EXTENDED TO JULY 15, 2021

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter social security numbers on this form as it may be made public?

Open to Public

		e 2019 calendar year, or tax year beginning SEP 1, 2019 and en		UG 31, 2020	
				D Employer identific	nation number
BC	heck if oplicat	C Name of organization		D Employer Identific	sauon number
	Addre م	SS DAIMIC AMEDICAN PREEDOM FOINDAMION			
<u> </u>	chan			27 27710	E /
<u> </u>	chan	Doing business as		27-27718	
<u>_</u>	return	,	loom/suite	E Telephone number	
_	Final	124 CROSS POINT DRIVE		443-458-	
	term! ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,361,306.
	Amer	OWINGS, MD 20736		H(a) Is this a group re	
	Appli tion	F Name and address of principal officer: ALAN A. GRIFFIN	1	for subordinates	? Yes X No
	pend	9 SAME AS C ABOVE	11	H(b) Are all subordinates in	cluded? Yes No
] T	ах-ех	empt status: 501(c)(3) X 501(c) (4) (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)
JV	Vebsi	te: WWW.BALTICAMERICANFREEDOMFOUNDATION, ORG	;	H(c) Group exemption	n number 🕨
KF	orm o	forganization: X Corporation Trust Association Other	L Year	of formation: 2010 N	State of legal domicile: DE
Pa		Summary			
	1	Briefly describe the organization's mission or most significant activities: TO EN	RICH	THE TIES BET	WEEN THE
Governance			CONTI	NUED ON SCH	EDULE O)
īğ	2	Check this box if the organization discontinued its operations or dispose	d of more	than 25% of its net ass	ets.
Ver	3	Number of voting members of the governing body (Part VI, line 1a)		ECEIVED 3	\ 10
မ္	4	Number of independent voting members of the governing body (Part VI, line 1b)	T R	ECETATE 4	ير ان ان
≪ნ	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	1		0
ţį	6	Total number of volunteers (estimate if necessary)	100	MAR 2 2 202 5	1881 0
Activities &	-	Total unrelated business revenue from Part VIII, column (C), line 12	101	74.Fact	0.
¥		Net unrelated business taxable income from Form 990-T, line 39	~ @	DEN UT	0.
_		THE UNIFICIAL DESIRES LEADER MOUNT HOW TO THE OS	11	O Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	\ <u></u>	0.	0.
9	9	December of the second of the		0.	0.
Revenue			···	1,658,755.	1,820,302.
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,658,755.	1,820,302.
$\overline{}$	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	• •	2,339,442.	816,719.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	· · ·	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		90,000.	90,000.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Su a		Professional fundralsing fees (Part IX, column (A), line 11e)	_	- 0.	<u> </u>
Expenses			<u>0.</u>	1,293,258.	1,216,324.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,722,700.	2,123,043.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
- 8	19	Revenue less expenses. Subtract line 18 from line 12		2,063,945.>	<302,741.>
Soci			Be	ginning of Current Year	End of Year
Assets or A Balance	20	Total assets (Part X, line 16)	· ···	28,238,772.	27,338,903.
¥ g		Total liabilities (Part X, line 26)		1,270,354.	413,230.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		26,968,418.	26,925,673.
	rt II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedules a			knowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (1) ther than officer) is based on all information of whic	h preparer	has any knowledge.	<u>/</u>
		Cla ////		1 3/7/~	021
Sigr)	Signature of officer		Date /	
Her	€	ALAN A. GRIFFIN, CAO			
	_	Type or print name and title	1.	nto	T DTIN
_		Print/Type preparer's name PAMELA SAWIN Preparer's signature Pamela L. Sawin		Date Check	PTIN
Paid			<u> </u> 0	3/05/21 sett-employs	
Prep		Firm's name CITRIN COOPERMAN & COMPANY LLP		Firm's EIN 🛌	<u> 22-2428965 </u>
Use	Only	Firm's address ▶ 500 EXCHANGE STREET, SUITE 9-100			
		PROVIDENCE, RI 02903		Phone no. 4 0	1-421-4800
May	the l	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form	990 (2019) BALTIC-AMERICAN FREEDOM FOUNDATION	27-2771854	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
1	TO ENRICH THE TIES BETWEEN THE UNITED STATES AND LATVIA,	T.TTHIIANTA	
	TO ENRICH THE TIES BETWEEN THE UNITED STATES AND DATE THE	CHAMBERTAG OF	XT
	AND ESTONIA, THROUGH PROGRAMS OF EDUCATION AND EXCHANGE	CENTERING OF	. <u> </u>
	ECONOMIC GROWTH AND DEMOCRATIC PROCESSES. VISIBLY STRENG	THENING	
	U.SBALTIC TIES IS A CORE GOAL.		
2	Did the organization undertake any significant program services during the year which were not listed on the	· · · · · · · · · · · · · · · · · · ·	
_	1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1	□ve	s X No
	•	10	3 [22].10
	If "Yes," describe these new services on Schedule O.	┌┐	⊡
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ye	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	3.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
		-,	
_	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,689,995 · including grants of \$ 816,720 ·) (Reven		
4a			·
	TO ENRICH THE TIES BETWEEN THE UNITED STATES AND LATVIA,		AND
	ESTONIA, THROUGH PROGRAMS OF EDUCATION AND EXCHANGE CENT		
	ECONOMIC GROWTH AND DEMOCRATIC PROCESSES. VISIBLY STRENG	THENING	
	U.SBALTIC TIES IS A CORE GOAL.		
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	The state of the s		
4b	(Code) (Expenses \$	iue \$,
			<u>. </u>
		··	
		·	
4c	(Code) (Expenses \$ including grants of \$) (Rever	rue \$,
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$		
4e	Total program service expenses ► 1,689,995.		
		Form	990 (2019)

