

Public Disclosure for Tax-Exempt Organizations

Tax-exempt organizations are required to make a copy of their application for exemption and Form(s) 990 (and 990-T, if applicable) available for public inspection and to provide copies of such forms to individuals or organizations that request copies. Alternatively, the Internet may be used to make these documents available. (See the "Using the Internet" section which follows.) These rules apply to an organization's Form(s) 990 (and 990-T, if applicable) for the last three years and to its application for exemption. If the application was filed prior to July 15, 1987, disclosure is not required unless the organization had a copy of the application on July 15, 1987. An organization may omit names and addresses of contributors from its return(s). Failure to comply with disclosure requirements can result in an enforcement action by the IRS.

While disclosure rules create an additional burden, they also provide an opportunity for your organization to showcase the community benefits that it provides. The rules also heighten the need to carefully review all responses, including narrative explanations, contained on your Form(s) 990/990-T before filing.

Where Must Information Be Provided?

Generally, an organization must make its documents available for public inspection at any location where it has three or more employees. If the only services provided at the site are in furtherance of exempt purposes and the site does not serve as an office for management staff, the documents are not required to be made available there.

How Quickly Must Organizations Reply?

Requests for copies can be made in person or in writing. When requests are made in person, the copies must generally be provided on the same business day. There are provisions for delays due to unusual circumstances. However, in no event may the period of delay exceed five business days. Unusual circumstances include times when those staff that are capable of fulfilling a request are absent.

Written Requests

Requested copies generally must be mailed within 30 days from the date of the receipt of the written request. However, if the organization requires advance payment of a reasonable fee for copying and postage, it may provide the copies within 30 days from the date it receives payment rather than the date of the original request.

What Can an Organization Charge?

You are currently allowed to charge a maximum fee of \$.20 cents per page in addition to actual postage costs.

¹ Certain information within an application for exemption can be withheld from public inspection if public availability would adversely affect the organization, e.g., information relating to a trade secret, patent, process, style of work or apparatus of the organization.

If any organization receives a written request for copies with no payment enclosed and the organization requires payment in advance, the organization must request payment within seven days from the date it received the request. An organization is required to accept a personal check for written requests if it does not accept payment by credit card. If an organization does not require prepayment and the requester does not enclose a prepayment with the request, the organization must receive consent from a requester before providing copies for which the fee charge for copying and postage would be in excess of \$20.

Local or Subordinate Organizations

A local or subordinate organization that is covered by a group exemption letter is given additional time for responding to some requests. If this type of organization receives a request made in person for inspection of its application for tax exemption, the local organization is required to acquire and make available the application for a group exemption letter filed by the central or parent organization within not more than two weeks. The same general rule would apply with respect to a local or subordinate organization that does not file its own Form(s) 990/990-T but is covered under a group return. Again, the local or subordinate organization must make the group return available for inspection within a reasonable period which is defined as not more than two weeks. If the group return includes separate schedules with respect to each local or subordinate organization, the local or subordinate organization may exclude or omit any schedules relating only to other organizations which are included in the group return.

If a request is made for a personal inspection to a local or subordinate organization, it has the option of mailing the return to the requester rather than allowing an inspection. However, if this is done, the local or subordinate organization may not charge for the copying of the document unless the requester consents to the charge. If a local or subordinate organization receives a request for copies, then it must comply with the rules stated previously.

Using the Internet

As an alternative to providing copies, an organization may provide access to its exemption application and Form(s) 990 (and 990-T, if applicable) through the Internet. The website must provide instructions for downloading the document(s). The information on the Internet must be in such a format that it may be accessed, downloaded, viewed or printed in the same format as the actual documents. An organization would need to make the web address available to the general public.

There is nothing that prevents others from posting your Forms 990, 990-T and exemption application on the Internet. Based on this fact and the potential strain on your organization's resources from providing copies, organizations should consider posting these documents on the Internet.

What if the Requests Are a Form of Harassment?

If an organization believes it is subject to a harassment campaign, it can file an application for a harassment determination with the Internal Revenue Service. This would allow the organization to suspend compliance with these requests. In addition, an organization may disregard requests for copies in excess of two per month or four per year made by a single individual or sent from a single address, without submitting an application for a harassment determination.

Please contact your BKD advisor if you have questions about these rules.

BKD TAX506 9-11

Public Disclosure Rules

AAPL EDUCATION FOUNDATION, INC. FORM 990 TAX YEAR 2018





777 Main Street, Suite 2000 | Fort Worth, TX 76102-5332 | 817.332.2301

AAPL Education Foundation, Inc. 800 Fournier St. Fort Worth, TX 76102

Enclosed are the following income tax returns prepared on behalf of AAPL Education Foundation, Inc. for the year ended June 30, 2019.

2018 990-T - Exempt Organization Business Income Tax Return 2018 990 - Return of Organization Exempt from Income Tax 2018 8879-EO - IRS E-file Signature Authorization Form

The original of each of the above mentioned returns should be dated and signed in accordance with the following instructions included with the copy of the return. This copy is for your use and should be retained for your files.

Upon an audit of the return(s), requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records.

An additional copy of the Form 990 has been included, to be made available for public inspection upon request. Please note that all statements of donors' contributions are not subject to public inspection and have been removed, as appropriate.

Form 990 must be made available for public inspection for a period of three years, beginning with the date the return is filed. The available document must be an exact copy of the return and schedules as filed with the IRS, except that the names and addresses of the contributors may be excluded. Any organization that fails to comply with this provision is subject to a penalty of \$20 for each day that inspection is not permitted, up to a maximum of \$10,000. Any organization that willfully fails to comply shall be subject to an additional penalty of \$5,000. You are also required to provide copies of the return if you receive such a request. Should you receive a request for inspection or for copies of your return, you may want to contact us for further details.

