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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number Law Enforcement Legal Defense Fund Name 52-1095066 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final (703) 807-1875 2560 Huntington Ave 203 termin ated 4,526,823. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende Alexandria, VA 22303-1448 H(a) Is this a group return Applica-F Name and address of principal officer: Jason C. Johnson for subordinates? Yes X No pending same as C above H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 527 If "No." attach a list. See instructions http://www.policedefense.org/ H(c) Group exemption number K Form of organization: X Corporation Trust Association L Year of formation: 1994 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: Benevolent and educational Activities & Governance support and defense of the law enforcement profession. See Part III if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 2 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year **Current Year** 3,086,033. 4,043,956. Contributions and grants (Part VIII, line 1h) Revenue 0. Program service revenue (Part VIII, line 2g) 175,732. 259,037. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 12,864. 11.704. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,274,629. 4,314,697. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ... 551,967. 614,162. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ______ 327,012. 438,284. 419,299. 328,409 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 2,422,477. 2,408,368. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,615,756. 3,894,222. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -341,127. 420,475. 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 4,883,321. 5,583,103. 20 Total assets (Part X, line 16) 500,640. 225,990. 21 Total liabilities (Part X, line 26) 4,382,681. 5,357,113. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Jason C. Johnson. President Here Type or print name and title Print/Type preparer's name

Vienna, VA 22182

Rogers & Company PLLC

Firm's address 8300 Boone Boulevard, Suite 600

Lori A. Collingsworth

Paid

Preparer

Use Only

Firm's name

P00639819

Firm's EIN 58-2676261

Phone no. (703) 893-0300

Form **990** (2023)

Form	990 (2023) Law Enforcement Legal Defense Fund 52-1095066 Page 2
Pai	t 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:
	Our mission is benevolent and educational. We support and defend the
	law enforcement profession and those law enforcement officers who have
	devoted their lives to upholding the Constitution and serving the
	United States and its citizens while enforcing its laws. See Sch O
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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? Yes 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.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,402,085 • including grants of \$) (Revenue \$)
	Public Education & Media Relations:
	We seek to educate the public through direct mail and online campaigns
	about the many risks and threats to law enforcement personnel in order
	to build a more informed, respectful, and appreciative society by
	publicizing the many challenges and dangers faced by our nation's law enforcement officers. We also raise awareness of the risks to the
	livelihood, health, and safety of our nation's law enforcement officers
	and provide support and appropriate recognition for their many
	sacrifices.
	Sacrifices.
	See Schedule O for continuation
	bee benedule o loi continuación
4b	(Code:) (Expenses \$ 720,892. including grants of \$ 614,162.) (Revenue \$)
	(Code:) (Expenses \$ 720,892. including grants of \$ 614,162.) (Revenue \$) Case Defense:
	We support and defend the law enforcement profession and those law
	enforcement officers who have devoted their lives to upholding the
	Constitution and serving the United States and its citizens while
	enforcing its laws. We support the defense of wrongfully
	accused/charged law enforcement officers by providing funds for defense
	counsel, court and subsistence costs, and expert witnesses.
4-	7
4c	(Code:) (Expenses \$ 14,012. including grants of \$) (Revenue \$) Association Collaboration:
	We support activities of law enforcement professional associations,
	fraternal organizations, and related groups. We also provide
	recognition to exceptional private citizens who defend and protect law
	enforcement officers engaged in official actions.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 3,136,989.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			X
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			.,
	If "Yes," complete Schedule D, Part IV	9		X
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	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	1 I a		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11.5		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٠,,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

	990 (2023) Law Enforcement Legal Defense Fund 52-1095 **T IV Checklist of Required Schedules (continued)	7000	<u> </u>	age '
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	240		x
h	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	any tax-exempt bonds?	24c		
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
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	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
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//	200		X
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	28c 29	1	X
30	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
30	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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ļ .		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	1	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		_ v	
Par	Note: All Form 990 filers are required to complete Schedule 0 † V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
rai				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 24		res	INO

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	24			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c	Х	1