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 engage in orect or endirect political campaign extinction to behalf of or in opposition to candidates for public official "Yes," complete Schedule D, Part I 4. Section 501(c)(4) organization engage in orect or endirect political campaign extinction on behalf of or in opposition to candidates for public official "Yes," complete Schedule C, Part II 5. Is the organization ascions 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 391" if "Yes," complete Schedule C, Part III 6. Did the organization analytic in ordinary donor aviveded funds or any similar funds or accounts for which donors have the right to provide advice on the destribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the destribution or investment of amounts in such funds or accounts for which donors have the right of the organization receive or hold a conservation elements, noticing essentiate to preserve open space, the enveronment, historic land rease, or historic and amounts in such funds or accounts for which donors have the right of the organization receive or hold a conservation elements. The enveronment, historic land rease, or historic advicers of complete Schedule D, Part II 5. A Did the organization analysis or provide credit countering, dath management, credit regard, or debt negotation services? If "Yes," complete Schedule D, Part IV 10. Did the organization or sport an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 11. Did the organization or sport an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII 11. Did the organization organization report an amount for the restribute provide credit counters, program related in Part X	Щ,			Yes	No
If Yes', complete Schedule A 2 X 2 X 3 2 X 3 3 X 3 3 X 3 3 3	4	to the arganization described in section E01(a)(2) or 4947(a)(1) (ather than a private foundation)?		163	140_
2 Is the organization required to complete Schedule B, Schredule of Contributors 1 3 Drit the organization required in complete Schedule B, Schredule of Contributors 1 4 Section 501(c)(3) organizations. Drit the organization engage in obbying activities, or have a section 501(t) electron in effect during the tax year? If Yes, "complete Schedule C, Part II Is the organization as defined in Prevanue Procedure of 919 if Yes, "complete Schedule C, Part III Is the organization as defined in Prevanue Procedure of 919 if Yes, "complete Schedule C, Part III Is the organization as defined in Prevanue Procedure of 919 if Yes, "complete Schedule C, Part III Is the organization and the intervent of 919 if Yes, "complete Schedule C, Part III Is the organization and the intervent of years of the organization and the intervent of years of years of the organization and the intervent of years of ye	•	•	1		х
bit the organization engage in direct or indirect political campagin ordinaties on behalf of or in opposition to candidates for public office? **R** complete Schedule C, **Part !** Section 50** (C)(S) organizations. Dut the organization engage in lobbying activities, or have a section 50** (I)) election in effect during the tax year? **If **Yes,** complete Schedule C, **Part !** 1 be the organization as each of 50** (I)(6)(8), 50** (I)(6)(8), 50** (I)(6)(8) organization and the control of the complete Schedule C, **Part !** 1 but the organization assembly and yodror advised funds or any similar amounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? **If **Yes,** complete Schedule D, **Part !** 1 but the organization report and end or seasement, including assements to preserve open space, the environment, historic land areas, or historic structures? **If **Yes,** complete Schedule D, **Part !** 2 but the organization seport an amount in Part X, line 21, for secrow or outstedlial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiution services? **If **Yes,** complete Schedule D, **Part V** 10 but the organization report an amount for land, buildings, and equipment in Part X, line 10? **If **Yes,** complete Schedule D, **Part X** 10 but the organization report an amount for land, buildings, and equipment 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 X** 10 but the organization report an amount for land, buildings, and equipment 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 X** 11 but the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? **If **Yes,** complete Schedule	•	· · ·			
A Section 50(16) degrantzation. Did the organization engage in lobbying activities, or have a section 50(16) electron in effect during the tax year? If "Yes," complete Schedule C, Part II					
Section 50 (c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(h) (3) (c)(6)(6), or 501(6)(6), or 501(6)(6), or 501(6)(6), or 501(6)(6), or 501(6)(6) organization that receives membership dues, assessments, or smill armounts as defined in Review Procedure 96-197 If "Yes," complete Schedule C, Part II Is Did the organization makinal may denor advised druds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Is Did the organization report an amount for Part X, it is often amounts on the instead organization organization report an amount for Part X, it is 21, for secret or custodial account flability, serve as a custodian for amounts not listed in Part X, it is 21, for secret or custodial account flability, serve as a custodian for amounts not listed in Part X, it is 21, for secret or custodial account flability, serve as a custodian for amounts not listed in Part X, it is part of the flority organization, florid the organization and instead consisting, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Is It the organization services for through a reliated organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V Is Did the organization services or any of the foliowing questions is "Yes," then complete Schedule D, Part V, It Is It the organization services or any of the foliowing questions is "Yes," then complete Schedule D, Part X, In It Is It Is a seaset reported in Part X, Ine 167 If "Yes," complete Schedule D, Part X Is Did the organization report an amount for investments - other securities in Part X, Ine 127 If "Yes," complete Schedule D, Part X Is Did the organization school for the part X, Ine 167 If	3		2		x
during the tax year? If "Yes," complete Schedule C, Part II is the organization a section 50 (c)(4), 50 (c)(6), 50 (c)(6), 60 (c)(6), 50 (c)(6)	_				
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or smill armounts as defined in Revenue Procedure 98 1/1 "Yes," complete Schedule C, Part III	4				
smillar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 managament, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for individual provides a supplication. Part X, line 107 if "Yes," complete Schedule D, Part VIII Did the organization report an amount for individual provides assets reported in Part X, line 187 if "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities in Part X, line 120, that is 5% or more of its total assets reported in Part X, line 187 if "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities in Part X, line 187 if "Yes," complete Schedule D, Part XII Did the organization report an amount for other assets in Part X, line 187 if "Yes," complete Schedule D, Part XIII Did the organization report an amount for investments - other securities in Part X, line 187 if "Yes," complete Schedule D, Part XIII Did the organization separate, independent audited financial statements for t	_				
But the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Dut the organization resisted or hold a conservation essement, including essements to preserve open space, the environment, historic fand sease, or historic structures? If "Yes," complete Schedule D, Part II Dut the organization or amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Dut the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI Did the organization report an amount for linestments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for other assets in Part X, line 12, that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other liabilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X III Did the organization meludid in consolidated, independent audite	5		_		v
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? # "yes," complete Schedule D, Part III 1 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 counselling, debt management, credit repair, or debt negotiation services? # "Yes," complete Schedule D, Part VI 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? # "Yes," complete Schedule D, Part VI 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI III, IX, or X as applicable. 12 Did the organization report an amount for investments - other securities in Part X, line 10? # "Yes," complete Schedule D, Part VI III III III III III III III III III	7		_		v
Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization is server to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII c Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII c 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 c Did the organization report an amount for ther essets 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 c Did the organization is schedule D, Part VIII c Did the organization is separate, include a footnote that addresses the organization is tability for uncertain tax positions under FIN 46 (ASC 740)" If "Yes," complete Schedule D, Part X 110 X 121 Did the organization asserted in Part X, line 122, then completing Schedule D, Part X III X 122 X 123 Did the organization asserted in separate, included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization asserted vivo" to line 12a, then completing Schedule D, Parts X III X 143 Did the organization asserted asserted asserted vivo" to line 12a, then completing Schedule D, Parts X III X 144 Did the organization have aggregate revenues or expenses of more than \$10,000 form gramtmak	_	·			
Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 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 VIII. 13 Did the organization report an amount for other liabilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 14 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 86 (NSC 740)? If "Yes," complete Schedule D, Part X 15 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 16 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 17 Did the organization maintain an office, employees, or agents outside of the United States 18 Did the organization and program service activities outside the United States, or aggregate foreign investments valued at \$100.000 or more? If "Yes," complete Schedule F, Parts II and IV 18 Did the organization report nor Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance	8	·			v
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? # Yes, "complete Schedule D, Part IV 10 Did the organization diversity or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? # Yes, "complete Schedule D, Part V	_	•	•		
If "Yes," complete Schedule D, Part IV 10 10 10 10 10 10 10 1	9	-			
Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 1 the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 1 b) did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 1 c) Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 2 d) 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 VII 2 d) Did the organization an amount for other assets in Part X, line 15, If "Yes," complete Schedule D, Part IX 3 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 4 Did the organization obtain separate in consolidated financial statements for the tax year of the tax year? If "Yes," complete Schedule D, Part X 5 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 1 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 1 Did the organization maintain an office, employees, or agents outside of the United States? 1 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 1 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? I					v
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b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	13	•		¥	-
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or more? If "Yes," complete Schedule F, Parts I and IV	Þ				
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 10 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 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 X			146	y	
foreign organization? If "Yes," complete Schedule F, Parts II and IV 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 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 X	4=		140		-
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column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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	4=		 		
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Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? # "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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? # "Yes," complete Schedule I. Parts I and II 21 X	าช	· · · · · · · · · · · · · · · · · · ·	40		Y
complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	40		- 18 -		 ^ -
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		4.		Y
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 X					
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					^
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II			<u>∠∪b</u>		\vdash
y to the term of t	21			y	
	00000				(2010)