These return(s) were prepared from information provided by you or your representative. The preparation of tax returns does not include the independent verification of information used. Therefore, we recommend you review the return(s) before signing to ensure there are no omissions or misstatements. If you note anything which may require a change to the return(s), please contact us before filing them. We recommend that you retain all pertinent records that support the information reported on your return.

Before preparing your tax return, we provided you with access to a summary of transactions identified by the U.S. Treasury as reportable transactions. The law provides for a penalty as high as \$200,000 per transaction for failure to adequately disclose any of them on your tax return if applicable. Unless you notified us otherwise, your tax return was prepared with the assumption you have not engaged in any reportable transaction. Otherwise, we have prepared your tax return in accordance with the information you provided to us and have attached the appropriate disclosure statement to your tax return. We are not liable for any penalties resulting from your failure to provide us with accurate and timely information about such transactions or to timely file the required disclosure statements. If you have any questions about reportable transactions, please contact us before filing your return.

We appreciate this opportunity to serve you. Please contact us if you have any questions or if we may be of further assistance.

Sincerely,





777 Main Street, Suite 2000 | Fort Worth, TX 76102-5332 | 817.332.2301

AAPL Education Foundation, Inc.
Instructions for Filing
Form 990-T
990-T - Exempt Organization Business Income Tax Return
For the year ended June 30, 2019

The original return should be signed (using full name and title) and dated on page 2 by an authorized officer of the organization.

File the signed return by July 15, 2020 with:

Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027

There is no tax due with the filing of this return.

Under current IRS regulations, your return is subject to public inspection. Before filing, you should review all information in this return to determine that the disclosures are appropriate, accurate and complete. Please contact us if you believe any of the disclosures should be modified.

To document the timely filing of your tax return(s), we suggest that you obtain and retain proof of mailing. Proof of mailing can be accomplished by sending the tax return(s) by registered or certified mail (metered by the U.S. Postal Service) or through the use of an IRS approved delivery method provided by an IRS designated private delivery service.

No estimated tax payments for 2019 will be required, nor will you be subject to underpayment penalties because you have no 2018 tax liability.





777 Main Street, Suite 2000 | Fort Worth, TX 76102-5332 | 817.332.2301

AAPL Education Foundation, Inc.
Instructions for Filing
Form 8879-EO
IRS e-file Signature Authorization for Form 990
For the year ended June 30, 2019

The original IRS E-file Signature Authorization form should be signed (use full name) and dated by an authorized officer of the organization.

Return your signed IRS e-file Signature Authorization Form 8879-EO to:

BKD, LLP 777 Main Street, Suite 2000 Fort Worth, TX 76102

Fax 817.338.4608 Attn: FWO Efile

efileFortWorth@bkd.com

There is no tax due with the filing of this return.

Under current IRS regulations, your return is subject to public inspection. Before filing, you should review all information in this return to determine that the disclosures are appropriate, accurate and complete. Please contact us if you believe any of the disclosures should be modified.

Do NOT separately file Form 990 with the Internal Revenue Service. Doing so will delay the processing of your return. We must receive your signed form before we can electronically transmit your return, which is due on or before July 15, 2020. We would appreciate you returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of your return.

Form **8879-EO**

IRS e-file Signature Authorization

an	Exem	pt	Org	gan	izati	ion	
	07/		•	_			- 120

For calendar year 2018, or fiscal year beginning 07/01, 2018, and ending 06/30

▶ Do not send to the IRS. Keep for your records.

OMB No. 1545-1878

Department of the Treasury ▶ Go to www.irs.gov/Form8879EO for the latest information. Internal Revenue Service Name of exempt organization Employer identification number AAPL EDUCATION FOUNDATION, INC. 23-7243157 Name and title of officer GRETA ZEIMETZ, EXECUTIVE VP OF AAPL Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I. X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . 1b 1a Form 990 check here ▶ b Total revenue, if any (Form 990-EZ, line 9) 2b Form 990-EZ check here ▶ **b** Total tax (Form 1120-POL, line 22) 3b Form 1120-POL check here b Tax based on investment income (Form 990-PF, Part VI, line 5). 4b Form 990-PF check here ▶ Form 8868 check here ▶ **Declaration and Signature Authorization of Officer** Part II Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only Lauthorize BKD, LLP to enter my PIN as my signature ERO firm name Enter five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 5 3 8 0 4 4 0 1 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ERO's signature ▶ **ERO Must Retain This Form - See Instructions** Do Not Submit This Form To the IRS Unless Requested To Do So For Paperwork Reduction Act Notice, see back of form. Form **8879-EO** (2018)