Form 990 (2023) Law Enforcement Legal Defense Fund Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		_		37
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut		.		
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	vices provided to the pover?	7-		Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a		
D	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 8282?		7c		Х
d	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		- 11
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	,			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	ı			
	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13 a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.		isa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
-	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			,,
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Λ	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	21	
С		12c	Х	
13	on Schedule O how this was done Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	Х	
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, HI, IL, KS, KY	, MD	, MA	,MI
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3			
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finai	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Jason C. Johnson - (703) 807-1875			_
	2560 Huntington Ave, 203, Alexandria, VA 22303-1448			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization	nor any related	orga	aniza	ation	cor	npe	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck			one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	\vdash	_	10 2 0)/ u us	1	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		ee/	mpen		1099-NEC)	1099-1120)	and related
	below	dualt	rtiona	_	nplo)	st co	 	10001120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	-orme			3
(1) Jason Johnson	40.00	 	 	Ť			_			
President				Х				211,167.	0.	43,500.
(2) Carmela Stremple	40.00									
Secretary/Treasurer				Х				102,666.	0.	53,988.
(3) Alfred S. Regnery	1.00									
Chairman		X		Х				0.	0.	0.
(4) John Burke	1.00									
Vice Chairman		Х		Х				0.	0.	0.
(5) Danielle Cutrona	1.00									
Director		X						0.	0.	0.
(6) Hon. Edwin Meese III	1.00									
Director		X						0.	0.	0.
(7) Hon. J. Kenneth Blackwell	1.00									
Director		Х						0.	0.	0.
(8) Ronald Hosko	1.00									
Director		Х						0.	0.	0.
(9) Stephanie Mohr	1.00									
Director		Х						0.	0.	0.
(10) E. W Jackson	1.00									
Director		Х						0.	0.	0.
(11) James Gagliano	1.00									
Director		Х						0.	0.	0.
		1								
		4								
	1	1		l	1	l	l	l		

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average hours per week	box,	not cl unles	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
1b Subtotal							<u>. </u>	313,833.	0.	97,488.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)								313,833.	0.	97,488.
Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable	2

| Yes | No

				110
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	1	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
Image Direct	Dir. mail production	,
	mailshop, postage	407,429.
HSP, 20130 Lakeview Center Plaza, Ashburn,	Professional	
VA 20147	Fundraising	390,774.
Kennedy's Strategies, LLC, 6102 Henry		
House Ct, Fairfax Station, VA 22039	Policy Director	126,720.

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Form **990** (2023)

Pa	rt V	<u> </u>						
			Check if Schedule O contains a response	or note to any lir	ne in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated business revenue	Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts		b d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f	043,956.	4,043,956.			
				Business Code				
Program Service Revenue		b c d e f	All other program service revenue					
	3		Investment income (including dividends, inter	est, and				
	4 5		other similar amounts) Income from investment of tax-exempt bond Royalties	oroceeds	83,769.			83,769.
		b	Gross rents 6a Less: rental expenses 6b Rental income or (loss) 6c	(ii) Personal				
		d	Net rental income or (loss) Gross amount from sales of assets other than inventory (i) Securities 7a 387,394	(ii) Other				
Revenue		С	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) 7b 212,126. 7c 175,268.	,	175,268.			175,268.
Other		а	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a		,			·
		С	Less: direct expenses 8b Net income or (loss) from fundraising events Gross income from gaming activities. See					
		С	Part IV, line 19 9a Less: direct expenses 9b Net income or (loss) from gaming activities					
		b	Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold 10b					
		С	Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11	a b	List rental income	Business Code 900099	11,704.			11,704.
Seve		С						
Mis		d	All other revenue		44 = 5			
		е	Total. Add lines 11a-11d		11,704.			000 511
	12		Total revenue. See instructions		4,314,697.	0.	0.	270,741.

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

	Check if Schedule O contains a respons not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	614,162.	614,162.		
3	Grants and other assistance to foreign	,	,		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	417,073.	263,963.	153,110.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	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	21,211.	14,338.	6,873.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	34,200.		34,200.	
d	, , , , , , , , , , , , , , , , , , , ,	44.0.00			
е	·	419,299.		55 504	419,299
f	• • • • • • • • • • • • • • • • • • • •	57,784.		57,784.	
g	,	120 620	102 200	4 040	11 010
	column (A), amount, list line 11g expenses on Sch 0.)	138,630.	123,370.	4,048.	11,212
12	Advertising and promotion	39,100.	39,100.	2 077	170 767
13	Office expenses	1,254,332.	1,072,488.	3,077.	178,767
14	Information technology	7,297.	4,134.	2,023.	1,140
15	Royalties	33,149.	21,049.	12,100.	
16	Occupancy	1,005.	809.	12,100.	
17	Travel	1,005.	009.	190.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	7,869.	4,987.	2,882.	
22 23	Depreciation, depletion, and amortization	4,195.	2,664.	1,531.	
23 24	Other expenses. Itemize expenses not covered	1,155.	2,004	1,551.	
2 4	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.)				
а	T	495,643.	341,184.		154,459
a h	Direct mail	349,073.	302,060.		47,013
ט	Licenses/ registrations	200.	200.		_,,010
d	D	0.	332,481.		-332,481
_	All other expenses		,		,
25 25	Total functional expenses. Add lines 1 through 24e	3,894,222.	3,136,989.	277,824.	479,409
<u>26</u>	Joint costs. Complete this line only if the organization	. ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, -	- , ,-
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)	2,090,450.	1,808,902.	0.	281,548

