## MUR746400190

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From: <u>Aaron Rabinowitz</u>
To: <u>CELA Docket</u>

Subject: MUR 7464 - For Permanent File

Date: Tuesday, January 11, 2022 9:15:12 AM

Attachments: Complaint Hyperlink-2018 IFN Form 990.pdf

This is a hyperlink from the Complaint to be added to the permanent file.

Thank you,

Aaron S Rabinowitz Attorney Federal Election Commission Office of General Counsel 1050 First Street, N.E. Washington, DC 20002 (202) 694-1476 PHOTOCOPY

efile	GR	APHIC p	orint - DO NOT PROCESS ORIGINAL DATA - Production		DLN	: 93	493319180079			
orm	90	00	Return of Organization Exempt From	Income	Tax	-	OMB No. 1545-0047			
-orm•	<i>-</i>		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		•	5)	2018			
Year and	nné ař	the Transcer	Do not enter social security numbers on this form as it may be made public.  Open to P							
		the Treasury ue Service	▶ Go to <u>www.irs.gov/Form990</u> for instructions and the l	atest informa	ation.		Inspection			
			lendar year, or tax year beginning 01-01-2018 , and ending 12-31 C Name of organization	-2018	D Employer id	lenti	ication number			
B Check if applicable:  Address change			Independence and Freedom Network							
CI Nar				82-115308	1	•				
[] Init			Doing business as							
		n/terminated d return	Number and street (or P.O. box if mail is not delivered to street address) Room/sui	ta .	E Telephone nu	mbei	•			
		on pending	PO Box 25342	***						
			City or town, state or province, country, and ZIP or foreign postal code Alexandria, VA 22313		G Gross receip	ts \$ 2	.936.702			
			F Name and address of principal officer:	H(a) Is this	a group return					
			• •		inates?	1 101	□Yes ⊠No			
			PO Box 25342 Alexandria, VA 22313		subordinates		□ Yes ☑No			
Tax-exempt status:				includ	ed? ." attach a list.	Inna				
					exemption nu	•	•			
) We	ebsil	te:► N/A		me oroup	CACHIPLION	,,,,,,,,,				
К Гогт	ofo	rganizat on:	☑ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of forma	tion: M	State	of legal domicile:			
					<u> </u>					
P'a	ıt I	Sum								
	1. 1	Independe	cribe the organization's mission or most significant activities; nce and Freedom Network was founded to promote solutions to pressing p	ublic policy pro	blems related	to in	dividual liberty and			
8	1	the expans								
E	-									
en G										
Activities & Governance			s box $\blacktriangleright \square$ if the organization discontinued its operations or disposed of m	ore than 25%	of its net asse		1 .			
***			f voting members of the governing body (Part VI, line 1a)			3				
es S			f independent voting members of the governing body (Part VI, line 1b) .		•	4	<u> </u>			
M			ber of individuals employed in calendar year 2018 (Part V, line Za)		•	5				
ğ			ber of volunteers (estimate if necessary)		•	7a	<u> </u>			
			elated business revenue from Part VIII, column (C), line 12			7b	<u> </u>			
	b	Net unrela	ated business taxable income from Form 990-T, line 34			/ 10	Current Vone			
	_		75 A170 A170	Pri	or Year		Current Year			
3			ions and grants (Part VIII, line 1h)				2,936,70			
Ravenue		_	service revenue (Part VIII, line 2g)							
Ro			nt income (Part VIII, column (A), lines 3, 4, and 7d)							
	l		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				2,936,70			
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			ļ	2,228,42			
			d similar amounts paid (Part IX, column (A), lines 1–3)				2,220,72			
		,	paid to or for members (Part IX, column (A), line 4)		<u></u>					
Expenses		•	other compensation, employee benefits (Part IX, column (A), lines 5–10)				<u> </u>			
6			nal fundraising fees (Part IX, column (A), line 11e)		.,					
8			eising expenses (Part IX, column (D), line 25) >0 enses (Part IX, column (A), lines 11a-11d, 11f-24e)			<b></b>	594,35			
,	l		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)				2,822,77			
	i	*	• • • • • • • • • • • • • • • • • • • •				113,92			
L 99	13	Revenue I	less expenses. Subtract line 18 from line 12	of Current Year	<del> </del>	End of Year				
Net Assets or Fund Balances					,					
25	20	Total asse	ets (Part X, line 16)				113,92			
4 B	21	21 Total liabilities (Part X, line 26)								
žĒ	22	Net asset	s or fund balances. Subtract line 21 from line 20				113,92			
Pa	rt II	Signa	nture Block				-			

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.