Return of Organization Exempt From Income Tax

Department of the Treasury

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or th	e 2018 calendar year, or tax year beginning 07/01, 2018, and	endina	0	6/30, 20 19	V.I.		
		C Name of organization	· · · · · · · · · · · · · · · · · · ·	D Employer identif				
B c	heck if a	AAPL EDUCATION FOUNDATION, INC.						
	Addre	Poing Puginger As		23-724315	57			
	Chang		n/suite	E Telephone numb				
	+	return 800 FOURNIER ST.		(817) 847-	7700			
	Term	City of the property and 7ID or foreign protected		(02) / 02)				
	Amer			G Gross receipts \$	660	,791.		
	returi Appli	F Name and address of principal officer: GRETA ZETMETZ		H(a) Is this a group re		X No		
_	_ pend	SAME AS C ABOVE, FORT WORTH, TX 76102		subordinates? H(b) Are all subordinates	\vdash	No		
_	Tay-ey	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	1 ' '	ist. (see instructions)			
		te: > WWW.LANDMAN.ORG	321	H(c) Group exemption				
_			Vear of forma	tion: 1983 M Stat		TX		
	art I	Summary	- rear or forma	tion. 2000 III Otal	e or regar dormene.			
		Briefly describe the organization's mission or most significant activities: PROMOTE E	DUCATION	IAL PROGRAMS	CONCERNIN	 G		
Ф	•	THE PETROLEUM, MINERAL, AND ENERGY INDUSTRIES FOR TH	IE MEMBER	RS OF AAPL				
anc		AND THE GENERAL PUBLIC.						
Governance	2	Check this box ▶ if the organization discontinued its operations or disposed of m	 nore than 25%	of its net assets				
<u>3</u> 6	3			١		8.		
ૐ	4	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)				8.		
ies	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)				0.		
Activities &	6					9.		
Act	_	Total unrelated business revenue from Part VIII, column (C), line 12				0		
		Net unrelated business taxable income from Form 990-T, line 34			+	0		
		The difference business taxable modifier from 600 T, mile of T,		Prior Year	Current Y	ear		
	8	Contributions and grants (Part VIII, line 1h)		700,718.		1,635		
nue	9	Program service revenue (Part VIII, line 2g) Program service revenue (Part VIII, line 2g) Public Inspec	₹	0.		0		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	CTION	195,098.	273	L,474		
Ř	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,800.		1,499		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		897,616.		1,608		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		667,800.	76	5,755		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.		0		
w	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						
Expenses	l	Professional fundraising fees (Part IX, column (A), line 11e)		0.		0		
Бe		Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.						
ω	l	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		39,767.	39	9,486		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		707,567.	116	5,241		
	19	Revenue less expenses. Subtract line 18 from line 12		190,049.	158	3,367		
oc		·	Begir	nning of Current Year	End of Yea	ar		
sets	20	Total assets (Part X, line 16)		4,182,158.	4,394	1,566		
ASS	21	Total liabilities (Part X, line 26)		3,813.	18	3,105		
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20.		4,178,345.	4,376	5,461		
Pa	rt II	Signature Block	·		•			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules an			knowledge and b	elief, it is		
Tiue	s, corre	ct, and complete. Declaration of preparer (other than officer) is based on an information of which pre-	parer rias arry k	Tiowieage.				
C: -								
Sig		Signature of officer		Date				
пе	е							
		Type or print name and title						
Paic			ate 06/11/202	Check if	PTIN			
	ı oarer	KEVIN ENSMINGER Series	06/11/202	oon omployed	P01310558 -0160260			
	Only	Firm's name ▶ BKD , LLP	m's name BKD, LLP					
		Firm's address > 777 MAIN STREET, SUITE 2000 FORT WORTH, TX 76102		Phone no. 81	7.332.2301			
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes	No		

JSA 8E1065 1.000

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

AAPL EDUCATION FOUNDATION, INC. 23-7243157 Form 990 (2018) Page 2 Part III **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: ATTACHMENT 1 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?..... 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 \$ 67,410. including grants of \$ 66,755.) (Revenue \$ TO PROVIDE ASSISTANCE TO PROMOTE EDUCATION FOR THE MEMBERS OF AAPL AND THE GENERAL PUBLIC. 4b (Code:) (Expenses \$ 10,000. including grants of \$ 10,000.) (Revenue \$ TO PROVIDE DISASTER RELIEF TO THOSE WITHIN THE PETROLEUM, MINERAL, AND ENERGY INDUSTRIES.) (Revenue \$ **4c** (Code: including grants of \$ 4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$

4e Total program service expenses ▶

77,410.

Form **990** (2018)

Form 990 (2018) Page **3**

Part IV **Checklist of Required Schedules** Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Χ 1 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Χ 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Χ Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Χ 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 Χ "Yes," complete Schedule D, Part I. 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Χ the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Χ complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or Χ 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 10 Χ 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Χ 11a b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more Χ of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII........... Χ d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Χ 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Χ b Was the organization included in consolidated, independent audited financial statements for the tax year? If Х "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Χ 13 Χ 14a Did the organization maintain an office, employees, or agents outside of the United States?.......... **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 Χ foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Χ for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Χ assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Χ Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)........... 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Χ Χ b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Χ domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Form 990 (2018) Page 4

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation 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 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		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		v	
_	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			ب.
_			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		37	
	reportable gaming (gambling) winnings to prize winners?	1c	X	(0015)
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Par	t 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 0.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
7 U	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country:			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 0	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
		5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	60		Х
	solicit any contributions that were not tax deductible as charitable contributions?	6a		- 25
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ch		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			Х
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		37
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			3.5
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Part VI

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	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			tions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
Sect	ion A. Governing Body and Management		V	
	1.		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 in Schedule O.	8		
b	Enter the number of voting members included in line 1a, above, who are independent 1b	8		
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, or 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		X
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		X
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		Х
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	X	
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? <i>If</i> "Yes," <i>provide the names and addresses in Schedule</i> O	9		х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in 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		X
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	1 C h		
Socti	organization's exempt status with respect to such arrangements?	16b		<u> </u>
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O)	T (Sec	tion 5	01(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record amanda Johnson 800 Fournier Street Fort Worth, TX 76102' 817-747-7700	ds ►		

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."