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			320,495.	1	548,678.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			68,480.	3	40,767.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	ostantial c	contributor, or 35%			
		controlled entity or family member of any of th	ese pers	ons		5	
	6	Loans and other receivables from other disqua	alified per	rsons (as defined			
		under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9				3,043.	9	3,043.
	10a	Land, buildings, and equipment: cost or other	·				
		basis. Complete Part VI of Schedule D	. 10a	71,308.			
	b	Less: accumulated depreciation	. 10b	67,357.	11,820.	10c	3,951. 4,908,994.
	11	Investments - publicly traded securities			4,463,784.	11	4,908,994.
	12	Investments - other securities. See Part IV, line	e 11			12	
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			15,699.	15	77,670.
	16	Total assets. Add lines 1 through 15 (must ed	qual line 3	3)	4,883,321.	16	5,583,103.
	17	Accounts payable and accrued expenses			484,223.	17	147,807.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		·····		20	
	21	Escrow or custodial account liability. Complete	e Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sub					
<u>ia</u>		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unre				23	_
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p	•				
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X	16 117		70 102
		of Schedule D			16,417. 500,640.	25	78,183. 225,990.
	26	Total liabilities. Add lines 17 through 25			500,640.	26	225,990.
S		Organizations that follow FASB ASC 958, cl	heck her	e 🕰			
ŭ	0.7	and complete lines 27, 28, 32, and 33.			4,382,681.	07	5,357,113.
Sale	27	Net assets without donor restrictions			4,302,001.	27	3,337,113.
βE	28	Net assets with donor restrictions				28	
Ξ		Organizations that do not follow FASB ASC	958, cne	eck nere			
٥	00	and complete lines 29 through 33.	ام			00	
ets	29	Capital stock or trust principal, or current fund				29 30	
1SS	30	Paid-in or capital surplus, or land, building, or				31	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			4,382,681.		5,357,113.
Z	32	Total net assets or fund balances		1	4,883,321.	32	5,583,103.
	33	Total liabilities and net assets/fund balances			Ŧ,UUJ,JZI•	ა პ	3,303,103.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O)	1 2 3 4 5 6 7 8 9 9	4,31 3,89 42 4,38	4,6 4,2 0,4	22. 75. 81.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		E 2E	7 1	1 2
Dai	column (B)) rt XII Financial Statements and Reporting	10	5,35	/ <u>, </u>	13.
га	Check if Schedule O contains a response or note to any line in this Part XII				X
	Check it Schedule O contains a response of flote to any line in this Part All			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	- 0	-		
2a	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		Za		
b	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both:		2b	X	
С	X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Sci		2c	х	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requor audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Law Enforcement Legal Defense Fund

Employer identification number 52-1095066

_				c Legar Dere				2 1033000	
Pa	rt I	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instructions.		
Γhe	organ	ization is not a private found	lation because it is: (For lines 1 through 12, o	heck only	one box.)			
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1	I)(A)(i).		
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4		A medical research organiz					-	the hospital's name,	
		city, and state:	•				(, ,	
5			or the benefit of a co	llege or university owner	d or operat	ted by a g	overnmental unit describ	ned in	
•		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)							
6		A federal, state, or local go		aontal unit described in a	coction 17	70/61/41/41	(v)		
	X	· · · · · · · · · · · · · · · · · · ·	_					nublic described in	
′	21	An organization that norma	•	niiai pari oi ils support i	rom a gov	emmentai	unit or from the general	public described in	
_		section 170(b)(1)(A)(vi). (C		(4VAV 1) (0					
8	Н	A community trust describe							
9		An agricultural research org							
		or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the	name, city	/, and state of the collec	ge or	
		university:							
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its sup	port from (contributio	ns, membership fees, a	nd gross receipts from	
		activities related to its exen	npt functions, subjec	t to certain exceptions;	and (2) no	more thar	n 33 1/3% of its support	from gross investment	
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.	
		See section 509(a)(2). (Con	mplete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).		
12		An organization organized	and operated exclusi	ively for the benefit of, to	perform t	the functio	ons of, or to carry out the	e purposes of one or	
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2).	See section 509(a)(3). (Check the box on	
		lines 12a through 12d that							
а		Type I. A supporting orga				•	, ,	/ aivina	
		the supported organization	· · · · · · · · · · · · · · · · · · ·	· ·					
		organization. You must o						- appg	
b		Type II. A supporting org			tion with it	e sunnorti	ed organization(s) by ha	avina	
D		control or management o							
					arrie perso	JIIS IIIAI CC	ontrol of manage the sup	oported	
_		organization(s). You mus	-					ماندن ام	
С		☐ Type III functionally inte						ea with,	
		its supported organizatio		•					
d		☐ Type III non-functionally							
		that is not functionally int	•	• .	•		•	iveness	
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
е		☐ Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III		
		functionally integrated, or	r Type III non-functio	nally integrated support	ng organiz	zation.			
f	Ente	er the number of supported o	organizations						
g		ride the following information		.,					
	(i	i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other	
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
To+-									
Γota	u						l .	i .	