Sign Here	Sig Ray	nature of off cer  y McVeigh Director be or print name and title			2019-11-15 Date	
Paid		Print/Type preparer's name	Preparer's signature	Date	Check I if self-employed	PTIN P01377405
Prepar		Firm's name Total Business So	lutions		Firm's EIN > 3	0-0595434
Use Or	nly	Firm's address > 4515 Perrin Street Grove City, OH 4	•		Phone no. (614	) 537-0956
May the II	RS discu	uss this return with the preparer	shown above? (see instructions) .	* * . * 4		. Yes Ino
For Pape	rwork	Reduction Act Notice, see the	separate instructions.	Cat.	No. 11282Y	Form <b>990</b> (2018)

rorm	990 (	2018)				Page					
Pa	rt III	Statement of Progran	n Service Accomplis	hments							
		Check if Schedule O contain	s a response or note to	any line in this Part III	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>					
1	Briefl	y describe the organization's	mission:		-						
		ce and Freedom Network was of personal freedom.	founded to promote sol	utions to pressing publ	ic policy problems related to individ	ual liberty and the					
2	Did ti	ne organization undertake any	significant program ser	vices during the year w	which were not listed on						
	the p	rior Form 990 or 990-EZ? .				□Yes ☑No					
	If "Ye	es," describe these new servic	es on Schedule O.								
3	Did ti	he organization cease conduct	ing, or make significant	changes in how it cond	ucts, any program						
	servi	services?									
	If "Ye	s," describe these changes or	Schedule O.								
4	Section		rganizations are required		largest program services, as meas of grants and allocations to others,						
4a	(Code	: ) (Expens	es \$ 1,282,645	including grants of \$	1,100,000 ) (Revenue \$	)					
	Suppo	orting programs and policies that w	ill improve Amer can safety	and secur ty							
4b	(Code	: ) (Expens	es \$ 913,020	including grants of \$	850,000 ) (Revenue \$	)					
	•	commun cat ons related to econor				•					
4c	(Code	; ) (Expens	es \$ 402,400	including grants of \$	278,425 ) (Revenue \$	)					
	Comm	nunications regarding issues related	to honesty in government								
4d	Other	r program services (Describe	n Schedule O.)								
	(Expe	enses \$	including grants of	\$	) (Revenue \$	)					
4e	Tota	l program service expense	2,598,0	65							
						Form <b>990</b> (201					

Part IV

**Checklist of Required Schedules** 

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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	Yes	
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7	•	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.		-	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
b	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	11b		No
С	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	11c		No
đ	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	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No.
f	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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
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(see instructions)	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
	A. 2	Į.	orm <b>99</b>	0 (2018

Par	rt IV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		No
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 lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
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 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			г
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	No
1-	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   0		res	INO
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	orm <b>99</b>	No (2018

Page 5 Form 990 (2018) 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 . . . . . . . . . . . . . . . . . . If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b No Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) За No 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . 3b No At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a No 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: >: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a No 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . No Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a No solicit any contributions that were not tax deductible as charitable contributions? . If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7c 7d If "Yes," indicate the number of Forms 8282 filed during the year . . . . . Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as **7**g . . . . . . . . . . . . . . If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 No 9a No 9a Did the sponsoring organization make any taxable distributions under section 4966? . 9b No Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: Gross income from members or shareholders . 11a Gross income from other sources (Do not net amounts due or paid to other sources 11b against amounts due or received from them.) . 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a No **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year. Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a No Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans . . . . 14a Did the organization receive any payments for indoor tanning services during the tax year? . 14a No 14b b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess 15 No parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. . . . Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Form 990 (2018)

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Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	,		lines
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	'		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	persons other than the governing body?	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		No
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
40-			Yes	No
	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b		No
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			
114	form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
a	The organization's CEO, Executive Director, or top management official	15a		No
b		15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		<del></del>
<u>Se</u> 17	List the States with which a copy of this Form 990 is required to be filed	· 		
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	***********		
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:  The organization PO Box 25342 Alexandria, VA 22313 (740) 617-4445			
				(2018)

Page :	7
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensæted employee	Former	MISC)	Misc)	related organizations
(1) Ray McVeigh	2.00	x						o	. 0	
Director	0.00		<u> </u>				<u></u>	, in the second		
•										
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					<b>!</b>	***************************************				
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Form 990 (2018)