(B)

5.00

40.00

Name and Title

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

> (C) Position

(do not check more than one

(D)

(E)

(F)

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Name and Title	Average hours per week (list any	box, unless person is both an officer and a director/trustee)					an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)	1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)DAMON WEGER	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(2)ROGER SOAPE	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(3)CYNTHIA PERDUE	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(4)MICHAEL PISCIOTTE	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(5)RICHARD RYAN	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(6)AARON YOST	3.00									
CHAIRMAN	0.	Х		Х				0.	0.	0.
(7)LINDSEY MILES	2.00									
DIRECTOR	0.	X						0.	0.	0.
(8) RANDALL BOATRIGHT	2.00									
DIRECTOR	0.	X						0.	0.	0.
(9)MELANIE BELL	2.00									
EXEC. VP OF AAPL	40.00			Х				0.	305,175.	44,894.
(10)AMANDA JOHNSON	2.00									
CHIEF ACCOUNTING OFFICER	40.00			Х				0.	108,360.	11,644.
~ ~ ~		1	1	1	1	1		1		

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(12)

(13)

(14)

JSA

(11) STACEY GARVIN

DIRECTOR OF EDUCATION

0

134,288

18,290.

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Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plc	ye	es,	and I	ligl	hest Compensat	ed Emplo	yees (co	ontinue	d)	
-	(A)	(B)			((C)			(D)	(E)			(F)	
	Name and title	Average				sition			Reportable	Reporta	able	Est	imated	
		hours per	,	(do not check more than one			compensation	compensati	I		ount of			
		week (list any	1	box, unless person is both officer and a director/trus					from	relate			ther	
		hours for related						_	the	organiza	I		ensation	on
		organizations	Individual trustee or director	Institutional trust	Officer	Key employee	nplo	Former	organization (W-2/1099-MISC)	(W-2/1099	i-MISC)		nization	n
		below dotted	dua	l tio	1 4) j	est c	<u>e</u>	(**-2/1099-101130)			_	related	
		line)	= =	nal 1		oye	° ä					orga	nization	ıs
			stee	Sur		Ф) en							
				:ee			Highest compensated employee							
							ă							
			-											
			1											
									0.	E 47	,823.		74,8	20
1b	Sub-total									347			/4,0	
	Total from continuation sheets to Part VII, S	-							0.	5.45	0.		7.4.0	0.
	Total (add lines 1b and 1c)							<u> </u>	0.		,823.		74,8	28.
2	Total number of individuals (including but not		hose	liste	d al	bove	e) who	o re	eceived more than	\$100,000	of			
	reportable compensation from the organization	n ▶	0.											
													Yes	No
3	Did the organization list any former office	er. directo	r. or	tru	ıste	e.	kev e	amp	olovee, or highest	compens	sated			
-	employee on line 1a? If "Yes," complete Sched											3		X
4	For any individual listed on line 1a, is the													
	organization and related organizations gre											4	Х	
_	individual											4	21	
5	Did any person listed on line 1a receive or											_		37
_	for services rendered to the organization? If "Yo	es," comple	te Sch	nedu	ıle J	<i>i</i> tor	such	per	son			5		X
	ction B. Independent Contractors													
1	Complete this table for your five highest com													
	compensation from the organization. Report of	ompensati	on for	the	ca	lend	dar ye	ar e	ending with or with	in the org	anizatior	n's tax		
	year.													
	(A)								(B)			(C)		

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \blacktriangleright 0.

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Part VIII Statement of Revenue

		Check if Schedule O contains a response	onse or note to ar	ny line in this Part V	III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	1,635.	1,635.			
านค			Business Code				
Program Service Revenue	2a b c d e f g	All other program service revenue Total. Add lines 2a-2f		0.			
	3	Investment income (including divide	ends, interest,				
		and other similar amounts)		76,984.			76,984.
	4 5	Income from investment of tax-exempt bor Royalties		1,499.			1,499.
	6a b c	Gross rents	(ii) Personal	0.			
	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses					
	d	Net gain or (loss)	▶	194,490.			194,490.
Other Revenue	8a b	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
	С	Net income or (loss) from fundraising event		0.			
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses		0			
	10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances		0.			
	b c	Less: cost of goods sold	b 0.	0.			
		Miscellaneous Revenue	Business Code				
	11a b c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		0.			
	12	Total revenue. See instructions		274,608.			272,973.

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21	66,755.	66,755.									
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22	10,000.	10,000.									
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16	0.										
4	Benefits paid to or for members	0.										
5	Compensation of current officers, directors,											
	trustees, and key employees	0.										
6	Compensation not included above, to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)	0.										
7	Other salaries and wages	0.										
8	Pension plan accruals and contributions (include	0										
	section 401(k) and 403(b) employer contributions)	0.										
9	Other employee benefits	0.										
10	Payroll taxes	0.										
	Fees for services (non-employees):	0.										
	Management	3,638.		3,638.								
	Legal	8,281.		8,281.								
	Accounting	0,201.		0,201.								
	Lobbying	0.										
	Professional fundraising services. See Part IV, line 17.	21,161.		21,161.								
	Investment management fees	21/1011		21/101.								
y	Other. (If line 11g amount exceeds 10% of line 25, column	0.										
12	(A) amount, list line 11g expenses on Schedule C.) Advertising and promotion	2,696.		2,696.								
13	Office expenses	1,042.	655.	387.								
14	Information technology	0.										
15	Royalties	0.										
16	Occupancy	97.		97.								
17	Travel	0.										
	Payments of travel or entertainment expenses											
-	for any federal, state, or local public officials	0.										
19	Conferences, conventions, and meetings	0.										
20		0.										
21	Payments to affiliates	0.										
22	Depreciation, depletion, and amortization	0.										
23	Insurance	0.										
24	Other expenses. Itemize expenses not covered											
	above (List miscellaneous expenses in line 24e. If											
	line 24e amount exceeds 10% of line 25, column											
	(A) amount, list line 24e expenses on Schedule O.)	0 551		0 551								
а	MISCELLANEOUS	2,571.		2,571.								
b	·											
C												
d												
	All other expenses	116,241.	77 /10	20 021								
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	110,241.	77,410.	38,831.								
20	organization reported in column (B) joint costs from a combined educational campaign and											
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0.										
		٠٠			İ							