332021 12-21-23

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,060,729.	2,659,358.	3,545,432.	3,086,033.	4,043,956.	14,395,508.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,060,729.	2,659,358.	3,545,432.	3,086,033.	4,043,956.	14,395,508.
	The portion of total contributions	, ,	, ,	, ,		, ,	
_	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1,052,927.
6	Public support. Subtract line 5 from line 4.						13,342,581.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	1,060,729.	2,659,358.	3,545,432.	3,086,033.	4,043,956.	14,395,508.
	Gross income from interest,	, , .	, ,	, , ,	, , -	, , ,	, , -
•	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	96,980.	62,035.	110.583	104,789.	83.769.	458,156.
9	Net income from unrelated business					, , , ,	
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						14,853,664.
	Gross receipts from related activities,	etc (see instruction	nne)			12	89,178.
	First 5 years. If the Form 990 is for th	· · · · · · · · · · · · · · · · · · ·		fourth or fifth tax i		_	
.5	organization, check this box and stop	-					
Sec	etion C. Computation of Publ	ic Support Per	centage				
	Public support percentage for 2023 (I			column (f))		14	89.83 %
	Public support percentage from 2022					15	88.09 %
	33 1/3% support test - 2023. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the c						
	and stop here. The organization qual	-					
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances te				•	g	
b	10% -facts-and-circumstances tes	~		• • •	•		
_	more, and if the organization meets the						
	organization meets the facts-and-circle				-		
18	Private foundation. If the organization						
	J		,	. ,			· — —

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	A. Public Support	elow, please com	piete Part II.)				
	ear (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
-	grants, contributions, and	(4) 23 : 3	(5, 2525	(0) _ 0 _ 1	(4,7 = 5 = 1	(0) _ 0	(.,
	bership fees received. (Do not						
	de any "unusual grants.")						
	s receipts from admissions,						
	handise sold or services per-						
	ed, or facilities furnished in						
	activity that is related to the nization's tax-exempt purpose						
_	s receipts from activities that						
	ot an unrelated trade or bus-						
	evenues levied for the organ-						
	n's benefit and either paid to						
	• • • • • • • • • • • • • • • • • • • •						
	value of services or facilities						
	shed by a governmental unit to						
	rganization without charge						
	I. Add lines 1 through 5						
	unts included on lines 1, 2, and						
	eived from disqualified persons						
	its included on lines 2 and 3 received ther than disqualified persons that						
exceed	I the greater of \$5,000 or 1% of the						
	t on line 13 for the year						
	ines 7a and 7b						
8 Publi	ic support. (Subtract line 7c from line 6.)						
	B. Total Support						
-	ear (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	unts from line 6						
	s income from interest,						
	ends, payments received on rities loans, rents, royalties,						
and i	ncome from similar sources						
b Unrela	ated business taxable income						
(less s	section 511 taxes) from businesses						
acquii	red after June 30, 1975						
c Add I	lines 10a and 10b						
11 Net in	ncome from unrelated business						
	ities not included on line 10b, her or not the business is						
	arly carried on						
	r income. Do not include gain						
	ss from the sale of capital ts (Explain in Part VI.)						
	Support. (Add lines 9, 10c, 11, and 12.)						
	5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
chec	k this box and stop here						
	C. Computation of Publi	ic Support Pe	rcentage				
15 Publi	c support percentage for 2023 (li	ine 8, column (f),	divided by line 13,	column (f))		15	%
	c support percentage from 2022					16	%
	D. Computation of Inves)			
17 Inves	stment income percentage for 20	23 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
	stment income percentage from 2					18	%
	3% support tests - 2023. If the					33 1/3%, and line	
	than 33 1/3%, check this box ar	-					
	3% support tests - 2022. If the						and
	8 is not more than 33 1/3%, che	•			•	•	
	ite foundation. If the organization						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		Yes	No
	1		
	2		
	3a		
	O.L.		
	3b		
	3с		
	4a		
	4b		
	4c		
	.0		
	5a		
	F1-		
	5b 5c		
	30		
	6		
	-		
	7		
	8		
	3		
	9a		
	9b		
	0-		
	9с		
	10a		
	10b		
dule	A (Forr	n 990	2023

Pa	art IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
k	b A family member of a person described on line 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Se	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one o	1		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers	; ,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	4		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	²		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			-110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3				
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1				
' '		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	The organization satisfied the Activities rest. <i>complete line 2 below.</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	The organization is the parent of each of its supported organizations. Complete line of below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	a instructic	ne)	
2	Activities Test. Answer lines 2a and 2b below.	e instructio	Yes	No
			163	NO
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
L	b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	Za		
L	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	Oh.		
2	these activities but for the organization's involvement. Perent of Supported Organizations, Anguar lines 2s and 2h below.	2b		
3				
ē	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
L.	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on l	Nov. 20, 1970 (e <i>xplain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990) 2023