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		}	ł
	Part IX, column (A), line 2? If "Yes." complete Schedule I, Parts I and III	22	X	
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		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		l
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		x
h	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			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
07	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	-~		
27	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		'	l
	entity (including an employee thereof) or family member of any of these persons? If "Yes." complete Schedule L. Part III	27		х
	, , , , , , , , , , , , , , , , , , , ,			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	ĺ		
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		x
	"Yes," complete Schedule L, Part IV	28a	\vdash	X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		 ^
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	000		X
	"Yes," complete Schedule L, Part IV ,	28c		X
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	20		x
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		 ^ -
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
	Schedule N, Part II	32	 	┢┸
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	$\vdash \vdash$	┢
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	٠		
	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?		1	
	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		1	🐷
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	38	<u> </u>	<u> </u>
ra	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		T.:-	احبار
	1		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ł		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ł		1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	(2010)
		C		12010°

Form 990 (2019) BALTIC-AMERICAN FREEDOM FOUNDATION 27-2771854 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

			T
Check if Schedule O contains a response or note to any line in this Part VI			X
tion A. Governing Body and Management		Vaa	Ma
		Yes	No
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CION B. POlicies (This Section B requests information about policies not required by the Internal Revenue Code.)		V	Na
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124 CROSS POINT DRIVE, OWINGS, MD 20736			
	Enter the number of voting members of the governing body at the end of the tax year	Enter the number of voting members of the governing body at the end of the tax year	Enter the number of voting members of the governing body at the end of the tax year