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Part X Balance Sheet

1 6	III				
		Check if Schedule O contains a response or note to any line in this P	art X		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	173,845.	1	112,454.
	2	Savings and temporary cash investments	0.	2	0.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	9,650.	4	0.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0.	5	0.
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	0.		0.
ţ		organizations (see instructions). Complete Part II of Schedule L	0.	6 7	0.
Assets	7	Notes and loans receivable, net	0.		0.
Ÿ	8	Inventories for sale or use	0.	8	0.
	9	Prepaid expenses and deferred charges	0.	9	0.
	IUa	Land, buildings, and equipment: cost or			
	h	other basis. Complete Part VI of Schedule D Less: accumulated depreciation	0	10c	0.
	11		0.		0.
	12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11	3,987,553.	12	4,281,962.
	13	Investments - program-related. See Part IV, line 11	0.	13	0.
	14		0.	14	0.
	15	Intangible assets Other assets. See Part IV, line 11	11,110.	15	150.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,182,158.	16	4,394,566.
_	17	Accounts payable and accrued expenses	1,300.	17	14,655.
	18	Grants payable	0.	18	0.
	19	Deferred revenue	0.		0.
	20	Tax-exempt bond liabilities	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.		0.
Ś	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
abil		disqualified persons. Complete Part II of Schedule L	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.		0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	_	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	2,513.	25	3,450.
	26	Total liabilities. Add lines 17 through 25	3,813.	26	18,105.
es		Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	4,158,345.	27	4,356,461.
Fund Balances	28	Temporarily restricted net assets	0.	28	0.
ğ	29	Permanently restricted net assets	20,000.	29	20,000.
or Fur		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	4,178,345.	33	4,376,461.
_	34	Total liabilities and net assets/fund balances	4,182,158.	34	4,394,566.
			. ,	, J.	Earm QQ1 (2010

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Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1			74,6		
2	Total expenses (must equal Part IX, column (A), line 25)	2			16,2		
3	Revenue less expenses. Subtract line 2 from line 1	3			58,3		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,178,345			
5	Net unrealized gains (losses) on investments	5		39,749.			
6	Donated services and use of facilities	6				0.	
7	7 Investment expenses						
8	Prior period adjustments	8				0.	
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		4,3	76,4	61.	
Part	·						
	Check if Schedule O contains a response or note to any line in this Part XII						
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O.					37	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or				
	reviewed on a separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis				х		
b	Were the organization's financial statements audited by an independent accountant?			2b	Λ		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted or	na				
	separate basis, consolidated basis, or both:						
	Separate basis X Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for		-	2c	x		
	of the audit, review, or compilation of its financial statements and selection of an independent acc			20	21		
	If the organization changed either its oversight process or selection process during the tax year, e	explain	ın				
_	Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	ın	3a		Х	
1-	the Single Audit Act and OMB Circular A-133?						
a	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		ıne	3b			
	required addition addition, explain with the defined of and describe any steps taken to dideigo such ad	uito.		30			

Form **990** (2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AAPL EDUCATION FOUNDATION, INC.

Employer identification number 23-7243157

Рa	rt I	Reason for Public Cha	rity Status (All c	rganizations must o	omplet	e this pa	art) See instructions	
		anization is not a private fou	<u> </u>					<u>. </u>
1		A church, convention of chu		•			,	
2		·	·					
3		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4	\vdash	A medical research organiz	-	-				(iii) Entar tha
4		-		conjunction with a nos	spilai de	scribed ii	Section 170(b)(1)(A)	(III). Enter the
_		hospital's name, city, and st An organization operated t		a aallaga ay uniyayai		d ar ana	watad bu a gayawana	ntal unit dagarihad in
5				a college of universit	y owner	or ope	erated by a governme	ntai unit described in
_		section 170(b)(1)(A)(iv). (C				470/	1 \/4\/4\/ \	
6		A federal, state, or local go	•			,	,,,,,,,	
7		An organization that norma	-	· · · · · · · · · · · · · · · · · · ·	pport fro	om a go	vernmental unit or fro	om the general public
_		described in section 170(b)			5			
8		A community trust describe						
9		An agricultural research org						
		or university or a non-land-	grant college of ac	griculture (see instruct	ions). Ei	nter the	name, city, and state of	the college or
		university:						
0		An organization that norma receipts from activities rela	lly receives: (1) m	ore than 331/3 % of its	support	from co	ntributions, membersh	nip fees, and gross
		support from gross investm	nent income and u	nrelated business tax	able inco	me (les	s section 511 tax) from	businesses
		acquired by the organizatio	n after June 30, 1	975. See section 509 ((a)(2). (C	Complete	Part III.)	
1		An organization organized	•		•		` '` '	
2	X	An organization organized	•	•				• • • •
		of one or more publicly su	· ·					
		Check the box in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	zation and complete lir	nes 12e, 12f, and 12g.
а	L	$\stackrel{ ext{X}}{}$ Type I. A supporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supported organization	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	_	_ supporting organization.	You must complet	e Part IV, Sections A	and B.			
b			anization supervise	ed or controlled in co	nnection	with its	supported organization	on(s), by having
		control or management of	of the supporting o	rganization vested in	the sam	e persor	ns that control or man	age the supported
		organization(s). You must						
С		Type III functionally integ	grated. A supporti	ng organization opera	ited in co	onnectio	n with, and functional	ly integrated with,
		its supported organization						
d		Type III non-functionally		•				ted organization(s)
		that is not functionally inte			-			
		requirement (see instruct	-		-		· · · · · · · · · · · · · · · · · · ·	
е		Check this box if the orga	anization received	a written determinatio	n from t	he IRS tl	hat it is a Type I, Type I	I, Type III
		functionally integrated, or	Type III non-funct	ionally integrated sup	porting o	rganizat	ion.	
f	En	ter the number of supported	l organizations					1
g	Pro	ovide the following information	on about the suppo	orted organization(s).				
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
I	ATTA	ACHMENT 1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	,	
A)								
B)								
C)								
D)								
E)								
Γot	al						40,200.	
							,	

