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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2019 or tax year beginning 2019, and ending Employer identification number Custodes Libertatis Memorial Foundation 81-3831593 3711 Kennett Pike В Telephone number (see instructions) (202) 869-4422 Greenville, DE 19807 С If exemption application is pending, check here.. > G Check all that apply: Initial return Initial return of a former public charity **D** 1 Foreign organizations, check here..... Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here. Fair market value of all assets at end of year Accounting method: X Cash Accrual (from Part II, column (c), line 16) Other (specify) F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. ▶\$ 210,773. (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and (d) Disbursements Adjusted net Expenses (The total of amounts in (a) Revenue and (b) Net investment for charitable expenses per books income ińcome columns (b), (c), and (d) may not purposes necessarily equal the amounts in (cash basis only) column (a) (see instructions).) $1\overline{13},979$ Contributions, gifts, grants, etc., received (attach schedule). . 2 Check ► if the foundation is not required to attach Sch. E Interest on savings and temporary cash investments. Dividends and interest from securities. . . 5 a Gross rents **b** Net rental income or (loss) $\boldsymbol{6}$ \boldsymbol{a} Net gain or (loss) from sale of assets not on line 10. **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . Income modifications 10a Gross sales less returns and allowances . **b** Less: Cost of Other income (attach schedule) 979 0 0 Total. Add lines 1 through 11. . . 13 Compensation of officers, directors, trustees, etc. 0. Operating and Administrative Expenses 14 Other employee salaries and wages...... 15 Pension plans, employee benefits 16a Legal fees (attach schedule) **b** Accounting fees (attach sch) . . . See . St. . 1 700 700 C Other professional fees (attach sch). 18 Taxes (attach schedule)(see instrs). Depreciation (attach schedule) and depletion . Travel, conferences, and meetings..... 21 Other expenses (attach schedule) See Statement 2 577. 577. 24 Total operating and administrative expenses. Add lines 13 through 23. 1,277 1,277 Contributions, gifts, grants paid. Part . XV44,910 44,910 Total expenses and disbursements. Add lines 24 and 25 46,187 0. 46,187. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 67,792. **b** Net investment income (if negative, enter -0-). . . 0. 0. C Adjusted net income (if negative, enter -0-) . .

Parl	i II	Balance Sheets	column should be for end-of-year amounts only. (See instructions.)	60 Deals Value		- 1	
			-	(a) Book Value	(b) Book Valu		(c) Fair Market Value
			t-bearing	142,981.	210,6	13.	210,673.
	2		rary cash investments				
	3	Accounts receivable Less: allowance for			1	0.0	100
	4	Pledges receivable.				00.	100.
	4		doubtful accounts •				
	5		doubtful accounts =				
			<u> </u>				
	6	disqualified persons (atta	cers, directors, trustees, and other ich schedule) (see instructions)				
	7	Other notes and loans red	ceivable (attach sch) ►				
		Less: allowance for	doubtful accounts ►				
	8	Inventories for sale	or use				
	9		nd deferred charges				
Assets	10 a	Investments – U.S.	and state government schedule)				
SS	b	Investments — corporate	stock (attach schedule)				
⋖	c	: Investments — corporate	bonds (attach schedule)				
	11	Investments – land equipment: basis	, buildings, and ►				
		Less: accumulated depred (attach schedule)	iation				
	12	Investments - mort	gage loans				
	13	Investments - othe	r (attach schedule)				
	14	Land, buildings, and	d equipment: basis►				
		Lace: accumulated deproc	iation				
		Other assets (descri	ibe ►)				
		see the instructions	completed by all filers — . Also, see page 1, item l)	142,981.	210,7	73.	210,773.
	17	· -	nd accrued expenses				
	18					_	
<u>8</u>	19					_	
=	20		ctors, trustees, & other disqualified persons				
Liabilities	21		s payable (attach schedule)			_	
=	22	Other liabilities (des	scribe)			_	
	23	Total liabilities (add	I lines 17 through 22)	0.		0.	
8			llow FASB ASC 958, check here ►X				
Ē	24	•		140 001	010 5	7,	
ल	24	ivet assets without o	donor restrictions	142,981.	210,7	13.	
	25	Net assets with don	or restrictions				
Net Assets or Fund Balanc			not follow FASB ASC 958, check here ►				
Ö	20	-	•				
Ş	26		principal, or current funds, or land, bldg., and equipment fund			-	
Š	27		ulated income, endowment, or other funds			_	
Ä	28	3 /	fund balances (see instructions)	1.42 0.01	210 7	72	
Ne Se	29 30	Total liabilities and	net assets/fund balances	142,981. 142,981.	210,7 210,7		
Par		,	iges in Net Assets or Fund Balance				
	Total	net assets or fund b	alances at beginning of year — Part II, colur	mn (a), line 29 (must ag	ree with	1	142,981.
2			line 27a			2	67,792.
3		increases not included in li				3	01,132.
			ine 2 (itemize)			4	210,773.
5		ases not included in line 2				5	210,110.
			alances at end of year (line 4 minus line 5)	– Part II, column (b), li	ne 29	6	210,773.