Dana	R
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	(A) Name and Title	(B) Average hours per week (list any hours for related	than c	ine b	ox, t in of tor/t	t che inle: ficer rust	and a	on	Reports Composition from the c	D) ortable ensation m the ation (W- 9-MISC)	(E) Reportable compensation from related organizations (\) 2/1099-MISC	N-	(F) Estima amount o compen from organizati	nted of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former					relat organiza	ed
				8			ži Ži							
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······································					-	<u> </u>	ļ					-		·····
c T	ub-Total . , . , . , otal from continuation sheets to Potal (add lines 1b and 1c)	art VII, Section	Α				<b>*</b>	<u> </u>					-	
2	Total number of Individuals (Including of reportable compensation from the	but not limited	to thos				e) who	rec	elved mo	re than \$1	00,000	···-\		
<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				Yes	No
3	Did the organization list any former line 1a? If "Yes," complete Schedule										employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of repositions of the sum	ortable ( 150,00	comp 07 <i>If</i>	ensa "Yes	ition	and o	ther e Sc	compen chedule J	sation from for such	the	4		No
5	Did any person listed on line 1a recei services rendered to the organization	ve or accrue cor ?If "Yes," comp	npensal lete Sch	ion fi edule	rom e J fa	any or su	unrela ich per	ted son	organiza	tion or indi	vidual for	5		No
Se	ction B. Independent Contract													
1	Complete this table for your five high from the organization. Report compe	est compensate nsation for the c	d indepo alendar	ender year	nt co end	ntra ling	octors with o	that r wit	received thin the c	more than rganization	\$100,000 of con's tax year.	npens		
	Name	(A) and business addre	ess				***************************************			Desc	(B) iption of services		Comper	
	otal number of independent contractor		not lim	ited t	o th	ose	listed	abov	ve) who i	eceived me	ore than \$100,00	0 of		·
	ompensation from the organization 🕨						***********	***************************************					Form 99	0 /2010

1/21/2020

Part				٠			·
	Check if Schedul	e O contains a respon	se or note to an	·	(B)	(C)	· · · LJ
				(A) Total revenue	Related or exempt function	Unrelated business revenue	Revenue excluded from tax under sections
	1a Federated campaigns	. 1a			revenue		512 - 514
\$ 5	<b>b</b> Membership dues .	115					•
Grants Amounts	c Fundraising events	<u> </u>					
200	d Related organizations	<u> </u>	***************************************				
Gifts, itar A	e Government grants (con	·	441				
Contributions, Gift and Other Similar	f All other contributions, g and similar amounts not above	LL	2,936,702				
Contributions, and Other Sim	g Noncash contribution in lines 1a - 1f:\$	s included		· •			
9	h Total. Add lines 1a-1	f * .	>	2,936,702			
			Busines	ss Code			
<b>E</b>	2a						
æ	b						
Program Service Revenue	с ———						
Š	d						
Ë	е	***************************************					
ğ	f All other program se	rvice revenue.					
Ĕ	9Total. Add lines 2a-2	f	•	0			
9	3 Investment income (in				o		
<b>3</b>	similar amounts) . 4 Income from investme			<b>&gt;</b>	0		
ě				<b>-</b>	0		
<u> </u>		(i) Real	(ii) Personal				
Other Revenue	6a Gross rents						·
	b Less: rental expenses						
	c Rental income or (loss)	***************************************					· ·
	d Net rental income o	(loss)	· · »		O		
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less: cost or other basis and sales expenses						
	C Gain or (loss) d Net gain or (loss)		<b>b</b>	<del>-</del>	o		
	8a Gross income from fi	undraising events of d on line 1c).					
	b Less: direct expense c Net income or (loss)	I	nts		0		
	9a Gross Income from g See Part IV, line 19	aming activities.	,				
	b Less: direct expense c Net income or (loss)	s b	· · · · ·		0		
	10aGross sales of invent returns and allowand						
	b Less: cost of goods s	old b				,	

Miscellaneous Revenue	Business Code			
		1 ·		
			-	
		·		
All other revenue				
Total. Add lines 11a-11d	>			

Form **990** (2018)

## Part IX Statement of Functional Expenses

Section	501(c)(3)	and 501(c)(4)	organizations must o	complete all columns.	All other organizations mus	t complete column (A).

	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,228,425	2,228,425		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4	Benefits paid to or for members	0			
. 5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section $4958(c)(3)(B)$	0			,
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
a	Management	176,000		176,000	
ŧ	Legal	48,372		48,372	
•	: Accounting	0			
	Lobbying	0	X.		
•	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0		·	
ç	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	340		340	
12	Advertising and promotion	40,000	40,000		
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			٠,
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			•
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		·.		
	a Grassroots Consulting	171,070	171,070		
	<b>b</b> Communications Consulting	98,200	98,200		
	c Data and Research	47,370	47,370		
	d Advertising Production	13,000	13,000		
	e All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	2,822,777	2,598,065	224,712	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form **990** (2018)

