C	99	0	Return of Organization Exempt From Income	Tax	OMIS No. 1545-0047			
rom		•	1		2016			
			Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private		Open to Public			
Deve	rtment of	the Treasury	Do not enter social security numbers on this form as it may be made po		Inspection			
_		e Sentre	Information about Form 990 and its instructions is at www.irs.gov/form har year, or tax year beginning 04-01 , 2016, and ending	12-31	, 20 16			
			C Name of organization Freedom and Opportunity Fund Inc.		er Identification number			
B ☐	Abdress	apolicable:	Doing business as	-	81-1199959			
H			Number and street (or P O box if mall is not delivered to street address) Room/suite	E Telephor				
$\overline{}$	tnibal ret	the state of the s						
\equiv	Final retur	(571) 247-3688						
Ħ.	Amende		City or town, state or province, country, and ZIP or foreign postal code Washington, DC 20005	@ Gross re	cmpts \$ 6,285,942			
$\overline{\Box}$		on pending		a a group return for	subordinates? Yes Alo			
		, ,	FOF, 1030 15th Street, NW, Suito 182 B1, Washington DC 20005 H(b) An	all subordinates	included? Yes No			
	Tax-eve	mpt status		ll "No," attach a	list (see instructions)			
J	Website		ne H(c) G	oup exemption	number >			
K	Form at	organization.	☐ Corporation ☐ Trust ☐ Association ☐ Other ► L. Year of formation 20	16 M State	of legal domicile DE			
P	art i	Summ	ary					
	1	Briefly de	scribe the organization's mission or most significant activities: The mission of	the Organizat	ion is to operate as a			
8		sponsor	of "donor advised funds" seeking to: combat runaway spending, corruption, and cro	nyism; prom	ote 1st Amendment and			
na.	1		et principles; generate economic opportunity; and educate Americans on limited go					
Activities & Governance	2		is box I if the organization discontinued its operations or disposed of more t	han 25% of	its net assets.			
ŝ	3		of voting members of the governing body (Part VI, line 1a)	. 3	4			
8	4		of independent voting members of the governing body (Part VI, line 1b)	4				
ĬŽ.	5		nber of individuals employed in calendar year 2016 (Part V, line 2a)	· · <u> 5</u> _	0			
₹	6		mber of volunteers (estimate if necessary)	. 6	0			
₹	78		elated business revenue from Part VIII, column (C), line 12	78				
_	ь	Net unre	lated business taxable income from Form 990 Time 94	. 7b				
				or Year	Current Year			
ē	8		tions and grants (Part VIII, line 1h)	0	6,285,850			
Revenue	9		service revenue (Part VIII, line 2g)					
ě	10		ant income (Part VIII, column (A), lines 34, and 7d)	0	92			
_	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		ļ			
_	12		enue – add lines 8 through 11 (must equal Paff V/III; column A), [line 12)	0	6,285,942			
	13		nd similar amounts paid (Part IX, column (A), lines 1-3)	0	5,021,000			
	14		paid to or for members (Part IX, column (A), line 4)					
9	15	•	other compensation, employee benefits (Part IX, column (A), lines 5-10)					
Expenses	168		onal fundraising fees (Part IX, column (A), line 11e)	CRENT	France will depoke a serve direct			
3	Ь		Idraising expenses (Part IX, column (D), line 25) ▶ 0	TEN TELE				
_	117		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	0	27,357			
	18		penses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0				
_	19	Revenue	a less expenses. Subtract line 18 from line 12	of Current Year	1,237,585 End of Year			
Net Assets or	20	Total co	sets (Part X, line 16)		 			
3	21		bilities (Part X, line 26)	0	1			
3	22		ets or fund balances. Subtract line 21 from line 20	0				
_	art II		iture Block	0	1,237,585			
_				d to the best of	any kaominana and habat at la			
			ury, I declare that I have examined this return, including accompanying schedules and statements, an piete Declaration of preparer (other than officer) is based on all information of which preparer has any l		my knowledge, and delier, it is			
_		T	2 12					
Sign Signature of Officer Date								
Here Jonathan Burch Treasurer 9/6,								
		Ty	pe or print name and title					
_	aid	Print	ype preparer's name Preparer's signature Date	Check	D., PTIN			
		OF T. RA	ymond Conton, CPA Y Raymond Conton CH 08-29-		P01486002			
	repar	V	name Conion and Associates	Firm's EIN ▶	1			
USO Only Firm's name Conton and Associates Firm's EIN Frim's address PO Box 6213, Silver Spring, Maryland 20916-6213 Phone no 301-598-6851								
Ī	lay the	IRS discu	88 this return with the preparer shown shove? (see instructions)		. Yee / No			
			luction Act Notice, see the separate instructions. Cat. No. 11282	/	Form 990 (2016)			