Check if Schedule O contains a response or note to any line in this Part VII

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

Check this box if neither the organization n (A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	Estimated
	hours per	box	unle	ss per	rson i	s both	an	compensation	compensation	amount of other
	week (list any	\vdash						from the	from related organizations	compensation
	hours for	di ect				Ļ		organization	(W-2/1099-MISC)	from the
	related	trustee or director	eatsi			nsate		(W-2/1099-MISC)	,,	organization
	organizations	Frest	Institutional trustee		Key employee	Highest compensated employee				and related
	below	Individual	量	Officer	a a	hast c	Ē			organizations
	line)	亨	<u>=</u>	ਛ	3	₹ 5	ē			
(1) KIM G. DAVIS CHAIRMAN	4.00	x		x				0.	0.	0.
(2) RICHARD C. SHERIDAN	2.00	A	\vdash	<u> </u>	┝	-				
DIRECTOR	2.00	x						0.	0.	0.
(3) THE HONORABLE MARK SULLIVAN III	2.00		1		\vdash	\vdash				
DIRECTOR		X						0.	0.	0.
(4) DANGUOLE ALTMAN	2.00									
DIRECTOR		X						0.	0.	0.
(5) ANDRES TRINK	2.00									
DIRECTOR		X		L		$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		0.	0.	0.
(6) AMBASSADOR MICHAEL C. POLT	2.00	_		1						
DIRECTOR		X		ļ		<u> </u>		0.	0.	0.
(7) PETER A. RAGAUSS	2.00	۱						0.	0.	0.
DIRECTOR	2.00	X				⊢			U •	0.
(8) THE HONORABLE RODNEY E. SLATER DIRECTOR	2.00	x						0.	0.	0.
(9) JOANNE MEDERO	2.00	┢			-	1	┢			-
DIRECTOR	2.00	x						0.	0.	0.
(10) ASTA SENDONARIS	2.00	<u> </u>			┢		Т			
DIRECTOR		x						0.	0.	0.
(11) ALAN A. GRIFFIN	8.00	Г								
CAO				X				90,000.	0.	0.
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Form 990 (2019)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			-{C				(D)	(E)		(F)
Name and title	Average			Posi				Reportable	Reportable	Est	imated
· · - · · · · · · · · · · · · · · · · ·	hours per	box	, unle:	heck r ss per	son :	s bot)	n an	compensation	compensation	am	ount of
	week	offi	cer an	d a di	recto	r/trus	tee)	from	from related	(other
	(list any	힕						the	organizations		ensation
	hours for	Ę				2		organization	(W-2/1099-MISC)	1	om the
	related	ğ	ş		_	ESE	1	(W-2/1099-MISC)		1 -	inization
	organizations below	를	l ag		ope	5 g					related
	line)	Individual trustae or director	institutional trustee	Officer	Key employee	Highest compensated employes				Orga	nizations
	11110)	=	Ē	5	, S	포등	೭				
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			<u>L</u> _								
1b Subtotal							▶	90,000.	0		0.
c Total from continuation sheets to Part Vi							ightharpoons	0.	0		0.
d Total (add lines 1b and 1c)							>	90,000.	0	<u> </u>	0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	юvе) wh	o re	eceived more than \$100,	000 of reportable		
compensation from the organization											0
											Yes No
3 Did the organization list any former officer,	director, trust	ee, k	кеу б	empl	oye	e, o	r hig	hest compensated emp	loyee on		
line 1a? If "Yes," complete Schedule J for s									÷	3	X
4 For any individual listed on line 1a, is the su									he organization		
and related organizations greater than \$150	0,000? If "Yes.	* co	mol	ete S	Sche	edule	e J i	for such individual		4	X_
5 Did any person listed on line 1a receive or a									dual for services		
rendered to the organization? If "Yes," com	-									5	X
Section B. Independent Contractors											
Complete this table for your five highest co	mpensated inc	lepe	nde	nt co	ontra	acto	rs ti	hat received more than \$	100,000 of compen	sation fro	m
the organization. Report compensation for											
(A)								(B)		(C)
Name and business	address	N	INC	3				Description of s	ervices	Comper	sation
1											
							į				

***	-										
2 Total number of independent contractors (i	ncludina but n	ot lir	nite	d to	thos	se lis	sted	above) who received me	ore than		
\$100,000 of compensation from the organi	_	•••		_)		III.			
wrootoo or compensation from the organi						_		-			2010

Part VIII	Sta	ite	me	nt	0	f F	}ev€	'n	ue
							_		

تت	•	_	Check if Schedule O	cont	nine a roc	2222	or note to any lin	o in this Part VIII			
		_	Check ii Schedule O	COH	<u>anis a res</u>	purse	of flote to any in	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt		Revenuè excluded
									function revenue	business revenue	from tax under
	_										sections 512 - 514
at st	1		Federated campaigns		1:	 					
ž a		b	Membership dues		11	<u>-</u>					
Contributions, Gifts, Grants and Other Similar Amounts	1	C	Fundraising events		10	Щ_		1	İ	ľ	
ii ii		d	Related organizations		. 10	1	<u></u>				
s, (е	Government grants (conti	ribut	ions) 1						
io Sign		f	All other contributions, gifts,	gran	ts, and						
but			similar amounts not included	abo	ve 11	ı,		ļ]	,	
Ē		а	Noncash contributions included in	lines	1a-11 16	\$					
Sog		_	Total. Add lines 1a-1f								
							Business Code				
	, ا	2 a									.,
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E &		c									
E		d			-						
Pa		-				—					
Program Service Revenue		e	All alban and an area				-				
_			All other program service	reve							
	_		Total. Add lines 2a-2f			• •					
	3	•	Investment income (include	aing	aiviaenas	, intere	est, and	305 015			205 015
	١.		other similar amounts)			• • • •		385,815.			385,815.
	4		Income from investment of	or tax	k-exempt	oona p	roceeds				
	5		Royalties	_	(i) R	<u></u>	G) Domanal				
	_			1_		2 a1	(ii) Personal				
	6	i a	Gross rents	6a	+						
- 1			Less: rental expenses	6b			 				
			Rental income or (loss)	<u>6c</u>	<u>.</u>					<u> </u>	
			Net rental income or (loss	·—							
	7	a	Gross amount from sales of	1	(i) Secu		(ii) Other				
			assets other than inventory	7 <u>a</u>	5,975	,491.					[
		Ь	Less: cost or other basis							1	
릙			and sales expenses	70			ļ				
Other Revenue		C	Gain or (loss)	<u>7c</u>	1,434	,487.					
~			Net gain or (loss)					1,434,487.			1,434,487.
횰	8	a	Gross income from fundraisi			- [
8			including \$								
			contributions reported on	line	1c). See					ł	
			Part IV, line 18			. <u>8a</u>					ļ
- 1		b	Less: direct expenses			86					
		C	Net income or (loss) from	fund	lraising ev	ent <u>s</u>					
	9	a	Gross income from gamin	ig ac	tivities. S	e					
į			Part IV, line 19			<u>9a</u>					
1	!	b	Less. direct expenses			9b					
		C	Net income or (loss) from	gam	ing activit	1es					
1	10	а	Gross sales of inventory, I	less	returns						1
			and allowances			10a					
		b	Less: cost of goods sold			101	,				
\Box		С	Net income or (loss) from	sale	s of inven	tory .					
<u>"</u> [Business Code				
ă"	11	а									
e ii		b									
E S		c									
Miscellaneous Revenue		d	All other revenue								
		e	Total. Add lines 11a-11d		<u> </u>						
	12		Total revenue. See instruction	ons				1,820,302.	0.	0.	1,820,302.
naanne										-	Form 990 (2010)