Balance Sheet

			(A) Beginning of year		(B) End of year
***********	Ti	Cash-non-interest-bearing	Doganing or jour	1	113,925
	2	Savings and temporary cash investments		2	0
	3	Pledges and grants receivable, net	, .	3	
	4	Accounts receivable, net		4	0
	5	Loans and other receivables from current and former officers, directors,			
	'	trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	0
ts ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L  Notes and loans receivable, net		6	0
ssets	7	<b></b>		8	0
SE	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities .		11	0
	12	Investments—other securities. See Part IV, line 11		12	0
	13	Investments—program-related. See Part IV, line 11		13	0
	14	Intangible assets		14	. 0
	15	Other assets. See Part IV, line 11		15	0
	16	Total assets.Add lines 1 through 15 (must equal line 34)	Ō	16	113,925
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Ø	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
iabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
9		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	***************************************
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24).  Complete Part X of Schedule D	· .	25	
	26	Total liabilities.Add lines 17 through 25	0	26	0
· vs	1	Organizations that follow SFAS 117 (ASC 958), check here ► 🗹 and			
Balances	27	Complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		27	113,925
翼	28	Temporarily restricted net assets	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	28	
T	29	Permanently restricted net assets	·	29	
Fund		Organizations that do not follow SFAS 117 (ASC 958),			
ö	30	check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	•
Ses	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets		Retained earnings, endowment, accumulated income, or other funds		32	
	32	Total net assets or fund balances	· · · · · · · · · · · · · · · · · · ·	33	113,925
Net	33		0	34	113,925
	34	Total liabilities and net assets/fund balances		34	Form <b>990</b> (2018

Forn	1 990 (2018)				Page 12
Pa	art XI Reconcilliation of Net Assets	····			
	Check if Schedule O contains a response or note to any line in this Part XI	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	,936,702
2	Total expenses (must equal Part IX, column (A), line 25)	2		2	,822,777
3	Revenue less expenses. Subtract line 2 from line 1	3			113,925
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0
5	Net unrealized gains (losses) on investments	5		~	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			113,925
Pε	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:				
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No .
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	igle	3a		No
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.	red	3b		
					(2010)

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Schedule B	Schedule of Contributors		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF.  Go to <u>www.irs.gov/Form990</u> for the latest information.		2018
Name of the organizat		Employer i	dentification number
Organization type (ch		82-1153081	
	Section:		•
Filers of:	Section.		
Form 990 or 990-EZ	501(c)(4) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	ation	
	☐ 527 political organization		
Form 990-PF	501(c)(3) exempt private foundation	,	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	1.	
	☐ 501(c)(3) taxable private foundation		
General Rule  For an organiz	21(c)(7), (8), or (10) organization can check boxes for both the General Rule and cation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributer property) from any one contributor. Complete Parts I and II. See instructions for	tions totaling	\$5,000 or more (in
Special Rules			
under sections received from a	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Form one contributor, during the year, total contributions of the greater of (1) \$5,000 ne 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	Part II, line 13	, 16a, or 16b, and that
during the year, purposes, or fo	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rectotal contributions of more than \$1,000 exclusively for religious, charitable, scient the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" e and address), II, and III.	ntific, literary,	or educational
during the year, If this box is che purpose. Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recontributions exclusively for religious, charitable, etc., purposes, but no such concecked, enter here the total contributions that were received during the year for an ecomplete any of the parts unless the <b>General Rule</b> applies to this organization beable, etc., contributions totaling \$5,000 or more during the year.	ntributions tot exclusively re ecause it rece	aled more than \$1,000. eligious, charitable, etc., aived <i>nonexclusively</i>
990-EZ, or 990-PF), but	on that isn't covered by the General Rule and/or the Special Rules doesn't file So t it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (I	H of its Form	rm 990, 990-EZ

	B (Form 990, 990-EZ, or 990-PF) (2018) organization		Page 2
Independe	ence and Freedom Network	Employer identificat	
Part I	Contributors (See Instructions) Use duplicate copies of Part I if addition	mal space is needed.	1
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	See Additional Data Table		Person
			Payroll Noncash
		\$	Noncash
			(Complete Part II
			for noncash contribution.)
(a)	(b)	(c)	(d) Type of
No.	Name, address, and ZIP + 4	Total contributions	contribution
			Person Payroll
			Noncash
		\$	
			(Complete Part II for noncash
			contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of
•		· Total Continuations	contribution Person
			Payroll
			Noncash
			(Complete Part II
			for noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
	-		Payroll Noncash
		. \$	Honcasii
			(Complete Part II
			for noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of
	ivanie, address, and zir + 4	i otal contributions	contribution
		·	Person Payroll
			Noncash _
		\$	<u> </u>
			(Complete Part II for noncash
(2)	. (15)		contribution.) (d)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	Type of
			contribution Person
			Payroll =
		\$	Noncash _
			(Complete Part II
			for noncash contribution.)
		Schedule B (Form 990, 990	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Page 3