Section D - Distributions				Current Year
1 Amounts paid to supported organizations to accomplish ex-	empt purposes		1	
2 Amounts paid to perform activity that directly furthers exem				
organizations, in excess of income from activity			2	
3 Administrative expenses paid to accomplish exempt purpos	ses of supported organization	s	3	
4 Amounts paid to acquire exempt-use assets	· · · · · ·		4	
5 Qualified set-aside amounts (prior IRS approval required - pr	rovide details in Part VI)		5	
6 Other distributions (describe in Part VI). See instructions.			6	
7 Total annual distributions. Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to which	the organization is responsive)		
(provide details in Part VI). See instructions.			8	
9 Distributable amount for 2023 from Section C, line 6			9	
10 Line 8 amount divided by line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	าร	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2023 (reason-				
able cause required - explain in Part VI). See instructions.				
3 Excess distributions carryover, if any, to 2023				
a From 2018				
b From 2019				
c From 2020				
d From 2021				
e From 2022				
f Total of lines 3a through 3e				
g Applied to underdistributions of prior years				
h Applied to 2023 distributable amount				
i Carryover from 2018 not applied (see instructions)				
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4 Distributions for 2023 from Section D,				
line 7: \$				
a Applied to underdistributions of prior years				
b Applied to 2023 distributable amount				
c Remainder. Subtract lines 4a and 4b from line 4.				
5 Remaining underdistributions for years prior to 2023, if				
any. Subtract lines 3g and 4a from line 2. For result greater				
than zero, explain in Part VI. See instructions.				
6 Remaining underdistributions for 2023. Subtract lines 3h				
and 4b from line 1. For result greater than zero, explain in				
Part VI. See instructions.				
7 Excess distributions carryover to 2024. Add lines 3j				
and 4c.				
8 Breakdown of line 7:				
a Excess from 2019				
b Excess from 2020				
			_	

Schedule A (Form 990) 2023

c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Employer identification number

2023

Schedule B (Form 990) (2023)

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Law Enforcement Legal Defense Fund

52-1095066

	W Enroredment Legar Berenbe rana 32 1093000				
Organization type (check o	ne):				
Filers of:	Section:				
Form 990 or 990-EZ	$oxed{X}$ 501(c)($oxed{3}$) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
, ,	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rules					
sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.				
contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, and purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering a instead of the contributor name and address), II, and III.				
year, contributions is checked, enter h purpose. Don't cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year\$				
answer "No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 g requirements of Schedule B (Form 990).				

323451 12-26-23

LHA

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

Name of organization Employer identification number

Law Enforcement Legal Defense Fund

52-1095066

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Law Enforcement Legal Defense Fund

52-1095066

	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990) (2023)

Name of organization Employer identification number

ivallie of of	ganization			Employer identification number				
Law Ei	nforcement Legal Defense	Fund		52-1095066				
Part III		ns to organizations described in nrough (e) and the following line e ritable, etc., contributions of \$1,000 or	ntry For organizations	that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held				
-		(e) Transfer of g	ift					
_	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nnsferor to transferee				
(-) NI-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
-		(e) Transfer of g	ift					
_	Transferee's name, address, and	3 ZIP + 4	Relationship of tra	insferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
-	(e) Transfer of gift							
-	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nnsferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
-		(e) Transfer of g	ift					
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	nsferor to transferee				

SCHEDULE C (Form 990)

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

Political Campaign and Lobbying Activities

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of	organization			Emp	oloyer identification number
	Law Enf	orcement Legal I	Defense Fund		52-1095066
Part I-	A Complete if the org	janization is exempt un	der section 501(c)	or is a section 527 of	organization.
2 Polit	ical campaign activity expendit	cation's direct and indirect politi ures gn activities		9	\$
Part I-	B Complete if the org	janization is exempt un	der section 501(c)	(3).	
2 Ente 3 If the 4a Was	r the amount of any excise tax e organization incurred a sectio	incurred by the organization ur incurred by organization mana n 4955 tax, did it file Form 4720	gers under section 4955 O for this year?	· · · · · · · · · · · · · · · · · · ·	Yes
Part I-		janization is exempt un	der section 501(c),	except section 501	(c)(3).
2 Ente	r the amount directly expended or the amount of the filing organ onpt function activities	d by the filing organization for sization's funds contributed to c	ection 527 exempt functors of the organizations for second	tion activities	\$
Ine 1 4 Did 1 5 Ente mad cont	the filing organization file Form or the names, addresses, and e e payments. For each organizaributions received that were pr	1120-POL for this year? mployer identification number (ition listed, enter the amount paomptly and directly delivered to	EIN) of all section 527 po aid from the filing organize as a separate political org	olitical organizations to wh zation's funds. Also enter t anization, such as a separ	Yes No No lich the filing organization the amount of political
polit	(a) Name	additional space is needed, pro	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
			1	1	1

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

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023

443,753.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)		
of th	e lobbying activity.	Yes	No	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
j	Total. Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	TIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ection		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t					
Ра	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	l "No" OF	(b) Par		e 3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	cal				
а	Current year		2a			
	Carryover from last year					
c	Total		_			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political				
	expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Pa	t IV Supplemental Information					
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	o list); Part I	-A, lines 1	and 2 (see		
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.					