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(8) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	27 105	27,105.		
_	and domestic governments. See Part IV, line 21	27,105.	27,103.	-	
2	Grants and other assistance to domestic	E 077	E 077		
_	individuals. See Part IV, line 22	5,077.	5,077.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	704 537	704 527		
	individuals. See Part IV, lines 15 and 16	784,537.	784,537.		
4	Benefits paid to or for members				
5	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)	90,000.		90,000.	<u>.</u>
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				-
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management	873,276.	873,276.		
b	Legal [27,188.		27,188.	
c	Accounting , , ,	42,034.		42,034.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	117,737.		117,737.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	51,151.		51,151.	
12	Advertising and promotion				
13	Office expenses	122.		122.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	76,928.		76,928.	
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	19,332.	·	19,332.	
24	Other expenses, Itemize expenses not covered	रीष्	· -··		
	above (List miscellaneous expenses on line 24e. If			,	
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	16		,	
а	BANK FEES	8,394.	Ì	8,394.	
Ь	COMMUNICATIONS	162.		162.	
c			****		
d					
	All other expenses				
<u>25</u>	Total functional expenses. Add lines 1 through 24e	2,123,043.	1,689,995.	433,048.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	ļ			
	educational campaign and fundraising solicitation.	}			
	Check here fif following SOP 98-2 (ASC 958-720)	ļ			
02001	0 01-20-20	1		<u> </u>	Form 990 (2019

•		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	3,780,815.	1	4,336,818.
	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 any current or former officer, director,			
- 1		trustee, key employee, creator or founder, substantial contributor, or 35%			
- 1		controlled entity or family member of any of these persons		5	· · · · · · · · · · · · · · · · · · ·
1	6	Loans and other receivables from other disqualified persons (as defined			
	•	under contion 4059(9/1)) and nomans described in section 4059(s)(3)(B)		6	
ا 🔍	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	, .
Ass	9	Prepaid expenses and deferred charges	16,692.	9	16,715.
1	_	Land, buildings, and equipment: cost or other	20,0320	-	
	iva	1 1			
ł	_	basis. Complete Part VI of Schedule D		10c	
		Laura American Control Park American Control	24,441,265.	11	22,985,370.
- 1	11	Investments · publicly traded securities	27,331,203.	12	22,303,370.
	12	Investments - other securities. See Part IV, line 11			
ı	13	Investments - program-related. See Part IV, line 11		13	
1	14	Intangible assets		14	
1	15	Other assets. See Part IV, line 11	20 220 772	15	27,338,903.
\dashv	16	Total assets. Add lines 1 through 15 (must equal line 33)	28,238,772.	16	
	17	Accounts payable and accrued expenses	544,138.	17	270,807.
	18	Grants payable	726,216.	18	142,423.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ဖွ	22	Loans and other payables to any current or former officer, director,			
<u>≅</u>		trustee, key employee, creator or founder, substantial contributor, or 35%			
iabilities		controlled entity or family member of any of these persons		22	
5	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,270,354.	26	413,230.
		Organizations that follow FASB ASC 958, check here			
Net Assets or Fund Balances		and complete lines 27, 28, 32, and 33.			·
ᆲ	27	Net assets without donor restrictions	26,968,418.	27	26,925,673.
<u>e</u>	28	Net assets with donor restrictions		28	
밀		Organizations that do not follow FASB ASC 958, check here			
로		and complete lines 29 through 33.			
<u> </u>	29	Capital stock or trust principal, or current funds		29	
1 845	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ş	31	Retained earnings, endowment, accumulated income, or other funds		31	: - :
<u> </u>	32	Total net assets or fund balances	26,968,418.	32	26,925,673.
z	33	Total liabilities and net assets/fund balances	28,238,772.		27,338,903.
	~	Total magnitud dita flut accuse faria build 1000			Form 990 (201

Form	1990 (2019) BALTIC-AMERICAN FREEDOM FOUNDATION	27-3	<u> 2771854</u>	Pag	ge 1 <u>2</u>
Pa	rt XI Reconciliation of Net Assets				
•	Check if Schedule O contains a response or note to any line in this Part XI	-			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,82		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,12		
3	Revenue less expenses. Subtract line 2 from line 1	3	<302		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	26,96		
5	Net unrealized gains (losses) on investments	5	259	9,9	<u>96.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior penod adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	26,92	5,6	<u>73.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				<u> </u>
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			1
	consolidated basis, or both:		i l		
	X Separate basis Consolidated basis Both consolidated and separate basis				ļl
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. <u>2c</u>	X	 ,
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit		ļ	
	Act and OMB Circular A-133?		3a		X
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	Щ.
			Form	990 ((2019)

