers and board members			
<u>Compensation Description</u>			
Employee compensation			

Form 990

List of States Receiving Copy of Return
Part VI, Line 90

Statement 12

States

AL, AK, AR, AZ, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NJ, NM, NY, NC, ND, OH, OK, OR, NH, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, NH