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 Law Enforcement Legal Defense Fund Employer identification number 52-1095066

Pai	TI Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		is or Accounts. Complete if the
	<u> </u>	(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 v	writing that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$	exclusive legal control?	Yes L No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor of		
_	impermissible private benefit?		Yes No
Pai			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	·	
	Preservation of land for public use (for example, recrea		of a historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the forn	n of a conservation easement on the last Held at the End of the Tax Year
	day of the tax year.		
_	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str		2c
a	Number of conservation easements included on line 2c acqu		
•	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by ti	ne organization during the tax
4	year Number of states where property subject to conservation eas	coment is legated	
5	Does the organization have a written policy regarding the per	-	- f
3	violations, and enforcement of the conservation easements it	·	
6	Staff and volunteer hours devoted to monitoring, inspecting,		
٠	Cital and volunteer hours devoted to monitoring, inspecting,	rianding of violations, and emorning co	nscreation casements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ation easements during the year
	э,		
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170)(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial state	ments that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or (Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these ite	ems.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	d balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical treatments		
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection times (check all that apply). a Public exhibition d Loan or exchange program b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Ves No	Pai	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, c	or Othe	r Similar	Asse	ts (contir	nued)	
a Public exhibition d Loan or exchange program b Scholarly research c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Part IV Excorow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, trustee, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, trustee, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is genining balance C Beginning balance It I Amount It Bedigning the year It Bedign balance And dictions during the year It Bedign balance It Bedign ba	3	Using the organization's acquisition, accessi	on, and other record	ds, check	k any of the	following that	t make si	ignificant us	se of its			
b Scholarly research		collection items (check all that apply).										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIII. 5 During the year, did the organization solict or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Excrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Parl IV, line 9, or reported an amount on Form 990, Parl X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Parl X, line 21. 1b If "Yes," explain the arrangement in Parl XIII and complete the following table: Amount c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Parl X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Parl XIII. Check here if the explanation has been provided in Parl XIII Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Parl X, line 10. 1a Beginning of year balance b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1b Contributions c Net investment earnings, gains, and losses of Granities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 5 Permanent endowment 5 Permanent endowment 5 Permanent endowment 5 Permanent endowment 6 Permanent e	а	Public exhibition	d	ıЩı	Loan or exc	hange progra	am					
4 Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part VI Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, xine 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, sine 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, sine 21. 1a Is the organization than a sent an agent trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, sine 21. 1a Is the organization than a sent an agent x and the sent and than a sent an agent x and the sent and	b	Scholarly research	е	, [Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an angent, flustee, outscridan, or other intermediary for contributions or other assets not included on Form 990, Part X? Is It were the arrangement in Part XIII and complete the following table:	С	Preservation for future generations										
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Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?	5	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										
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Tall Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?	Pai		-	te if the	organizatio	n answered "\	Yes" on F	Form 990, F	Part IV, I	ine 9, or		
on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year 1												
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Itc	1a		•	•						٦.,		٦
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance Board designated in include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part V, line 10. [a) Current year (b) Prior year (c) I wo years back (d) Three years back (e) Four years back contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment y6 b Permanent endowment y6 c Term endowment 1,096 The percentages on lines 2a, 2b, and 2c should equal 100%. 3 Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (iv) Related organizations? 3a(i) 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property basis (investment) basis (other) Check the Column (d) Book value depreciation 1 Land b Buildings c Leasehold improvements c Cleasehold improvements									└─	」Yes		」No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No If 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasie-indowment y6 b Permanent endowment y6 c Term endowment Imes 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? Description of property (a) Cost or other basis (investment) Description of property (a) Cost or other basis (investment) Description of property (a) Cost or other basis (investment) Description of property (a) Cost or other basis (investment) Description of property (a) Cost or other basis (investment) Description of property (a) Cost or other basis (investment) Description of property (a) Cost or other basis (investment) Description of property (b) Cost or other basis (investment) Description of property (c) Description of property (c) Description of property (d) Drest or other basis (investment) Description of property (d) Drest other basis (inves	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able:					Amoun		
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f Ending balance												
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Bill Tyes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Image: Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Call Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back										Voc		_No
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g End of year balance	f	. •										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment												
a Board designated or quasi-endowment	_		rent vear end baland	e (line 1	a column (a)) held as:						
b Permanent endowment					9, 00.0	4)) 11014 40.						
c Term endowment		<u> </u>										
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 54,108. 50,157. 3,951. e Other												
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(ii) Related organizations? b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other Other		-								3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other Other 17,200. 3b (d) Book value 17,200. 3c 17,200.												
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) Coepreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other Other 17,200. 17,200.	b											
Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 17,200. 17,200.	_											
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basis (investment) basis (other) depreciation 1a Land Buildings C Leasehold improvements C Equipment 54,108. 50,157. 3,951. e Other 17,200. 17,200. 0.		Complete if the organization answere	d "Yes" on Form 990	0, Part IV	/, line 11a. \$	See Form 990	, Part X,	line 10.				
b Buildings c Leasehold improvements d Equipment 54,108. 50,157. 3,951. e Other 17,200. 17,200. 0.		Description of property	1 ' '							(d) Boo	k valu	e
b Buildings c Leasehold improvements d Equipment 54,108. 50,157. 3,951. e Other 17,200. 17,200. 0.	1a	Land										
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e Other 17,200. 17,200. 0.											3,9	51.
					1	7,200.		17,20	0.			0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 3,951.	Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, line 1	0c, columr	n (B))					3,9	51.