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

BALTIC-AMERICAN FREEDOM FOUNDATION

Employer identification number 27-2771854

Pa	rt I Organizations Maintaining Donor Advised		Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
' 2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advised f	funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be use	d only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose com	ferring
			Yes No
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (for example, recreat	tion or education) Preservation of a h	istorically important land area
	Protection of natural habitat	Preservation of a c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired at		
	Park A. M. Markers B. J. A.		2d
3	Number of conservation easements modified, transferred, rela		panization during the tax
	year >		
4	Number of states where property subject to conservation easi	ement is located	
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, i		
	>		
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conservation	easements during the year
	▶\$	•	
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4))(B)(i)
			Yes No
9	In Part XIII, describe how the organization reports conservation		tement and
	balance sheet, and include, if applicable, the text of the footni		
	organization's accounting for conservation easements.	· ·	
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	r Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 958	3. not to report in its revenue statement and I	balance sheet works
	of art, historical treasures, or other similar assets held for publi	lic exhibition, education, or research in further	erance of public
	service, provide in Part XIII the text of the footnote to its finan-		·
ь	If the organization elected, as permitted under FASB ASC 958		nce sheet works of
	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items:	and the state of t	
	(I) Devenue included as Faux 000 De 45 (III II a d		> \$
	(III) Assistance Indiana E 000 D 134		\$
2		review, or other circular access for financial aci	in provide
~	If the organization received or held works of art, historical trea	- · · · · · · · · · · · · · · · · · · ·	iri, piovide
а	the following amounts required to be reported under FASB AS		▶ €
d h	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		• \$

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

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		AMERICAN FI						71854	
Pai	t III Organizations Maintaining C	ollections of Ar	t, Historic	al Tre	asures, or Othe	er Sir	nilar Assets	(continu	ed)
3 ,	Using the organization's acquisition, accessi	ion, and other record	s, check any	of the f	ollowing that make	signific	ant use of its		
	collection items (check all that apply):								
а	Public exhibition	d	ı 🔲 Loar	or excl	hange program				
b	Scholarly research	е	: Othe	er					
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explair	n how they fi	irther th	e organization's ex	empt p	urpose in Part	XIII.	
5	During the year, did the organization solicit of	or receive donations of	of art, historic	cal treas	ures, or other simil	ar asse	ts	_	
	to be sold to raise funds rather than to be m					_	<u>_</u>	Yes	No
Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if the org	anizatio	n answered "Yes" o	n Fom	n 990, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contr	ibutions	or other assets no	t inclu	ded	_	
							🗀	_ Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table	:		_			
						L		Amount	
С	Beginning balance					. -	1c		
d	Additions during the year					L	1d		
е	Distributions during the year					. -	1e		
f	Ending balance					L	1f		
	Did the organization include an amount on F	•	-			-	. L	_ Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.						· · · ·		
Pai	t V Endowment Funds. Complete					1			
		(a) Current year	(b) Prior	year	(c) Two years back	(d) T	hree years back	(e) Four y	ears back
1a	Beginning of year balance		<u> </u>			↓			
ь	Contributions					+			
C	Net investment earnings, gains, and losses					 			
d	Grants or scholarships				<u></u>	┽			
е	Other expenditures for facilities								
	and programs					┼			
f	Administrative expenses					┼			
g	End of year balance							l	
2	Provide the estimated percentage of the cur	rent year end balance		iumn (a)	held as:				
a	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С		<u>%</u>							
-	The percentages on lines 2a, 2b, and 2c sho	•		h-al-d	al animatatanani fan	4h	ation		
Sa	Are there endowment funds not in the posse	ssion of the organiza	mon mar are	Heiu an	u administered for	u ie org	jartization	П	es No
	by: (i) Unrelated organizations								ES NO
	(i) Unrelated organizations (ii) Related organizations					•	•	3a(i) 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as mount	ad on Schor	 hule P2				3b	+-
4	Describe in Part XIII the intended uses of the						-	<u> </u>	
Par	t VI Land, Buildings, and Equipm		Willett Imios	<u> </u>		_			
	Complete if the organization answere		Part IV line	11a S	ee Form 990 Part)	K. line 1	ın		
	Description of property	(a) Cost or o	· · · · · · · · · · · · · · · · · · ·		 -		nulated	(d) Book	
	Document of property	basis (investi	, ,	basis (1 , ,	lepreci		(4) 500.0	, aldo
12	Land	,							
	Buildings	··							
	Leasehold improvements		-						
d	Equipment	·							
	Other	•							
	. Add lines 1a through 1e. (Column (d) must e	equal Form 990 Part	X. column (B). line 10)c.)				0.

(a) Description of security or category (include	ng name of security)	(b) Book value	11b. See Form 990, Part X, (c) Method of valuation	n: Cost or end-of-year market valu
1) Financial derivatives		· · · · · · · · · · · · · · · · · · ·		
2) Closely held equity interests	· · · · · · · · · · · · · · · · · · ·			
3) Other	·			
(A)	-		· · · · · · · · · · · · · · · · · · ·	
(B)				
			 	
(C)			· ·	
<u>(D)</u>		·		
<u>(E)</u>			<u> </u>	
<u>(F)</u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
(G)				
(H)			<u> </u>	
otal. (Col. (b) must equal Form 990, Part X, co	ol. (B) line 12.) 🖊			
Part VIII Investments - Program	m Related.			
Complete if the organization	answered "Yes" or	n Form 990. Part IV, line	11c. See Form 990, Part X,	line 13.
(a) Description of investmen		(b) Book value	(c) Method of valuation	n: Cost or end-of-year market valu
(1)	1			
(2)	-	· · ·		
(3)				
	+		<u> </u>	***************************************
(4)				·
(5)		·	 	
<u>(6) </u>				·
			<u> </u>	
		····		
(9)			l	
Part IX Other Assets.		n Form 990. Part IV. line	11d. See Form 990. Part X.	line 15.
Complete if the organization	answered "Yes" or	n Form 990, Part IV, line escription	11d. See Form 990, Part X,	line 15. (b) Book value
Complete if the organization :	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization (1) (2)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization :	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization (1) (2)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization : (1) (2) (3)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization (1) (2) (3) (4)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization (1) (2) (3) (4) (5)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization: (1) (2) (3) (4) (5)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8)	answered "Yes" or		11d. See Form 990, Part X,	
Complete if the organization : (1) (2) (3) (4) (5) (6) (7) (8) (9)	answered "Yes" or (a) D	escription	11d. See Form 990, Part X,	
Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Detal. (Column (b) must equal Form 990. P	answered "Yes" or (a) D	escription	11d. See Form 990, Part X,	
Complete if the organization : (1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990. Peart X Other Liabilities.	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D	escription		(b) Book value
Complete if the organization of the organizati	answered "Yes" or (a) D Part X. col. (B) line answered "Yes" or of liability	n Form 990, Part IV, line		(b) Book value