Page 2 Schedule A (Form 990 or 990-F7) 2018

Ochice	duic / (1 01111 330 01 330 LZ) 2010						i age 📥
Par		ed the box on	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua)(vi)
		is to quality u	nder the tests	iisted below, p	nease comple	te Part III.)	
	tion A. Public Support	() 0044	42.0045	() 0040	(1) 0047	() 0040	(O. T.). I
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization'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						
5	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) Public support. Subtract line 5 from line 4						
6	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
_	Amounts from line 4	(a) 2014	(b) 2013	(6) 2010	(d) 2017	(6) 2010	(i) Total
7 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f						
Sec	organization, check this box and stop here tion C. Computation of Public Sup						▶
3ec 14	<u> </u>	•		11 column (f)\		14	%
14 15	Public support percentage for 2018 (li Public support percentage from 2017	·					
	331/3% support test - 2018. If the or						
. Ja	box and stop here . The organization q	-					
b	331/3% support test - 2017. If the org			-			
		=					
17a	this box and stop here . The organization qualifies as a publicly supported organization						
b	organization	2017. If the organization meets	ganization did r s the "facts-an	ot check a box d-circumstances	on line 13, 16 to test, check t	a, 16b, or 17a his box and s	i, and line top here.
18	supported organization						▶ ∟

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Page 3

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.)

Sec	tion A. Public Support			, p. ca. c	oproto : at	,	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 20	(3) 20:0	(0) 20 10	(4) 20	(0) 20 . 0	(1) 10101
•	, ,						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	'						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Ŭ	line 6.)						
500	tion B. Total Support						
		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2014	(6) 2013	(6) 2010	(u) 2011	(6) 2010	(i) rotai
9	Amounts from line 6. Gross income from interest, dividends,						
iva	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	or the organiza	tion's first, seco	nd, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop here.						▶ ┌
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2018 (line 8,			mn (f))		. 15	%
16	Public support percentage from 2017 Sche					16	%
_	tion D. Computation of Investment					1 1	70
	Investment income percentage for 2018 (lin			13 column (f))		17	%
17							%
18	Investment income percentage from 2017 S						
19 a	331/3% support tests - 2018. If the org						
_	17 is not more than 331/3%, check thi			•		•	
b	331/3% support tests - 2017. If the orga						
	line 18 is not more than 331/3 %, check						
20	Private foundation If the organization of	did not check	a hov on line	1/1 10a or 10k	n chack this h	ny and saa ins	tructions -

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Schedule A (Form 990 or 990-EZ) 2018 Page **4**

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 in 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.**
- 10 a 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 10b below.
 - 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.)

		Yes	No
g by			
	1	Х	
ıs ed			
	2		X
er	3a	X	
id ie			
	3b	X	
3)			
	3с		X
If	4a		X
n n			
	4b		
n ed 3)			
	4c		
s," 'N n;			
n			
	5a		X
ly	5b		
	5с		
o d or			
	6		X
or :y			
	7		X
?	8		X
e d			
	9a		X
h	9b		X
fit			
	9с		X
n d			
	10a		X
to	10b		

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				- 3
Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	110		Х
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
	on B. Type I Supporting Organizations	110		
	on an experiment of games and the second		Yes	No
4	Did the directors trustees or membership of one or more supported organizations have the newer to			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Х	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	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.			37
Sooti	on C. Type II Supporting Organizations	2		X
secu	on C. Type ii Supporting Organizations		Yes	Na
	Many and the first of the constant of the Prophers on the stand of the foreign of the constant of the Prophers		162	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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		
Secti	on 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 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	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	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	By reason of the relationship described in (2), did the organization's supported organizations have a 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		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.		/	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instruc	ctions)	
2	Activities Test Anguar (a) and (b) helow		Yes	No
2 a	Activities Test. <i>Answer (a) and (b) below.</i> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
а	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		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, 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 these activities but for the organization's involvement.	21-		
_		2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the arganization have the power to regularly appoint or elect a majority of the officers directors or			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- Ju		
~	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	s	201
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (expla	in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organization	zations r	nust complete Sectio	
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year	
		(71) Thor Tear	(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		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
		(A) I Hol Teal	(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):			
a 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		
e 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 1-1/2% 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 .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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-functionall	y integra	ited Type III supporting	g organization (see
instructions).	. 0	21 11 1	,