Name of organiza		Employer identi	fication number	
ndependence and I	reedom Network	82-11	53081	
Part II No	ncash Property (See instructions). Use duplicate copies of Part II if additional space is no	s is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
-		<u> </u>	<del></del>	
(a) No. from Part I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
. =				
(a) No. from Part I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions)	(d) Date received	
_		<u> </u>	·	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) **Employer identification number** Name of organization Independence and Freedom Network 82-1153081 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more Part III than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) > \$ Use duplicate copies of Part III if additional space is needed. (a) (b) Purpose of gift (c) Use of gift (d) Description of how gift is held No. from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP 4 (a) (d) Description of how gift is held (c) Use of gift No. from (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Software ID: 18007222 Software Version: 2018v3.1

EIN: 82-1153081

Name: Independence and Freedom Network

Form 990 Schedule B, Part I - Contributors (See Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 352,000	Person ☑ Payroll ☐ Noncash ☐
·			(Complete Part II for noncash contribution.)
· <u>2</u>			Person 🗹 Payroll 🔲
		\$ 950,000	Noncash (Complete Part II for noncash
3			contribution.)  Person   Payroll
		\$ 800,000	Noncash (Complete Part II for noncash
4			contribution.) Person
		\$ 183,702	Payroll [
			(Complete Part II for noncash contribution.)  Person
<u>.</u> <u>5</u>		\$ 105,000	Payroll 🔲 Noncash 🗀
			(Complete Part II for noncash contribution.)  Person
<u>6</u>		\$ 275,000	Payroll
			Noncash (Complete Part II for noncash contribution.)
<u>7</u>			Person 📝 Payroll 🔲
		\$ 271,000	Noncash (Complete Part II for noncash contribution.)

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OMB No. 1545-0047

## SCHEDULE C

Department of the Treasury

## Political Campaign and Lobbying Activities

(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527 Open to Public Complete if the organization is described below. PAttach to Form 990 or Form 990-EZ. Internal Revenue Service ▶Go to www.irs.aov/Form990 for Instructions and the latest information. Inspection If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
 Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization Independence and Freedom Network Employer identification number 82-1153081 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) Volunteer hours for political campaign activities (see instructions) ...... Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ..... 1 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... 3 ☐ Yes □ No 4a Was a correction made? □ No ☐ Yes Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 2 1,120,000 function activities ...... Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... 3 1,120,000 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☑ No Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (e) Amount of political (b) Address (c) EIN (a) Name filing organization's contributions received and promptly and funds. If none, enter directly delivered to a -n-: separate political organization. If none, enter -0-. (1) Honor and Principles PAC 228 S Wash St Ste 115 82-4933172 270,000 Alexandria, VA 22314 (2) Onward Ohio Inc 155 East Main St Ste 260 850,000 Lexington, KY 40507

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

Cat. No. 50084S Schedule C (Form 990 or 990-EZ) 2018

II-A Complete if the organization is section 501(h)).  ck ▶ ☐ if the filing organization belongs to ar expenses, and share of excess lobbyin ck ▶ ☐ if the filing organization checked box	n affiliated group (and list				
expenses, and share of excess lobbyinck  If the filing organization checked box		in Part IV each af	filiated group i	nember's name.	addunes (TTA)
				Tieria Ber 5 Tierrie,	address, EIN,
I in the second addression	A and "limited control" pr	ovisions apply.			
The term "expenditures" means	g Expenditures s amounts paid or incu	rred.)	OI	(a) Filing rganization's totals	(b) Affiliated group totals
tal lobbying expenditures to influence public opini	ion (grass roots lobbying)				
tal lobbying expenditures to influence a legislative	e body (direct lobbying) .				
					<u> </u>
	m the following table in b	oth			
the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:		-	
t over \$500,000	20% of the amount on line	1e.		-	
er \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,000			
er \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the 6	excess over \$1,000,0	00.		
er \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the ex	cess over \$1,500,00	0.	Ì	
er \$17,000,000	\$1,000,000.				
4-Year A (Some organizations that made a	veraging Period Und	ler section 50: tion do not ha	l(h) ve to comp	lete all of the	Yes No
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
obbying nontaxable amount		·			
obbying ceiling amount 50% of line 2a, column(e))					
otal lobbying expenditures			<del></del> .		
rassroots nontaxable amount					
rassroots ceiling amount 50% of line 2d, column (e))					
rassroots lobbying expenditures					or 990-EZ) 2018
	tal exempt purpose expenditures (add lines 1c are between the purpose expenditures (add lines 1c are buying nontaxable amount. Enter the amount frownns.  the amount on line 1e, column (a) or (b) is: tover \$500,000  er \$500,000 but not over \$1,000,000  er \$1,000,000 but not over \$1,500,000  er \$1,500,000 but not over \$17,000,000  er \$17,000,000  assroots nontaxable amount (enter 25% of line 1 btract line 1g from line 1a. If zero or less, enter btract line 1f from line 1c. If zero or less, enter there is an amount other than zero on either line ction 4911 tax for this year?  4-Year A (Some organizations that made a columns below. See Lobbying Exp.	tal exempt purpose expenditures (add lines 1c and 1d)	ter exempt purpose expenditures (add lines 1c and 1d)	tal exempt purpose expenditures (add lines 1c and 1d)  bbying nontaxable amount. Enter the amount from the following table in both urns.  the amount on line 1e, column (a) or (b) is:  tover \$500,000  20% of the amount on line 1e.  er \$500,000 but not over \$1,000,000  \$100,000 plus 15% of the excess over \$500,000.  er \$1,000,000 but not over \$1,500,000  \$175,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000 but not over \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$17,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$17,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$17,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$17,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 5% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.  Er \$1,000,000  \$225,000 plus 10% of the excess over \$1,000,000.	ther exempt purpose expenditures (add lines 1c and 1d)