8 to

25

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The mission of the Freedom and Opportunity Fund is to operate as a sponsor of "Donor Advised Funds" that seek to: combat
	runaway government spending, corruption, and cronyism; promote First Amendment and free market principles; generate wide-
	spread economic opportunity; and educate Americans about the benefits of limited government and free enterprise.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 5,021,000 including grants of \$ 5,021,000) (Revenue \$)
	Since beginning operations in April 2016, as a sponsor of donor advised funds, the Freedom and Opportunity Fund processed
	18 different grants to organizations that seek to combat runaway government spending, corruption, and cronyism; to promote
	First Amendment and free market principles; to generate widespread economic opportunity, and to educate Americans about
	the benefits of limited government and free enterprise.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	,
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses \$ 5.031.000

Form 99	_{0 (2016)} 87-1199959			Page 3
Part	V 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			
•	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	-	1
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	12	✓	
•	candidates for public office? If "Yes," complete Schedule C, Part I	3	ì	1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	ا	\vdash	 '
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	ł	}
5	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,		ļ	
_	Part III	5_		/
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			į
	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		1	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	 •	
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
	complete Schedule D, Part III	8	1	1
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	İ		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
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	1	l	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		1
••	VII, VIII, IX, or X as applicable.	}		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		1
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	ļ	1
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		,	,
d		11c		✓
u u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	ļ	1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		_	<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
1.	Schedule D, Parts XI and XII	12a	/	
a	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	104	}	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		1
14 a		14a		7
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	·		<u> </u>
	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	<u> </u>	✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	 	/
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	1	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	 10		 ▼
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Ì	1
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		1
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	000	√
		For	ก 990	(2016)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
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	1	
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		1
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? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<u> </u>
	\$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	04-		1
b		24a 24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		 -
25 a	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		1
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		1
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			ĺ
	disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1
	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		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		1
D	Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			<u> </u>
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	24		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		✓
	complete Schedule N, Part II	32		1
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		√
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		▼
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		*
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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,			ı .
20	Part VI	37		√
38	19? Note. All Form 990 filers are required to complete Schedule O.	38	,	
			990	(2016)
				,-v, o)

Part		•		
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	· ·)
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<u> </u>	<u> </u>	 -
		ļ		l
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2b		
D		20		 -
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓_
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			l
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	l		
	account)?	4a		✓
b	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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
C	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	-00		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		
_		.		
~	gifts were not tax deductible?	6b	✓	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		ĺ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		ĺ	
11	Section 501(c)(12) organizations. Enter:	1	}	
··a	Gross income from members or shareholders		ļ	
b	Gross income from other sources (Do not net amounts due or paid to other sources	,	Ì	
			ł	
40-				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		- 1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		\	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	·]]	
b	Enter the amount of reserves the organization is required to maintain by the states in which		ļ	
	the organization is licensed to issue qualified health plans	[ł	
C	Enter the amount of reserves on hand	{	_	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
_ b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	145		

Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in				
Section	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management		<u> </u>		V
<u>oecu</u>	on A. Governing body and Management			Yes	No
1a	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	a 4			
	committee, explain in Schedule O.		Ì		
р 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business relative any other officer, director, trustee, or key employee?	·	2		
3	Did the organization delegate control over management duties customarily performed by or un supervision of officers, directors, or trustees, or key employees to a management company or other process.	der the direct	3		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990	<u> -</u> -	4		7
5	Did the organization become aware during the year of a significant diversion of the organization	<u> </u>	5		1
6	Did the organization have members or stockholders?		6		1
7a	Did the organization have members, stockholders, or other persons who had the power to eleone or more members of the governing body?	′ '	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval be stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions under the year by the following:	rtaken during			
а	The governing body?	-	3a	✓	
þ	Each committee with authority to act on behalf of the governing body?		3b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	<i></i> .	9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the	nternal Revenue	Cc	de.) Yes	N/a
10a	Did the organization have local chapters, branches, or affiliates?	la.	0a	168	No 🗸
b	If "Yes," did the organization have written policies and procedures governing the activities of s affiliates, and branches to ensure their operations are consistent with the organization's exempt	uch chapters,	Ob		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before f	· · · —	1a	7	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	-	2a 2b	1	✓
С	Did the organization regularly and consistently monitor and enforce compliance with the podescribe in Schedule O how this was done	, , ,	2c		✓
13	Did the organization have a written whistleblower policy?		13		✓
14	Did the organization have a written document retention and destruction policy?		14		✓_
15	Did the process for determining compensation of the following persons include a review and independent persons, comparability data, and contemporaneous substantiation of the deliberation at				
a	The organization's CEO, Executive Director, or top management official		5a	✓	
р	Other officers or key employees of the organization	· · · · <u> 1</u>	5b		✓_
16a	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 with a taxable entity during the year?	·	•		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization t	<u> </u>	6a		✓_
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	safeguard the	6b		
Secti	on C. Disclosure	<u></u>	J.J.		
17 18	List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and available for public inspection. Indicate how you made these available. Check all that apply.	990-T (Section 5	01(c	:)(3)s	only
19	Own website Another's website Upon request Other (explain in Schedule O whether (and if so, how) the organization made its governing document financial statements available to the public during the tax year.		est p	olicy	, and
20	State the name, address, and telephone number of the person who possesses the organization'	s books and reco	rds:	>	

Form 990 (2016)

	<u> </u>			g
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	Highest Compensated Employees	s, and
	Independent Contractors			

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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 employees."
- 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor	any related	d org	aniz	atio	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	office Individua	unles	eck s pe	ition more	than of the state	ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
(1) Star Eiting	5			1							
Assistant Treasurer	5		-	•	-	 	-	0	0		_0
(2) Jonathan Bunch Treasurer	3	1		1			}	o	o	•	0
(3) Todd Graves	5	Ť		<u> </u>	 	 		 			
Secretary		1		1				o	o		0
(4) Leonard Leo	5										_ <u>-</u>
President		1		✓				L o	0		0
(5)											_
(6)											
(7)					<u> </u>						
(8)			-								
(9)										 	
(10)											_
(11)											
(12)											
(13)											_
(14)											

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	(A) Name and title Average hours per officer and a director/trustee) (B) (B) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation compensation					n from	n from amount of					
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizati (W-2/1099-t	ons	other compensation from the organization and related organizations
(15)												
(16)								-				
(17)								-				
(18)								-				
(19)						-		-				
(20)					-	-	:]		
(21)					-							•
(22)						-						· · · · · · · · · · · · · · · · · · ·
(23)												
(24)								-		 		
(25)						-		-				
1b c d	Sub-total	VII, Sectio	n A				· ·	> > >	0		0	. (
2	Total number of individuals (including but reportable compensation from the organic	not limited				ed	above	e) w		ore than \$1		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp		est compe	ensate	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual											
5	Did any person listed on line 1a receive of for services rendered to the organization											al 5 🗸
Section	n B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensation
CRC, 2	760 Eisenhower Avenue, Alexandria, Virgini	a 22314		_	_	_		Pul	blic Relations			450,000
											 	