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Page **7**

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish ex						
2	Amounts paid to perform activity that directly furthers exer						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018						
	(reasonable cause required - explain in Part VI). See						
	instructions.						
3	Excess distributions carryover, if any, to 2018						
а	From 2013						
b	From 2014						
С	From 2015						
d	From 2016						
е	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from						
	Section D, line 7: \$						
a	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
a	Excess from 2014						
b	Excess from 2015						
С	Excess from 2016						

Schedule A (Form 990 or 990-EZ) 2018

d Excess from 2017
e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018 Page **8**

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART IV, SECTION A, LINE 3B

THE FOUNDATION OBTAINED THE SUPPORTED ORGANIZATION'S IRS

DETERMINATION LETTER AND REVIEWED THE SUPPORTED ORGANIZATION'S PRO

FORMA SCHEDULE A, PART III FOR THE MOST RECENT TAX YEAR.

				ATTACHMENT 3	1
SCHEDULE A, PART I - INFORMATION ABOUT	SUPPORTED (ORGANIZATIO	NS		
		(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) OTHER
(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	ORGANIZATION	YES NO	SUPPORT	SUPPORT AMOUNT
AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN	75-0975500	10	Х	40,200.	0.
TOTAL AMOUNT OF SUPPORT				40,200.	

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

► 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
2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification num

	e of the organization	Employer identification number
AAI	PL EDUCATION FOUNDATION, INC.	23-7243157
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
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 writing that the assets held in	donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	
•	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	
Ps	Int II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		a historically important land area
		a certified historic structure
	Preservation of open space	a certified filstoffe structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	no form of a conservation
_	easement on the last day of the tax year.	Held at the End of the Tax Year
_		
а		2a
b		2b
C	(*,************************************	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
_		2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminal	ted by the organization during the
	tax year	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspectio	-
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conse	ervation easements during the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cor	servation easements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	n 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	Yes 🗀 No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and e	expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial	statements that describes the
	organization's accounting for conservation easements.	
Pa	organizations Maintaining Collections of 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 SFAS 116 (ASC 958), not to report in its re	venue statement and balance sheet
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re works of art, historical treasures, or other similar assets held for public exhibition, educa public service, provide, in Part XIII, the text of the footnote to its financial statements that described to the footnote to its financial statements.	ation, or research in furtherance of
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its rev	
b	works of art, historical treasures, or other similar assets held for public exhibition, educations	
	public service, provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar as	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	-
а	Revenue included on Form 990, Part VIII, line 1	
b		

Page 2 Schedule D (Form 990) 2018

Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, or Other	Similar Assets (d		age =
3	Using the organization's acquisition	on, accession, and c	other records, chec	k any of the follow	ving that are a sigr	nificant use o	of its
	collection items (check all that app	ly):					
а	Public exhibition		d Loan	or exchange progra	ms		
b	Scholarly research		e Othe	·			
С	Preservation for future gene	rations					
4	Provide a description of the organ	nization's collections	and explain how	they further the or	ganization's exemp	t purpose in	Part
	XIII.						
5	During the year, did the organization				_		_
	assets to be sold to raise funds rath		ained as part of the	organization's colle	ction?	Yes	No
Pa	rt IV Escrow and Custodial A					_	
	Complete if the organiza	ition answered "Ye	s" on Form 990,	Part IV, line 9, or r	eported an amour	nt on Form	
	990, Part X, line 21.						
1a	Is the organization an agent, truste						٦
	included on Form 990, Part X?					Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	lete the following ta	ıble:			
					Amount		
С	Beginning balance						
	Additions during the year						
е	Distributions during the year						
f	Ending balance			1f		126	T
	Did the organization include an am					Yes	No
	If "Yes," explain the arrangement in	n Part XIII. Check he	ere if the explanation	n has been provided	on Part XIII		
Pa	tt V Endowment Funds.	otion anawarad "Va	o" on Form 000	Dort IV line 10			
	Complete if the organiza				(D T)	() =	
	•	(a) Current year	(b) Prior year 26,000.	(c) Two years back	(d) Three years back	(e) Four years	
1a	Beginning of year balance	20,000.	26,000.	26,000.	26,000.	20	,000
b	Contributions						
С	Net investment earnings, gains,	710		0.6	1 715	1	753
	and losses	718.		86.	1,715.		,753
d	Grants or scholarships						
е	Other expenditures for facilities	710	6 000	0.0	1 715	1	752
	and programs	718.	6,000	86.	1,715.		<u>,753</u>
f	Administrative expenses	20,000.	20,000.	26,000.	26,000.	26	
g	End of year balance					∠ 0	,000
2	Provide the estimated percentage			ı, column (a)) held as	:		
a	Board designated or quasi-endowm Permanent endowment ► 100.0		_%				
С	Temporarily restricted endowment The percentages on lines 2a, 2b, a		000/				
2-	,	•		sara hald and admi	siatara d far tha		
3a	Are there endowment funds not in	the possession of the	ie organization tha	are neid and admii	listered for the	Yes	No
	organization by:						X
	(i) unrelated organizations					3a(i) 3a(ii)	X
L	(ii) related organizations If "Yes" on line 3a(ii), are the relate					3b	- 21
ь 4	Describe in Part XIII the intended u	•	•			30	
_							
Га	Complete if the organiza	ation answered "Ye	es" on Form 990,	Part IV, line 11a.	See Form 990, Pa	rt X, line 10).
	Description of property	(a) Cost or	other basis (b) Cost	or other basis (c) Ac	cumulated (d) Book value	
10	Land		inietit)	other) depi	reciation		
_							
b	Buildings						
q	Leasehold improvements						
d	Equipment						
	Other		n 000 Part V colum	n (R) line 10c l			
iota	ı. Add iilles Ta till büğli Te. (C <i>01011111</i>	(u) musi equal rom	ı σσυ, rarı Λ, coluli	ייין, וווו כ וטט.) וווו וווי	🖊		