Schedule D (Form 990) 2023

	ment Legal De	fense Fund	52-1095066 Page
Part VII Investments - Other Securities Complete if the organization answered "Yes"	on Form 990 Part IV line:	11h Soo Form 900 Part V line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	
(1) Financial derivatives	()	. ,	,
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) l	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	I. (B))		
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, li	ne 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Lease liabilities - opera	ting		
(3) lease			78,183
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

78,183.

(6) (7) (8)

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Name of the organization

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

Open to Public Inspection

Employer identification number

	orcement Legal Def	ens	e F	'und	52-1095	066		
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations b X Internet and email solicitations c Phone solicitations g Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.								
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have c or con contrib	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization		
HSP Direct - 20130 Lakeview		Yes	No					
Center Plaza, Ashburn, VA	Direct mail	Х		2,781,022.	314,693.	2,466,329.		
Blitz Digital - 20131						, ,		
Lakeview Center Plaza,	 Digital Mail		х	607,852.	92,200.	515,652.		
,				,	,	, -		
Total				3,388,874.	406,893.	2,981,981.		
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions					
AL,AK,AZ,AR,CA,CO,CT,	DE, FL, GA, HI, ID, IL,	IN,	ΙΑ,	KS,KY,LA,M	E,MD,MA,MI	,MN,MS,MO		
MT, NE, NV, NH, NJ, NM, NY,	NC, ND, OH, OK, OR, PA,	RI,	SC,	SD, TN, TX, U	T, VT, VA, WA	,WV,WI,WY		
DC					-			

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 Part II of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (total number) (event type) Revenue 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III | Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No **b** If "Yes," explain:

Schedule G (Form 990) 2023

Sch	edule G (Form 990) 2023	Law	Enforcement	: Legal	Defense	Fund	52-1	<u>.09506</u>	6 Page 3
11	Does the organization conduct g	aming act	vities with nonmembe	rs?				Yes	☐ No
	Is the organization a grantor, ber								
	to administer charitable gaming?							Yes	└── No
13	Indicate the percentage of gamir								
а	The organization's facility							13a	%
b	An outside facility							13b	%
14	Enter the name and address of the	ne person	who prepares the orga	anization's ga	aming/special eve	ents books a	nd records:		
	Name								
	Address								
15a	Does the organization have a cor	ntract with	a third party from who	om the organ	ization receives (gaming reven	ue?	. Yes	☐ No
	If IIX II and an Ale - are such of an are	- !		!	Φ.				
0	If "Yes," enter the amount of gan				\$	and	the amount		
_	of gaming revenue retained by the If "Yes," enter name and address								
·	in res, entername and address	s or the thi	ru party.						
	Name								
	Address								
16	Gaming manager information:								
	Name								
	0	Φ.							
	Gaming manager compensation	\$							
	Description of services provided								
				_					
	Director/officer	L Em	oloyee		ent contractor				
	Mandatory distributions:								
а	Is the organization required unde		v to make charitable di	istributions fr	om the gaming p	roceeds to			
	retain the state gaming license?							. Yes	∟ No
b	Enter the amount of distributions	•		distributed to	other exempt or	ganizations o	or spent in the		
Pa	rt IV Supplemental Info			ione roquirod	by Part L line 2h	columne (iii	and (v): and Da	rt III. linne (0 0h 10h
1 4	15b, 15c, 16, and 17b, a		· ·	-	•		and (v), and Fa	11 111, 111165	9, 90, 100,
	100, 100, 10, 414 175, 4	о аррпоак	ic. 7 libe provide any at	aditional info	mation. Gee inst	ractions.			
Sc	hedule G, Part I,	Line	2b, List o	f Ten	Highest 1	Paid Fu	ndraiser	s:	
, .				· · · · · ·					· · · · · · · · · · · · · · · · · · ·
<u>(i</u>) Name of Fundrai	ser:	HSP Direct						
, .	\ 3 3 3 3 3 3 3 3 3 3		00120 T -	1	Q b 1	.1	3 1- 1	773	00147
<u>(i</u>) Address of Fund	raise	r: 20130 La	kevlew	Center	Plaza,	Ashburn,	VA	20147
(i) Name of Fundrai	ser:	Blitz Digit	:a1					
` _	, mand of fundialar								
(i) Address of Fund	lraise	r: 20131 La	keview	Center 1	Plaza,	Ashburn.	VA	20147
						· ·	·		