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).  For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity  Yes No	(b)
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity  Yes No	
activity Yes No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	
a Volunteers?	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	
c Media advertisements?	
d Mailings to members, legislators, or the public?	
e Publications, or published or broadcast statements?	
f Grants to other organizations for lobbying purposes?	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	
i Other activities?	
j Total. Add lines 1c through 1i	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	
b If "Yes," enter the amount of any tax incurred under section 4912	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).	
	Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 5 and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."	501(c)(6)
1 Dues, assessments and similar amounts from members	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
2a	
a Current year	
c Total	
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?	
5 Taxable amount of lobbying and political expenditures (see instructions)	
Part IV Supplemental Information	
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and instructions), and Part II-B, line 1. Also, complete this part for any additional information.	nd 2 (see
Return Reference Explanation	
Schedule C (Form 990 or 9	90EZ) 2018

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DLN: 93493319180079

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

201

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization Independence and Freedom Network ► Go to <u>www.irs.gov/Form990</u> for the latest information.

Employer identification number

82-1153081

Return Reference	Explanation
Form 990, Part VI, Line 11b: Form 990 Review Process	The organization's policy is to submit a draft of the annual form 990 and related schedules and forms to the board of directors prior to filing the form 990 with the IRS. Official action by the board is not required in order for form 990 to be filed, but each board member is encouraged to review and approve the form 990.
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	Each interested person must disclose possible or actual conflict of Interest. After disclosure, the board shall decide if a conflict exists. If a conflict does exist, the board will determine if the transaction causing the conflict could be avoided by structuring the transaction with a party that is not an interested party. If a more advantageous transaction is not reasonably possible under circumstances not producing a conflict of interest, the board will vote on whether the transaction is in the organization's best interest.
Form 990, Part VI, Line 19: Other Organization Documents Publicly Available	It is the organization's policy to fully comply with all federal and state disclosure requirements relating to the IRS forms. The organization will fulfill requests for applicable forms in accordance with the public disclosure requirements. Governing documents subject to public disclosure rules will be made publicly available as applicable law may require. Otherwise, the documents will be provided at the discretion of the Director of the organization after consultation with professional advisers.

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

Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) 2011

Schedule I (Form 990) 2018

Cat. No. 50055P

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

Page 1 of 9

(a) Type of grant or assistance         (b) Number of recipients         (c) Amount of cash grant recipients         (d) Amount of cash grant recipients         (e) Amount of cash grant recipients         (d) Amount of cash grant of cash grant of cash grant and cash grant	Part III Grants and Utner Assistance to Domestic Individuals. Complete if the organization drivered life on Form 390, Part 10, fine 22. Part III can be duplicated if additional space is needed.	<b>ssistance to 1</b> cated if additior	Jomestic Individu Ial space is needed.	ais. Compiete ir trie orga	inization answered Tes	011 FOFII1 990, Part 1V, IIITE 22.	
turn Reference	(a) Type of grant or assis	stance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
turn Reference	(1)						
turn Reference	(2)						
turn Reference	(3)						
turn Reference	(4)						
turn Reference	(5)						
	(9)						
	(2)	-					
	Return Reference	Explanatio	c		e C		
							Schedule I (Form 990) 2018