932053 10-02-19

932054 10-02-19

Schedule D (Form 990) 2019	BALTIC-AMERICAN	FREEDOM	FOUNDATI	ON	27-2771854	Page 5
Schedule D (Form 990) 2019 Part XIII Supplemental Info	ormation (continued)					
,	Commission					
	· · · · · · · · · · · · · · · · · · ·					
	_					
		_				
						
						
	· · · · · · · · · · · · · · · · · · ·		******			
		*				
						
	- ''					
						
					. ".	
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						-
-						
						
						

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

Name of the organization

Employer identification number

	LTIC-AMERICAN				27-277185	
Pa	rt I General infor	mation on A	ctivities Out	side the United States. Comple	ete if the organization answered "Y	es" on
	Form 990, Part IV	~ -				
1				ds to substantiate the amount of its gra		
	the grantees' eligibility fo	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assistance?	Yes No
2	For grantmakers. Desc	nbe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance outsi	de the
	United States.					
3_			I, line 3 table ca	n be duplicated if additional space is n		(f) Total
	(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-	(e) If activity listed in (d) is a program service,	expenditures
		in the region	agents, and	gram services, investments, grants to	, , ,	for and
		in the region	independent contractors	recipients located in the region)	of service(s) in the region	investments in the region
	·		in the region			ar are region
					PROVIDES PROFESSIONAL	
					INTERNSHIPS, GRADUATE	
ZURC	OPE (INCLUDING				SCHOLARSHIPS, RESEARCH	
CEI	LAND & GREENLAND)	3	7	GRANTS	SCHOLARSHIPS, LEADERSHIP	654,433.
					AWARDS TO BALTIC	
					INDIVIDUALS OR FIRMS	
ZURC	OPE (INCLUDING				THAT HAVE DEVELOPED AN	
ICEI	AND & GREENLAND)	0	0	INNOVATION AWARDS	INNOVATION IN	34,858.
					GRANTS TO BALTIC	
					prganizations to host	
SURC	OPE (INCLUDING				J.S. SPEAKERS ON TOPICS	
CBI	LAND & GREENLAND)	0	0	SPEAKER SERIES	OF INTEREST TO THEIR	44,801.
				ļ		
					GRANTS TO ORGANIZATIONS	
EURC	OPE (INCLUDING				TO SUPPORT SECURITY	
ICBI	LAND & GREENLAND)	0	0	SECURITY SUPPORT	INITIATIVES.	50,445.
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						<u> </u>
		1				
		ļ				
3 a	Subtotal	3	7			784,537.
	Total from continuation					
	sheets to Part I	o	0			0.
c	Totals (add lines 3a		i		1	
_	and 3b)	3	7			784,537.

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2019

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed. Part II

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		BUROPE (INCLUDING ICELAND & GREENLAND)	GRANTS - SPEAKER SERIES (9 RECIPIENTS)	44,801.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GRANTS - SECURITY INITIATIVES (3 RECIPIENTS)	38,445.	WIRE	0.		
		BUROPE (INCLUDING ICELAND & GREENLAND)	GRANTS - INNOVATION AWARDS (3 RECIPIENTS)	34,858.	WIRE	0		
2 Enter total number of by the IRS, or for whis	recipient organization ob the grantee or cou	ns listed above that are r	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(a)(3) equivalency letter	oreign country, r	ecognized as tax-exe	empt		

Schedule F (Form 990) 2019

Enter total number of other organizations or entities

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932072 10-12-19

27-2771854

Page 3

BALTIC-AMERICAN FREEDOM FOUNDATION

Schedule F (Form 990) 2019

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

_						
(h) Method of valuation (book, FMV, appraisal, other)						
(g) Description of noncash assistance						
(f) Amount of noncash assistance	0.	0.				
(e) Manner of cash disbursement	CASH GRANTS	12,000. CASH GRANTS				
(d) Amount of cash grant	654,433.0	12,000.				
(c) Number of recipients	27	E.				
(b) Region	EUROPE (INCLUDING ICELAND & GREENLAND) -	EUROPE (INCLUDING ICELAND & GREENLAND) -				
(a) Type of grant or assistance	GRANTS - PROPESSIONAL INTERNSHIPS, RESEARCH SCHOLARSHIPS, LEADERSHIP ACADEMY FOR HIGH SCHOOLER	GRANTS - SECURITY INITIATIVES				,