Pari	(a) List and describe	the kind(s) of property sold (for example arehouse; or common stock, 200 shapes	e, real estate,	(b) How acq P — Purcha D — Donat	ase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	N/A			D Donat	1011		
b							
С							
d							
е		<u>, </u>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa			(h) Gain or ((e) plus (f) m	
а							
b							
c							
d							
е	Complete only for accets showing	L L g gain in column (h) and owned by the	foundation on 12/21/60				
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			(I) Gains (Col. in minus col. (k), b n -0-) or Losses (fr	ut not less
а							
b							
С							
d							
е							
2	Capital gain net income or (ne		enter in Part I, line 7 er -0- in Part I, line 7		2		
3	Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6):				
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c). See instructions. If	(loss), enter -0-		3		
Part	V Qualification Under	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me		
Was t	s,' the foundation doesn't quali	this part blank. ction 4942 tax on the distributable a fy under section 4940(e). Do not col each column for each year; see the ins	nplete this part.	•	?	Yes	X No
	- '' '	(b)	(c)	entines.		(d)	
((a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets	(0	Distribution col. (b) divided	
	2018	23,592.	8:	9,722.			0.262946
	2017		4	1,648.			
	2016			669.			
	2015						
	2014						
2	Total of line 1, column (d)				2		0.262946
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total on has been in existence if less than	n line 2 by 5.0, or by the 5 years		3		0.087649
4	Enter the net value of nonchar	itable-use assets for 2019 from Part	X, line 5		4		163,690.
5	Multiply line 4 by line 3				5		14,347.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		14,347.
8	Enter qualifying distributions fr	rom Part XII, line 4			8		46,187.
	If line 8 is equal to or greater tha	in line 7, check the box in Part VI, line	1b, and complete that part u	using a 1%	tax ra	te. See the	

D -	The Day of the Control of the Contro				- 3 -
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see in	nstruction	s)		
1 8	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)				
ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
	check here. ► X and enter 1% of Part I, line 27b				
(: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	foundations only; others, enter -0-)	2			0.
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-).	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			0.
6	Credits/Payments:				
	a 2019 estimated tax pymts and 2018 overpayment credited to 2019				
	Exempt foreign organizations — tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				
(Backup withholding erroneously withheld				
	Total credits and payments. Add lines 6a through 6d	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	10			
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax	11			
Pai	t VII-A Statements Regarding Activities				
1:	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1 a		Χ
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?				
•	See the instructions for the definition		1 b		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published				
	or distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		1 c		Χ
(Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation >\$ 0. (2) On foundation managers >\$	0.			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
_	If 'Yes,' attach a detailed description of the activities.				Λ
	· · · · · · · · · · · · · · · · · · ·				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		37
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				X
				NT.	X / 7
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N,	
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If 'Yes,' attach the statement required by <i>General Instruction T</i> . Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
ь					
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the obtaining in the governing instrument?				37
_	with the state law remain in the governing instrument?		6	3.7	X
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV		7	Χ	
8	Enter the states to which the foundation reports or with which it is registered. See instructions				
	DE, TX				
ŀ	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation		8 b	Χ	
_			3.0	Λ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If 'Yes,' complete F	1942(j)(5) Part XIV	9		X
4.0					21
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		У