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abo	ove) who		

Part VIII		Statement of Reve				5		
		Check if Schedule C	contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	s 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .					Ì	
ts, (C	Fundraising events .					Ì	
Gif	ď	Related organizations						Ì
ıns,	e	Government grants (cor						ĺ
utio	f	All other contributions, g and similar amounts not inc]				
d ij	_		L <u></u> _	6,285,850			}	
jo d	9 h	Noncash contributions include Total. Add lines 1a-1			6 205 050		Į	
- e	 -" -	Total. Add lines Ta-1	<u>'</u>	Business Code	6,285,850			
Program Service Revenue	2a							
Rev	ь							
iç.	С							
Ser	ď							
E I	e							
ogu	f	All other program ser						
4	g	Total. Add lines 2a-2	f	· · · · · •			,	
	3	Investment income						
		and other similar amo			92	0	0	92
	4	Income from investmen						· · · · · · · · · · · · · · · · · · ·
	5	Royalties	(i) Real	(II) Personal			 	
	6a	Gross rents		(1)			ļ	
	b	Less: rental expenses					ļ	
	c	Rental income or (loss)						
	d	Net rental income or	(loss)	>				
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
ĺ		assets other than inventory						
	b	Less: cost or other basis						,
	_	and sales expenses .		ļ				•
ĺ	٥	Gain or (loss) Net gain or (loss) .	L	•				
i	d	ivet gain or (loss) .		· · · · · · · · · · · · · · · · · · ·				
Other Revenue	8a	Gross income from fu events (not including \$ of contributions reporte	0					
e		See Part IV, line 18 .		1				
Ott.	b	Less: direct expenses	s b					
		Net income or (loss) f		events . >		·		
		Gross income from gasee Part IV, line 19 .	· · · · a					
	b	Less: direct expenses						
	C	Net income or (loss) f		ivities				
		Gross sales of in returns and allowance	es a					
	b	Less: cost of goods s						
	_ <u>c</u>	Net income or (loss) f		entory Business Code				
	11a	IVISCEIIII IEOUS N		Dusiness Code				
	b							
	C							
	d	All other revenue .						
	е	Total. Add lines 11a-	11d	•				
	12	Total revenue. See in	nstructions	<u> ▶</u>	6,285,942	0	0	92
								Form 990 (2016)

Part IX Statement of Functional Expenses									
Sectio	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX								
	Check if Schedule O contains a respon								
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,021,000	5,021,000						
2	Grants and other assistance to domestic individuals. See Part IV, line 22				·				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees								
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
7 8	Other salaries and wages								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (non-employees):								
а	Management								
b	Legal	6,511	0	6,511	0				
С	Accounting . , ,	20,000	0	20,000					
d	Lobbying				<u>_</u>				
е	Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)								
12	Advertising and promotion								
13	Office expenses	846	0	846	0				
14	Information technology		· · · · · · · · · · · · · · · · · · ·						
15	Royalties								
16	Occupancy								
17	Travel								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings .								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .								
23	Insurance								
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				•				
	fine 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
a	·	ļ							
b		ļ							
C		ļ			 				
d	All all	ļi			<u> </u>				
e	All other expenses				L				
25_	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	5,048,357	5,021,000	27,357	0				
26	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)								

P	art X				
		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	1,237,585
i	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			•
		trustees, key employees, and highest compensated employees.		l	
		Complete Part II of Schedule L		5	
	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		i i	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
Ş		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			•
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	-
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11	·	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	0	16	1,237,585
	17	Accounts payable and accrued expenses		17	
	18	Grants payable	·	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			•
Ξ		disqualified persons. Complete Part II of Schedule L		22	
Ē	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		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
	ļ	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗸 and			
es	[complete lines 27 through 29, and lines 33 and 34.	_		
Ę	27	Unrestricted net assets	0	27	1,237,585
3al	28	Temporarily restricted net assets		28	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
פַ	29	Permanently restricted net assets		29	
٦	•	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
ž	1	complete lines 30 through 34.		i i	•
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
šše	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Š	33	Total net assets or fund balances	0	33	1,237,585
_	34	Total liabilities and net assets/fund balances	0	34	1,237,585
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					ge IZ
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,28	5,942
2	Total expenses (must equal Part IX, column (A), line 25)	2			8,357
3	Revenue less expenses. Subtract line 2 from line 1	3		1,23	7,585
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		1,23	7,585
Part	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: ☐ Cash ☑ Accrual ☐ Other		53	12.00	1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		√
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or	-	4	
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	1 禁盤	链路	1 2
	separate basis, consolidated basis, or both:			18.	1.74
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1. 1.		33
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o		: [
	of the audit, review, or compilation of its financial statements and selection of an independent account		20	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in	10/22/2	19.75	
	Schedule O.			3	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		- TAPEC	البريم التفادة
	the Single Audit Act and OMB Circular A-133?		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ergo the	,		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b	j	
			Form	990	(2016)