SEE PART V FOR COLUMN (A) DESCRIPTIONS

932074 10-12-19

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE FOUNDATION UNDERTAKES A RIGOROUS REVIEW AND APPROVAL PROCESS FOR ALL GRANTS MADE. ORGANIZATIONS SEEKING FUNDING FROM THE FOUNDATION ARE REQUIRED TO COMPLETE A GRANT APPLICATION THAT IS REVIEWED TO DETERMINE IF IT ADDRESSES THE CHARITABLE MISSIONS SUPPORTED BY THE FOUNDATION AND MEETS THE FOUNDATION'S STRICT CRITERIA AND HIGH STANDARDS. ONCE A GRANT IS APPROVED, A STANDARD GRANT AGREEMENT BETWEEN THE FOUNDATION AND THE GRANTEE IS SIGNED. THE STANDARD AGREEMENT MAKES CLEAR THE RESPONSIBILITIES OF ALL PARTIES, OBLIGATES THE GRANTEE TO USE THE GRANT FUNDS ONLY FOR THE PURPOSES FOR WHICH THE GRANT IS MADE, PROVIDES FOR WRITTEN REPORTS WHERE APPLICABLE AS WELL AS AN ACCOUNTING OF HOW GRANT FUNDS ARE USED, AND ACKNOWLEDGES THE FOUNDATION'S AUTHORITY TO WITHHOLD OR RECOVER GRANT FUNDS IN CASES WHERE SUCH FUNDS ARE NOT USED ACCORDINGLY. TO ENSURE THAT THE GRANTEE IS USING FUNDS IN FURTHERANCE OF THE FOUNDATION'S EXEMPT MISSION, THE FOUNDATION WILL MAKE SITE VISITS, PARTICIPATE IN GRANTEE EVENTS, REVIEW RELEVANT REPORTING, AND MEET WITH GRANTEES IN PERSON.

PART I, LINE 3, COLUMN (E):

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROVIDES PROFESSIONAL INTERNSHIPS, GRADUATE SCHOLARSHIPS, RESEARCH SCHOLARSHIPS, LEADERSHIP ACADEMY FOR HIGH SCHOOLER AWARDS & SUPPORT FOR BALTIC INNOVATION AWARDS.

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(E) SPECIFIC TYPES OF SERVICES IN REGION: AWARDS TO BALTIC INDIVIDUALS

OR FIRMS THAT HAVE DEVELOPED AN INNOVATION IN COOPERATION WITH A U.S.

932075 10-12-19

SCHEDULE 1

Grants and Other Assistance to Organizations,

Open to Public Inspection 2 []

Employer identification number 27-2771854 ARTIAL RETURN OF PRIOR OMB No 1545-0047 (h) Purpose of grant DIGITAL SECURITY AND or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization enswered "Yes" on Form 990, Part IV, line 21, for any INNOVATION TEAR GRANT Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States ■ Go to www.irs.gov/Form990 for the latest information. 。 ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part It can be duplicated If additional space is needed. 42,840. <15,735.> (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table BALTIC-AMERICAN FREEDOM FOUNDATION (c) IRC section (if applicable) 501(C)3 Enter total number of other organizations listed in the line 1 table criteria used to award the grants or assistance? 20-8247530 General Information on Grants and Assistance (P) EIN 1 (a) Name and address of organization ANALYSIS - 1275 PENNSYLVANIA AVE, NW, - WASHINGTON, DC 20004 CENTER FOR EUROPEAN POLICY or government DEPARTMENT OF ENERGY Name of the organization Department of the Treasury Internal Revenue Service (Form 990) Part Par

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Schedule I (Form 990) (2019)

27-2771854

Schedule I (Form 990) (2019) BALTIC-AMERICAN FREEDOM FOUNDATION

Part III 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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CASH GRANT	H	5,077.	•0		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.	
PART I, LINE 2:					
THE FOUNDATION UNDERTAKES A RIGOROUS	US REVIEW AND		APPROVAL PROCESS	S FOR ALL	
GRANTS MADE. ORGANIZATIONS SEEKING	FUNDING	FROM THE F	FOUNDATION	ARE REQUIRED	
TO COMPLETE A GRANT APPLICATION THAT	IS	REVIEWED TO DETERMINE		IF IT	
ADDRESSES THE CHARITABLE MISSIONS	SUPPORTED	BY THE	FOUNDATION A	AND MEETS THE	
FOUNDATION'S STRICT CRITERIA AND HIGH		STANDARDS. ONCE	A GRANT	IS APPROVED,	
A STANDARD GRANT AGREEMENT BETWEEN THE		FOUNDATION AND	THE GRANTEE	EE IS	
SIGNED. THE STANDARD AGREEMENT MAKES	ES CLEAR THE	THE RESPON	RESPONSIBILITIES OF ALL	OF ALL	
PARTIES, OBLIGATES THE GRANTEE TO US	Е ТНЕ	GRANT FUNDS	ONLY FOR	THE PURPOSES	
932102 10-28-19					Schedule I (Form 990) (2019)

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2019
Open to Public Inspection

Name of the organization

BALTIC-AMERICAN FREEDOM FOUNDATION

Employer identification number 27 – 2771854

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ESTONIA, THROUGH PROGRAMS OF EDUCATION AND EXCHANGE CENTERING ON
ECONOMIC GROWTH AND DEMOCRATIC PROCESSES. VISIBLY STRENGTHENING
U.SBALTIC TIES IS A CORE GOAL.
FORM 990, PART VI, SECTION A, LINE 6:
DELAWARE LAW REQUIRES THAT ALL NONSTOCK CORPORATIONS HAVE MEMBERS. THE
FOUNDATION'S MEMBERS ARE THE DIRECTORS SO LONG AS THEY ARE DIRECTORS. THE
MEMBERS ELECT THE DIRECTORS AND HAVE CERTAIN ADDITIONAL RIGHTS OF APPROVAL
AS MEMBERS AS PROVIDED BY DELAWARE LAW.
FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS ARE ELECTED BY CURRENT MEMBERS OF THE ENTITY AND HOLD OFFICE FOR
THREE YEARS OR UNTIL THEIR RESIGNATION OR REMOVAL BY A MAJORITY VOTE OF
MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7B:
THE MEMBERS ELECT THE DIRECTORS AND HAVE CERTAIN ADDITIONAL AUTHORITY UNDER
DELAWARE LAW.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WAS DISTRIBUTED TO THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO
FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
THE FOUNDATION REQUIRES DIRECTORS, OFFICERS, AND EMPLOYEES TO DISCLOSE ANY
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19