BAA Form 990-PF (2019)

	m 990-PF (2019) Custodes Libertatis Memorial Foundation rt VII-A Statements Regarding Activities (continued)	81-38315	93	Р	age !
_				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions		. 11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified perso advisory privileges? If 'Yes,' attach statement. See instructions	n had	. 12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	application?	13	Χ	
14	Website address ► https://fallenshipmate.org The books are in care of ► Daniel Runzheimer Telephone	no. ► <u>(202)</u>	869-	4422	
4-	Located at ► 3214 Hidden Springs Dr Corinth TX ZIP + 4 ►	<u> 76210 </u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here. and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	IN./. 47	۷	∐ N/A
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority o bank, securities, or other financial account in a foreign country?	ver a	. 16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
1.	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 6	a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?				
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes X No			
I	b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance, check here				
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	 	. 1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
í	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and	¬.,			
	6e) for tax year(s) beginning before 2019?	Yes X No			
ı	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a	a)(2) a)(2) to			
	all years listed, answer 'No' and attach statement – see instructions.).		2 b	N.	/A
(c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he 20 , 20 , 20 , 20	ere.			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
I	b If 'Yes,' did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	I			1-
			3 b	N.	/A
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		. 4a		Х
ı	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could				
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?		4 b		X

Form **990-PF** (2019) BAA

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?. (3) Provide a grant to an individual for travel, study, or other similar purposes?. (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) If any answer is 'Yes' to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here. C If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the	No	Yes	X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	No No Sb		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	No		
b If any answer is 'Yes' to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance, check here. c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If 'Yes,' attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/A S Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	No		
See instructions Organizations relying on a current notice regarding disaster assistance, check here c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If 'Yes,' attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X N b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/ 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	No No 6 b		
Organizations relying on a current notice regarding disaster assistance, check here. c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If 'Yes,' attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes X N b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X N b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	No No 6 b		
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	No 6 b		X
tax because it maintained expenditure responsibility for the grant?	No 6 b		X
6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 8870. 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/ 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	6 b		X
on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 8870. 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/ 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	6 b		X
If 'Yes' to 6b, file Form 8870. 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X N b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration			
b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	/A 7b		
or excess parachute payment(s) during the year?	No.		
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors	mployees	5,	
1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.			
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other a	e acco Ilowan	ount, ces
See Statement 3			
0. 0.			0.
2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE,'			
(a) Name and address of each employee hours per week hours per week (c) Compensation (d)Contributions to employee benefit	(e) Expens	e acco	ount,
noid more than \$50,000 Hours believed (c) Compensation Simple serious	athar -	llowan	ces
devoted to position plans and deterred compensation	ouier a		
	ouler a		
compensation	ouler a		
compensation	ouier a		
compensation	ouler a		
compensation	ouler a		
compensation	outer a		

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See	instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
Tartix-A Sammary of Direct Sharkable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti organizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instru	ıctions)	
Describe the two largest program-related investments made by the foundation during the		Amount
1 N/A		
<u> </u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	······································	0.
BAA		Form 990-PF (2019)

BAA

Page 8

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities. 1 a 166,183. **b** Average of monthly cash balances..... 1 b c Fair market value of all other assets (see instructions)..... 1 c 1 d d Total (add lines 1a, b, and c)..... 166,183 e Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets..... 2 3 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 2,493 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4...... 5 163,690 Minimum investment return. Enter 5% of line 5..... 8,185 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) Minimum investment return from Part X, line 6..... 1 8,185. 2a Tax on investment income for 2019 from Part VI, line 5..... 2a **b** Income tax for 2019. (This does not include the tax from Part VI.)..... 2b 2 c Distributable amount before adjustments. Subtract line 2c from line 1..... 3 8,185 Recoveries of amounts treated as qualifying distributions..... 4 5 8,185 Deduction from distributable amount (see instructions)..... 6 **Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1......... 7 8,185 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: **a** Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26..... 1 a 46,187. **b** Program-related investments — total from Part IX-B. 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes..... 2 3 a 3 b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 46,187 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions..... 5 Adjusted qualifying distributions. Subtract line 5 from line 4. 6 46 The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				0 105
line 7				8,185.
a Enter amount for 2018 only			0.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	19,106.			
4 Qualifying distributions for 2019 from Part				
XII, line 4: ► \$ 46,187.				
a Applied to 2018, but not more than line 2a.			0.	
b Applied to undistributed income of prior yea (Election required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required — see instructions)	• •			0.105
d Applied to 2019 distributable amounte Remaining amount distributed out of corpus				8,185.
	30,002.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).				0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	57,108.			
• • • • • • • • • • • • • • • • • • • •	37,100.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribute income for which a notice of deficiency has been issued, or on which the section 4942(a tax has been previously assessed	n)	0.		
d Subtract line 6c from line 6b. Taxable		•		
amount — see instructions		0.		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2019. Subtract line 4d and 5 from line 1. This amount must be distributed in 2020				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	<u> </u>			
8 Excess distributions carryover from 2014 no applied on line 5 or line 7 (see instructions)	t . 0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	57,108.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018 19,106				
e Excess from 2019 38,002				
BAA				Form 990-PF (2019)