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SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public

OMB No 1545-0047

2016

Department of the Treasury ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Employer identification number Name of the organization Freedom and Opportunity Fund Inc. 81-1199959 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) 2 6,285,850 Aggregate value of grants from (during year) . 5,021,000 Aggregate value at end of year 1,241,274 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
 - b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- Assets included in Form 990. Part X

3. Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that apply): a □ Public exhibition	Part	III Organizations Maintaining							
b	3			ther recor	ds, chec	k any of th	e follov	ving that are a	significant use of its
c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Par XIII. 10	а	☐ Public exhibition		d	☐ Loan	or exchang	e prog	rams	
c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Par XIII. 10	b	☐ Scholarly research		е	Other	,			
Sulfing the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	C								
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		tion's collections	and expla	in how th	ney further	the org	anization's exe	mpt purpose in Par
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year f Ending balance 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	5								lar
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 21, 1 line 21. Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X7				ained as p	part of the	organizati	on's co	llection?	🗌 Yes 🗌 No
included on Form 990, Part X? Yes No No Yes No Yes No No	Part	Complete if the organization 990, Part X, line 21.	answered "Yes						
C Beginning balance	1a	included on Form 990, Part X?							
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions Net investment earnings, gains, and losses Other expenditures for facilities and programs f Administrative expenses g End of year balance Permanent endowment	b	If "Yes," explain the arrangement in P	art XIII and compl	ete the fo	llowing ta	able:		<i>-</i>	Amount
Ending balance 1	C	Beginning balance					1c		
Fending balance Interpretation include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No by If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes No by If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes No by If Theorems of Yes," on Form 990, Part IV, line 10.	d	Additions during the year					1d		
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	е	Distributions during the year					1e		
b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Contributions									_
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Contributions		•			•				. – –
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Phor year (c) Two years back (d) Three years back (e) Four years			art XIII. Check her	e if the e	<u>kplanatio</u>	n has been	provide	ed on Part XIII .	<u> </u>
(a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Two years back (d) Three years back (e) Four years back (e) Fo	Part		1.657		222				
Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Fermanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation ta Land b Buildings c Leasehold improvements d Equipment Other		Complete if the organization						(4) The same has	i I de Company
b Contributions c Net investment earnings, gains, and losses		D. C. H. Lenn	(a) Current year	(a) Ph	or year	(c) Two year	S Dack	(b) Three years bac	(e) Four years back
c Net investment earnings, gains, and losses	_		<u> </u>	 _					
d Grants or scholarships				 -					
e Other expenditures for facilities and programs	C	losses							
f Administrative expenses . g End of year balance	d		ļ						
f Administrative expenses	е								
g End of year balance	_			_					
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment % Permanent endowment % C Temporarily restricted endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	f	-		 		ļ. ———			
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations			L	1	- // - 4				
b Permanent endowment				na balanc	e (line 1g	i, column (a)) neia	as:	
Temporarily restricted endowment ► % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	_			%					
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations			70						
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	С			000/					
organization by: (i) unrelated organizations	32				zation the	at are held	and ad	ministered for t	ho
(i) unrelated organizations	Ja		o possession or t	no organi	Zadon di	at are note	ana aa	ministered for t	
(ii) related organizations		,							
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?									
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (nivestment) (b) Cost or other basis (other) (d) Book value depreciation 1a Land	b								
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (nivestment) (other) (a) Equipment (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Bo	_								
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value (d) Book value (e) Equipment (other) (d) Book value (e) Accumulated depreciation	Part				-				
(investment) (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other				on For	m 990, F	art IV, line	e 11a.	See Form 990	, Part X, line 10.
b Buildings		Description of property							(d) Book value
b Buildings	1a	Land							
c Leasehold improvements d Equipment	_	Buildings							
d Equipment		-							
e Other	d								
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶		_ • •							
	Total.	Add lines 1a through 1e. (Column (d)	must equal Form 9	90, Part	X, columi	n (B), line 10)c.) .		