Schedule R (Form 990) 2018

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(k) Percentage ownership					
(j) eral or naging rtner?	S No				
ox mai	Yes	•			:
(g) (h) (i) (j)  Share of Disproprtionate Code V-UBI General or and-of-year allocat ons? 20 of partner?  Schedule K-1 (Form 1065)					
h) ortionate it ons?	No				
Disprop	Yes				
(g) Share of end-of-year assets	-				
Share of Share of total income end-of-year assets			,	÷	
Predominant Icome(related, unrelated, excluded from tax under sections 512- 5714)	(1.4.)				
(d) Direct controlling ir entity		:			
(c) Legal domicile (state or foreign country)					
(b) Primary activity	-				
	-				
(a) Name, address, and EIN of related organization					

because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organizat on	(b) Primary activ ty	(c) Legal domicile	Direct controlling Type of ent ty entity (C corp, S corp,	(e) Type of ent ty (C corp, S corp,	(f) Share of total income	(f) (g) Share of total Share of end-of-income year	(h) Percentage ownership	(i) Section 512(b) (13) controlled	(a) <u>Pa</u>
		(state or foreign		or trust)		assets		entity?	
		country)						Yes No	0
			·						.
									-
									  .
						,	0700 0000	0000	١.

1/21/2020

Schedule R (Form 990) 2018	Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.
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a Receipt of (i) interest, (ii) royalities, (iii) royalities, or optainization engage in any of the following transactions with one or mone related organizations listed in Parts II-1V?  a Receipt of (i) interest, (iii) royalities, organization(s)  c Git, grant, or capital contribution to related organization(s)  d Loans or loan guarantees by related organization(s)  e Loans or loan guarantees by related organization(s)  f Dividends from related organization(s)  g Sale of assets from related organization(s)  h Purchase of assets from related organization(s)  i Exect and existing a related organization(s)  i Exect and existing organization(s)  i Exect and existing organization(s)  i Exect and existing a related organization(s)  i Lease of facilities, equipment, or other assets from related organization(s)  i Lease of facilities, equipment, or other assets with related organization(s)  in Performance of services or membership or fund-asing solicitations by related organization(s)  in Sharing of realities, equipment, maining lists, or other assets with related organization(s)  o Sharing of paid employees with related organization(s) for expenses  Reimbursement paid by related organization(s) for expenses  received the contribution of cash or property from related organization(s)  received the contribution of cash or property from related organization(s)  c Other transfer of cash or property from related organization(s)  s Other transfer of cash or property from related organization(s)  s Other transfer of cash or property from related organization(s)  s Other transfer of cash or property from related organization(s)  s Other transfer of cash or property from related organization(s)  s Other transfer of cash or property from related organization(s)	Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.	chedule.	_	Yes	2
is controlled entity.  (s)  tion(s)  or related organization(s)  lated organization(s)	1 During the tax year, did the orgranization engage in any of the following transactions with one or n	ansactions with one or more related organizations listed in Parts II-IV?			
Gift, grant, or capital contribution to related organization(s)  Gift, grant, or capital contribution from related organization(s)  Loans or loan guarantees to or for related organization(s)  Loans or loan guarantees by related organization(s)  Buildends from related organization(s)  Sale of assets to related organization(s)  Sale of assets to related organization(s)  Exchange of assets from related organization(s)  Lease of facilities, equipment, or other assets from related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Sharing of paid employees with related organization(s) or expenses  Reimbursement paid to related organization(s) for expenses  Reimbursement paid to related organization(s) or expenses  Other transfer of cash or property from related organization(s)  Other transfer of cash or property from related organization(s)	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity.	ontrolled entity.	1a		٥ ا
Gift, grant, or capital contribution from related organization(s)  Loans or loan guarantees to or for related organization(s)  Loans or loan guarantees by related organization(s)  Dividends from related organization(s)  Sale of assets to related organization(s)  Exchange of assets from related organization(s)  Exchange of assets to related organization(s)  Exchange of assets with related organization(s)  Lease of facilities, equipment, or other assets to related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Sharing of paid employees with related organization(s) or expenses  Reimbursement paid to related organization(s) for expenses  Other transfer of cash or property from related organization(s)  Other transfer of cash or property from related organization(s)	<b>b</b> Gift, grant, or capital contribution to related organization(s)		1p		٥ N
Loans or loan guarantees to or for related organization(s)  Loans or loan guarantees by related organization(s)  Dividends from related organization(s)  Sale of assets to related organization(s)  Exchange of assets from related organization(s)  Exchange of assets from related organization(s)  Exchange of assets from related organization(s)  Lease of facilities, equipment, or other assets from related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)  Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  Sharing of paid employees with related organization(s) for expenses  Reimbursement paid to related organization(s) for expenses  Other transfer of cash or property from related organization(s)  Other transfer of cash or property from related organization(s)  Other transfer of cash or property from related organization(s)	c Gift, grant, or capital contribution from related organization(s)		1c	_	No.