Check here \nearrow \boxed{X} if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

See Statement 4

b The form in which applications should be submitted and information and materials they should include:

See Statement for Line 2a

 ${f c}$ Any submission deadlines:

See Statement for Line 2a

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

See Statement for Line 2a

0.00					
3	Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymen	ıt	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid during the year				
See	Statement 5				
	Total			▶ ;	3a 44,910.
U	Approved for future payment				
	Total				3 b

Tall Allaysis of income i roducing /					
Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Excluded	d by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a					
b					
с					
d					
e					
Top and contracts from necessary and accurate					
g Fees and contracts from government agencies2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory					
10 Gross profit or (loss) from sales of inventory11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				4.0	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	ons.)			•	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ons.) Accompl	ishment of Exemp	t Purp	oses	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ons.) Accompl	ishment of Exemp	t Purp	oses	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt.	ons.) Accompl	ishment of Exemp	t Purp	oses	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ons.) Accompl	ishment of Exemp	t Purp	oses	
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13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt.	ons.) Accompl	ishment of Exemp	t Purp	oses	

Form 990-PF (2019) Custodes Libertatis Memorial Foundation 81-3831593 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

								res	NO
describe	organization directly ed in section 501(c) (to political organizat	other than section	age in any of the following on 501(c)(3) organizations	g with any o) or in section	other organization on 527,	n			
-	· -		noncharitable exempt org	anization of					
							1 a (1)		X
• •							, ,		X
	ansactions:								
(1) Sale	es of assets to a non	charitable exemp	ot organization				1 b (1)		Χ
(2) Puro	chases of assets from	n a noncharitabl	e exempt organization				1 b (2)		Χ
(3) Ren	tal of facilities, equip	oment, or other a	ssets				1 b (3)		Χ
` '	ŭ								Χ
	-						, ,		X
• •		•	or fundraising solicitations						X
c Sharing	of facilities, equipme	ent, mailing lists	, other assets, or paid em	ployees			1 c		X
d If the ar the good any tran	nswer to any of the a s, other assets, or ser saction or sharing a	bove is 'Yes,' co vices given by the rrangement, sho	mplete the following sche reporting foundation. If the w in column (d) the value	dule. Colum foundation r of the good	nn (b) should alw received less than s, other assets,	vays show the fair market v or services r	e fair market va value in eceived.	ue of	
(a) Line no.	(b) Amount involved	(c) Name of n	oncharitable exempt organization	(d) Description of tran	sfers, transactio	ns, and sharing arra	ngement	S
N/A									
describe	undation directly or inced in section 501(c) (other than section	with, or related to, one or moon 501(c)(3)) or in section	ore tax-exem 527?	pt organizations		Ye:	X	No
	Name of organization	<u> </u>	(b) Type of organiza	ation	(c)) Description	of relationship		
N/A	,	-	(2))		(-)	,			
•==									
						-			
Under p	penalties of perjury, I declar and complete. Declaration	e that I have examined of preparer (other that	d this return, including accompanyin taxpayer) is based on all informations.	ing schedules ar	nd statements, and to reparer has any knowl	the best of my k ledge.	nowledge and belief,	it is true,	
Sign Here	Electronical	ly Filed		•	VP/Secreta	-	May the this return preparer See inst	n with th shown b	e
Signa	ature of officer or trustee		Date		Title			Yes	No
	Print/Type preparer's nam	ne	Preparer's signature		Date	Check	if PTIN		
Paid	Barbara Murp	ohy	Barbara Mu	uphy	4/3/20	self-employ	P0138	<u> 6215</u>	
Preparer	Firm's name B	slazek & Ve	tterling			Firm's EIN ►	76-0269860		
Jse Only	Firm's address ► 2	900 Weslay	an, Suite 200		-				
-	Н	ouston, TX	77027-5132			Phone no.	(713) 439-	5739	
BAA							Form 99	0-PF (2019)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2019