Part VII	Investments—Other Securities			6 -										
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12													
	(a) Description of security or categor (including name of security)	у	(b) Book value		hod of valuation' -of-year market value									
(1) Financial	derivatives													
(2) Closely-I	neld equity interests													
(3) Other														
(A)														
(B)														
(C)														
(D)														
(E)														
(F)														
(G)														
(H)														
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶													
Part VIII	Investments-Program Relate													
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	ie 11c. See Form	990, Part X, line 13.									
	(a) Description of investment		(b) Book value		hod of valuation -of-year market value									
_(1)			 	 	 -									
(2)				 										
(3)														
(4)				 										
(5)														
(6)														
(7)				 										
(8)				 										
(9)				† 										
	b) must equal Form 990, Part X, col. (B) line 13.)			<u> </u>										
Part IX	Other Assets.		<u> </u>											
	Complete if the organization ans	swered "Yes" on Fo	rm 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.									
		(a) Description			(b) Book value									
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
Total. (Colu	mn (b) must equal Form 990, Part X, c	ol. (B) line 15.)		•										
-Part-X-	Other Liabilities.		 											
	Complete if the organization ans	swered "Yes" on Fo	rm 990, Part IV, lin	ie 11e or 11f. See	Form 990, Part X,									
	line 25.													
1.	(a) Description of liability	(b) Book value												
(1) Federal in	ncome taxes													
(2)														
(3)														
(4)					•									
(5)]											
(6)														
(7)														
(8)														
(9)					•									
	b) must equal Form 990, Part X, col (B) line 25.)													
2. Liability fo	r uncertain tax positions. In Part XIII, prov	vide the text of the footr	note to the organizatio	n's financial stateme	nts that reports the									
organization'	s liability for uncertain tax positions unde	er FIN 48 (ASC 740). Ch	eck here if the text of	the footnote has bee	n provided in Part XIII									

Part		Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	-1	6,285,94
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•
a	Net unrealized gains (losses) on investments	-	
b	Donated services and use of facilities	-	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII.)	 _ 	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	6,285,942
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4 (
b	Other (Describe in Part XIII.)	<u></u>	
С 5	Add lines 4a and 4b	4c	
		5	6,285,942
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Heturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	5,048,357
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	{ {	
a	Donated services and use of facilities	{	
b	Prior year adjustments	1 1	
c.	Other losses	4 (
đ	Other (Describe in Part XIII.)		•
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,048,357
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	ļ (
b	Other (Describe in Part XIII.)	 	
_c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,048,357
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in		, 4, Fall X, IIIIe
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		· 	

SCHEDULE (Form 990) Department of the Treasury nternal Revenue Service Name of the organization

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

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

▶ Attach to Form 990

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047	2016	
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Open to Public Inspection