Schedule G	(Form 990)	Law	Enforcement	Legal	Defense	Fund	52-1095066 Page 4
Part IV	(Form 990) Supplemental Inf	ormation	(continued)				
_							

SCHEDULE I (Form 990)

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

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

Department of the Treasury Internal Revenue Service Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization	cement Le	gal Defense	Fund				Employer identification number 52-1095066
Part I General Information on Grants a		gar berense	, i dild			<u> </u>	32 1033000
Does the organization maintain records	to substantiate the	e amount of the grant	s or assistance, the	e grantees' eligibilit	y for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assi							
2 Describe in Part IV the organization's pro-	ocedures for moni	toring the use of gran	t funds in the Unite	d States.			
Part II Grants and Other Assistance to recipient that received more than					anization answered "\	es" on Form 990, Parl	: IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) a3 Enter total number of other organization							······

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

Schedule I (Form 990) 2023

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
egal defense assistance provided to cover					
expenses such as lawyer, research, and computer					
generated reenactments.	14	614,162.	0.	N/A	N/A
		,			
Part IV Supplemental Information. Provide the information re	auired in Dort Llin	o 2: Dort III. oolumn	(b): and any other a	dditional information	1

Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2:

The Board of Directors makes the determination as to whether the

organization will take up a case. The President reviews and authorizes each

expenditure for legal fees and expert witness fees. Each expenditure is

backed up with documentation in the form of a memo or invoice. Once paid,

the President keeps current with the progress of each case. In the

President's ongoing involvement with the case, the use of funds as well as

the activities of the case are monitored.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Law Enforcement Legal Defense Fund

Employer identification number 52-1095066

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Jason Johnson	(i)	194,675.	0.	16,492.	43,500.	0.	254,667.	0.
President	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Carmela Stremple	(i)	99,950.	0.	2,716.	36,395.	17,593.		0.
Secretary/Treasurer	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023	Law Enforcement Legal Defense Fund	52-1095066	Page 3
Part III Supplemental Informa	tion		
Provide the information, explanati	ion, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II	. Also complete this part for any additional informat	tion.

SCHEDULE O (Form 990)

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 Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

Law Enforcement Legal Defense Fund

Employer identification number 52-1095066

Form 990, Part III, Line 1, Description of Organization Mission: (continued We also seek to educate the public about the many risks and threats to law enforcement personnel in order to build a more informed, respectful, and appreciative society.

Form 990, Part III, Line 4d, Public Education & Media Relations:(continued)
We seek to inform the public about the many risks and threats to law
enforcement personnel in order to build a more informed, respectful,
and appreciative society by publicizing the many challenges and dangers
faced by our nation's law enforcement officers in the media, and
through our website, social media, and by other means. We also raise
awareness of the risks to the livelihood, health, and safety of our
nation's law enforcement officers and provide support and appropriate
recognition for their many sacrifices.

Form 990, Part VI, Section B, line 11b:

Copies are given to each board member for their review prior to filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

The President enforces the compliance of the Conflict of Interest Policy.

Each new responsible person shall be required to review a copy of the policy and to acknowledge in writing that he or she has done so. The policy is reviewed annually by each member of the Board of Directors. Any changes made to the policy are communicated immediately to all responsible persons.

In the event it is not entirely clear that a conflict of interest exists,

Name of the organization Law Enforcement Legal Defense Fund	Employer identification number 52-1095066
the individual with the potential conflict shall disclose	the circumstances
to the President or the President's designee, who shall d	etermine whether
there exists a conflict of interest that is subject to th	e policy.
Form 990, Part VI, Section B, Line 15:	
Compensation is discussed and informally approved by the	Board of
Directors.	
Form 990, Part VI, Line 17, List of States receiving copy	of Form 990:
AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC,	OR, PA, RI, SC, TN, VA
WV,WI	
Form 990, Part VI, Section C, Line 19:	
Copies are mailed to any donor that requests them. Copies	of the most
recent audited financial statements, Form 990, and Confli	ct of Interest
Policy are posted to our website.	
Also, copies are required to be sent to each of the state	s from which the
organization solicits donations, and are made publicly av	ailable on the
states' websites.	
Form 990, Part XII, Line 2c:	
No change from prior year.	

Form **8868** (Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Type or Taxpaver identification number (TIN) Print 52-1095066 Law Enforcement Legal Defense Fund File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 2560 Huntington Ave, 203 City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. Alexandria, VA 22303-1448 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 Form 990-T (corporation) 07 Form 5330 (other than individual) 14 08 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of Jason C. Johnson 2560 Huntington Ave, 203 - Alexandria, VA 22303-1448 Telephone No. (703) 807-1875 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If it is for part of the group, check this box _____ and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until November 15, 20, 24, to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or , 20 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 0. using EFTPS (Electronic Federal Tax Payment System). See instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2024)