Employer identification number

Custo	des Libertatis	Memorial Foundation	81-3831593
Organiza	ation type (check one)		
Filers of	:	Section:	
Form 990	0 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	n
Form 990)-PF	527 political organization	
		X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
,	•	red by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Sp	ecial Rule. See instructions.
General	Rule		
X		ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contribution	
Special I	Rules		
	under sections 509(a)(received from any or	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line e contributor, during the year, total contributions of the greater of (1) \$5,000; ine 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	e 13, 16a, or 16b, and that
	during the year, total	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recei contributions of more than \$1,000 exclusively for religious, charitable, scientiforevention of cruelty to children or animals. Complete Parts I, II, and III.	
	during the year, cont \$1,000. If this box is charitable, etc., purp	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receing ributions exclusively for religious, charitable, etc., purposes, but no such contropic checked, enter here the total contributions that were received during the year ose. Don't complete any of the parts unless the General Rule applies to this owively religious, charitable, etc., contributions totaling \$5,000 or more during the	ributions totaled more than for an exclusively religious, organization because
Caution	An organization that i	sn't covered by the General Rule and/or the Special Rules doesn't file Schedu	lla R (Form 990, 990, F7, or

990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
Custodes Libertatis Memorial Foundation

Employer identification number

81-3831593

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	Freeh Group International Solutions		Person X
	3711 Kennett Pike, Suite 130	\$50,000.	Payroll Noncash
	Wilmington, DE 19807		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Freeh Sporkin & Sullivan LLP		Person X Payroll
	350 5th Ave, Suite 6903	\$25,000.	
	New York, NY 10118		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Stephen Leaman		Person X Payroll
	726 West Ocean View Ave, #B	\$7,000.	Noncash
	Norfolk, VA 23503		(Complete Part II for noncash contributions.)
	, .		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4 David Faherty	Total	Person X
	Name, address, and ZIP + 4	Total	Person X Payroll
	Name, address, and ZIP + 4 David Faherty	Total contributions	Person X Payroll
	Name, address, and ZIP + 4 David Faherty 4015 Marquette St	Total contributions	Person X Payroll Noncash (Complete Part II for
4	Name, address, and ZIP + 4 David Faherty 4015 Marquette St Houston, TX 77005 (b)	\$ 5,003.	Person X Payroll
4 (a) No.	Name, address, and ZIP + 4 David Faherty 4015 Marquette St Houston, TX 77005 Name, address, and ZIP + 4	\$ 5,003.	Person X Payroll
4 (a) No.	Name, address, and ZIP + 4 David Faherty 4015 Marquette St Houston, TX 77005 Name, address, and ZIP + 4 Daniel Runzheimer	\$ 5,003.	Person X Payroll
4 (a) No.	Name, address, and ZIP + 4 David Faherty 4015 Marquette St Houston, TX 77005 Name, address, and ZIP + 4 Daniel Runzheimer 3214 Hidden Springs Drive	\$ 5,003.	Person X Payroll
(a) No.	Name, address, and ZIP + 4 David Faherty 4015 Marquette St Houston, TX 77005 Name, address, and ZIP + 4 Daniel Runzheimer 3214 Hidden Springs Drive Corinth, TX 76210 (b)	\$5,003. (c) Total contributions (c) Total contributions \$5,000.	Person X Payroll
(a) No. 5 (a) No.	Name, address, and ZIP + 4 David Faherty 4015 Marquette St Houston, TX 77005 Name, address, and ZIP + 4 Daniel Runzheimer 3214 Hidden Springs Drive Corinth, TX 76210 Name, address, and ZIP + 4	\$5,003. (c) Total contributions (c) Total contributions \$5,000.	Person X Payroll

1

Name of organization Employer identification number

Custodes Libertatis Memorial Foundation

81-3831593

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>N/A</u>			
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		⁹	
(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	(h)	(c)	(q)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)	1	1	Page
lame of organization Custodes Libertatis Memorial Foundation	Employer iden 81-3831		ımber
Part III Evaluative training a partiable at a contribution to avantations described			7) (0)

	or (10) that total more 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 <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
	(e)					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
	Transièree's fiame, auuress, and zir + 4			Relationship of transferor to transferee		
(a)	(b)	(c)		(d)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, addres	Transter of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee		
	,	Transfero 3 hame, address, and 2n × 1		·		
		. – – – – – – – – –				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
No. from Part I	Purpose of gift	Use of gift		Description of now gift is neid		
	(e) Transfer of gift					
	Transferee's name, addres		Rela	ationship of transferor to transferee		
		. – – – – – – – – – –				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Part I	. a.pood o. gt					
	<u> </u>			 		
				 		