Dividends from related organization(s)  Sale of assets to related organization(s)  Sale of assets to related organization(s)  Sale of assets to related organization(s)  Exchange of assets with related organization(s)  Exchange of assets with related organization(s)  Exchange of assets with related organization(s)  Lease of facilities, equipment, or other assets from related organization(s)  Performance of services or membership or fund-related organization(s)  Performance of services or membership or fund-related organization(s)  Sharing of paid employees with related organization(s) or expenses  Sharing of paid employees with related organization(s) for expenses  Reimbursement paid to related organization(s) for expenses  Other transfer of cash or property to related organization(s)  Other transfer of cash or property from related organization(s)  Other transfer of cash or property from related organization(s)			11	_	S N
Dividends from related organization(s)  Sale of assets to related organization(s)  Purchase of assets from related organization(s)  Exchange of assets with related organization(s)  Lease of facilities, equipment, or other assets from related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  Sharing of paid employees with related organization(s) for expenses  Reimbursement paid to related organization(s) for expenses  Other transfer of cash or property to related organization(s)  Other transfer of cash or property from related organization(s)  Other transfer of cash or property from related organization(s)			1e		0 N
Dividends from related organization(s).  Sale of assets to related organization(s).  Sale of assets to related organization(s).  Exchange of assets from related organization(s).  Exchange of assets with related organization(s).  Lease of facilities, equipment, or other assets from related organization(s).  Performance of services or membership or fundralsing solicitations for related organization(s).  Performance of services or membership or fundralsing solicitations by related organization(s).  Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).  Sharing of paid employees with related organization(s).  Reimbursement paid to related organization(s) for expenses.  Reimbursement paid by related organization(s) for expenses.  Other transfer of cash or property from related organization(s).					
Sale of assets to related organization(s)	f Dividends from related organization(s)		1,		ŝ
Purchase of assets from related organization(s)			19		٥
Exchange of assets with related organization(s)			1h		S.
Lease of facilities, equipment, or other assets to related organization(s)	i Exchange of assets with related organization(s)		Ħ		٩
Lease of facilities, equipment, or other assets from related organization(s)	j Lease of facilities, equipment, or other assets to related organization(s)		<del>1</del>		۶ ا
Lease of facilities, equipment, or other assets from related organization(s)					
Performance of services or membership or fundraising solicitations for related organization(s)	Lease of facilities, equipment, or other assets from related organiza		놖		S No
Performance of services or membership or fundraising solicitations by related organization(s)	<ul> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> </ul>	lated organization(s)	7		e l
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		lated organization(s)	##		ŝ
Sharing of paid employees with related organization(s)	Sharing of facilities, equipment, mailing lists, or other assets with re	l organization(s)	1n	_	õ
Reimbursement paid to related organization(s) for expenses	o Sharing of paid employees with related organization(s)		10		٥ N
Reimbursement paid to related organization(s) for expenses					
Reimbursement paid by related organization(s) for expenses			1p		ŝ
Other transfer of cash or property to related organization(s)			14		န္
Other transfer of cash or property from related organization(s)			<u> </u>		
Other transfer of cash or property from related organization(s)	r Other transfer of cash or property to related organization(s)		11		No No
			18		oN N
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		nation on who must complete this line, including covered relationships and transaction thresholds.			

	100		(7)
(a) Name of related organizat on	(b) Transaction	(c) Amount: involved	(u) Method of determining amount involved
	type (a-s)		
			,

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018

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

(k) Percentage ownership					-		-			-			
	Š								 				
(j) General or managing partner?	Yes							·					
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)													
<u> </u>	Š.												
(h) Disproprt onate allocations?	Yes					·			24			-	
(g) Share of end-of-year assets			-								·		
Share of total income													
(e) Are all partners section 501(c)3) organizat ons?	No						-			·			
	Yes												
(d) Predominant income (related, unrelated, excluded from tax under sections 512-	514)								e.				
Legal domicile (state or foreign country)				1									
(b) Primary activity													
(a) Name, address, and EIN of ent ty													

Schedule R (Form 990) 2018

Part VII Supplemental Information

Return Reference

Provide additional information for responses to questions on Schedule R (see instructions).

Explanation

Schedule R (Form 990) 2018

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https://eup.eps.irs.gov/mef/rrdprd/sdi/proxy/printSub