Employer identification number

81-1199959

% □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance 0 general support √ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of noncash assistance n/a ďa n/a n/a n/a **~** n/a n/a n/a (d) Amount of cash (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 0 1/9 0 n/a 0 n/a 0 n/a 0 n/a 0 1/4 n/a <u>2</u> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 50,000 60,000 70,000 60,000 59,000 250,000 21,000 2,000,000 2,000,000 Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 501c6 501c4 501c4 501c4 501c4 501c4 501c4 501c4 501c4 86-0290347 23-7290803 54-1916980 48-1108059 52-1009116 27-4648506 36-4534086 47-3020439 46-1899951 (P) EIN 3200 N Central Ave #1125 Phoenix AZ 1700 W Washington St #300 Phoenix (1) Arizona Chamber of Commerce reedom and Opportunity Fund Inc. 1 (a) Name and address of organization (4) Center for Individual Freedom 9365 Counselors Row #200 46240 (8) Independent Women's Voice 815 King St Alexandria VA 22314 (2) Arizona Mexico Comission 25 Massachusetts Ave #140 DC 45 N Hill Dr #100 Warrenton VA (9) Protect Internet Freedom (6) National Taxpayer Union 1616 H St NW #902 DC 20006 PO 32376 Phoenix AZ 85064 1875 I St NW #500 DC 20006 or government (7) CSG Action (3) Prosper Inc. (5) Retire Safe Part I Part II (12)

Schedule I (Form 990) (2016)

Cat No 50055P

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

Page 2		ssstance											E t t t t t t t t t t t t t t t t t t t	8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1	*			
	line 22.	(f) Description of noncash assistance								ormation.	ees.		2 0 0 0 1 1 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 6 5 1 1 1 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	1			
	0, Part IV,									itional info	from grant	 	 	L 1 1 1 1 1 4 4 4 4 4 4 4 4 4 4 4 4 4	1 1 1 1 1 1 1 8 8 8 1 1 1 1 1 1 1 1 1 1				
	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	(e) Method of valuation (book, FMV, appraisal, other)							1	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	Partl, Line 3: The grants are awarded for general support. Freedom and Opportunity Fund monitors the use of the grants by obtaining annual reports from grantees.								٠
 	ın answere									q) umnloo	e grants by c		4 1 1 1 6 6 7 1 1 6 6 7 1 1 1 1 1 1 1 1 1	1 3 6 1 1 1 1 1 1 1 1 1 1 1 1 1	4 6 1 1 1 1 1 1 4 4 9 1 1 1 1	6 6 7 8 1 1 2 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	organizatio	(d) Amount of noncash assistance							1 0 0	9 2; Part III,	the use of th		0 1 1 1 1 2 0 1 3 3 3 3 4 5 7 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 9 8 8 8 8	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1) (1 1 1 1 1 1 1 1 1 1 1 1 1	; ; ; ; ; ; ; ; ; ; ;		 	
ļ	plete if the	(c) Amount of cash grant								Part I, line	nd monitors	, , , , , , , , , , , , , , , , , , ,	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		; ; ; ; ; ; ; ; ; ; ; ;	; ; ; ; ; ; ; ; ; ; ; ; ;			
	uals. Com	(c) Am								required in	ontunity Fu								·
	Grants and Other Assistance to Domestic Individua Part III can be duplicated if additional space is needed	(b) Number of recipients								e information	reedom and Opp						6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
81-1199959	e to Dom									Provide th	l support. F						 		
81	Assistanc icated if ac	stance								rmation.	d for genera						 		·
	an be dupl	(a) Type of grant or assistance		ļ						nental Info	s are awarde						 		
Schedule 1 (Form 990) (2016)	Grants & Part III ca	(a) Type							-	Supplen	3. The grant						t 1 6 7 1 1 1 1 1 1 1		
Schedule 1 (Fc	Part III		-	8	က	4	5	9	7	Part IV	Partl, Line								

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number**

Freedom and Opportunity Fund Inc. 81-1199959 Form 990, Part VI, Section B, Line 11b: The Form 990 is prepared by a Certified Public Accountant. It is distributed to officers for review, prior to filing with the Internal Revenue Service (IRS). Form 990, Part VI, Section B, Line 12c: Each year, all officers are required to disclose any potential conflicts of interest. Form 990, Part VI, Section B, Line 15: The corporate By-Laws provide instruction regarding any compensation to members of the Governing Body. However, no compensation was paid this year. Form 990, Part VI, Section C, Line 19: The documents are not available to the general public.