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
	<u> </u>	. – – – – – – – – –				
	<u> </u>	. – – – – – – – – –				

019	Page 1	
	81-3831593	
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees	(a) (b) Net (c)	(d)
Tax compliance	Expenses Investment Adjusted per Books Income Net Incom \$ 700.	d Charitable
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses		
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Incom	<u>ne</u> <u>Purposes</u>
Bank charges and fees	Total \$ 577. \$ 0. \$	\$ 577. \$ 577.
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste	Total \$ 577. \$ 0. \$	ri- Expense
Statement 3 Form 990-PF, Part VIII, Line 1	Total \$ 577. \$ 0. \$ \$ ees, and Key Employees Title and Cont Average Hours Compen- butio	ri- Expense
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste Name and Address Justin Freeh 3711 Kennett Pike	Total \$ 577. \$ 0. \$ ees, and Key Employees Title and Cont Average Hours Compenbutio Per Week Devoted sation EBP 8 Chair/Pres \$ 0. \$	ri- Expense on to Account/ & DC Other
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste Name and Address Justin Freeh 3711 Kennett Pike Greenville, DE 19807 Daniel Runzheimer 3711 Kennett Pike	Total \$ 577. \$ 0. \$ Pees, and Key Employees Title and Content bution Per Week Devoted Sation EBP 8 Chair/Pres \$ 0. \$ Secr/Treas 0.	ri- Expense Account/ DC Other 0. \$ 0.
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste Name and Address Justin Freeh 3711 Kennett Pike Greenville, DE 19807 Daniel Runzheimer 3711 Kennett Pike Greenville, DE 19807 Steve Hudock 3711 Kennett Pike	Total \$ 577. \$ 0. \$ Pees, and Key Employees Title and Average Hours Compenbution Per Week Devoted sation EBP 8 Chair/Pres \$ 0. \$ 10.00 Secr/Treas 0. Director 0.	Expense Account/Other 0. \$ 0. 0. 0.
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste Name and Address Justin Freeh 3711 Kennett Pike Greenville, DE 19807 Daniel Runzheimer 3711 Kennett Pike Greenville, DE 19807 Steve Hudock 3711 Kennett Pike Greenville, DE 19807 Maryellen Reilly 3711 Kennett Pike	Total \$ 577. \$ 0. \$ Pees, and Key Employees Title and Average Hours Compenbution Per Week Devoted sation EBP 8 Chair/Pres \$ 0. \$ Secr/Treas 0. 10.00 Director 0. Director 0.	Expense Account/Other 0. \$ 0. 0. 0.

Custodes Libertatis Memorial Foundation

81-3831593

Statement 4 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name: Justin Freeh

Care Of:

Street Address: PO Box 222034
City, State, Zip Code: Dallas, TX 75222
Telephone: (202) 869-4418

E-Mail Address: justin.freeh@fallenshipmate.org
Form and Content: Request application via the website

Submission Deadlines:

Restrictions on Awards: Child of US Naval Academy graduate; Grants for

post-secondary education

Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of <u>Grant</u>	Amount
College of Charleston 66 George Street Charleston SC 29424	None	PC	Scholarship and AIFS study abroad	\$ 9,731.
Julia Bianchi 9647 25th Bay Street Norfolk VA 23518	None	I	Scholarship and books	2,790.
Wake Forest School of Medicine 475 Vine St Winston-Salem NC 27101	None	PC	Scholarship	22,779.
Megan Donovan 4620 Wieuca Rd NE, Unit 59 Atlanta GA 30342	None	PC	Scholarship and books	1,601.
University of Alabama in Huntsville 301 Sparkman Dr NW Huntsville AL 35899	None	PC	Scholarship	3,500.
Greystone Academy 2100 Memorial Blvd Kerrville TX 78028	None	PC	Scholarship	4,509.

Total \$ 44,910.