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Page **3**

Part VII Investments - Other Securities. Complete if the organization answered	d "Yes" on Form 990, F	Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) FROST BANK/BRAND	24,417.	FMV
(B) FROST BANK CUSTODY ACCOUNT/LKC	4,257,545.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)	4 201 062	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	4,281,962.	
Part VIII Investments - Program Related. Complete if the organization answere	d "Yes" on Form 990, F	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)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets. Complete if the organization answere	d "Yes" on Form 990 F	Part IV, line 11d. See Form 990, Part X, line 15.
	escription	(b) Book value
(1)		(2) 2001. 14.40
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B)	line 15.)	▶
Part X Other Liabilities. Complete if the organization answered line 25.	d "Yes" on Form 990, F	Part IV, line 11e or 11f. See Form 990, Part X,
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DUE TO AAPL	3,45	50.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 3,45	0.
2. Liability for uncertain tay positions. In Part VIII, provide the	4 4 - £ 41 £ 4 - 4 - 4 - 4	annuing tingle financial at the contact that annuals the

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018 Page 4

	e D (Form 990) 2018		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	293,196.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	39,749.
3	Subtract line 2e from line 1	3	253,447.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	<u>-</u>	
b	Other (Describe in Part XIII.)	4.	21,161.
C	Add lines 4a and 4b	4c	274,608.
5 Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		271,000.
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ai i i.	
1	Total expenses and losses per audited financial statements	1	95,080.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
– a	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	95,080.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 21,161		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	21,161.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	116,241.
	XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III,	ort \/_lin	o 4: Port V line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		€ 4, Fait ∧, IIII E
	PAGE 5		
	TAGE J		

JSA 8E1271 1.000

Schedule D (Form 990) 2018

Part XIII Supplemental Information (continued)

PART V, LINE 4

ENDOWMENT FUND INVESTMENTS ARE PERMANENTLY RESTRICTED NET ASSETS TO BE HELD INDEFINITELY, THE INCOME FROM WHICH IS EXPENDABLE TO SUPPORT THE FOUNDATION.

PART X, LINE 2

ASC 740 FOOTNOTE:

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Name of the organization **Employer identification number** AAPL EDUCATION FOUNDATION, INC. 23-7243157 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of 1 (a) Name and address of organization (b) EIN (h) Purpose of grant (if applicable) or government grant cash assistance noncash assistance or assistance (1) IPAA EDUCATIONAL FOUNDATION 52-1849282 501(C)(3) 1201 15TH STREET NW SUITE 300 25,000. EDUCATION ABOUT INDU (2) AAPL 75-0975500 501(C)(6) 40,200. 800 FOURNIER ST FORT WORTH, TX 76102 EDUCATION ABOUT INDU (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)1. 1.

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

Schedule I (Form 990) (2018)

AAPL EDUCATION FOUNDATION, INC. 23-7243157

Schedule I (Form 990) (2018)

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 non-cash assistance
1 disaster relief	2.	10,000.			
2					
3					
4					
j					

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

SCHEDULE I, PART I, LINE 2

THE FOUNDATION'S OPERATING COMMITTEES REVIEW THE GRANT REQUEST

APPLICATION AND APPROVE THE REQUESTS. THE APPROVAL IS DOCUMENTED IN

THE MEETING MINUTES.

SCHEDULE J (Form 990)

Compensation InformationFor 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AAPL EDUCATION FOUNDATION, INC.

Employer identification number

23-7243157

Part	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						
	explain	1b				
2						
3						
J	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 Approval by the board or compensation committee					
4						
а						
b						
С						
	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		X		
b	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		X		
b	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				
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		1		

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

Schedule J (Form 990) 2018

AAPL EDUCATION FOUNDATION, INC. 23-7243157

Schedule J (Form 990) 2018 Page 2

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.

		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
MELANIE BELL	(i)	0.	0 .	0.	0.	0.	0.	
1EXEC. VP OF AAPL	(ii)	273,101.	25,000.	7,074.	24,643.	20,251.	350,069.	
STACEY GARVIN	(i)	0.	0 .	0.	0.	0.	0.	
2DIRECTOR OF EDUCATION	(ii)	130,089.	2,300.	1,899.	6,618.	11,672.	152,578.	
	(i)							
_ 3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
_12	(ii)							
	(i)							
_13	(ii)							
	(i)							
_14	(ii)							
	(i)							
_15	(ii)							
	(i)							
_16	(ii)							

AAPL EDUCATION FOUNDATION, INC. 23-7243157

Schedule J (Form 990) 2018

Part III Supplemental Information

Provide the information, explanation, 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 information.

SCHEDULE J, PART I, LINE 3

A RELATED CORGANIZATION (AAPL) USES THE FOLLOWING METHODS TO ESTABLISH

COMPENSATION OF THE EXECUTIVE DIRECTOR; COMPENSATION COMMITTEE, FORM 990

OF OTHER ORGANIZATIONS, WRITTEN EMPLOYMENT CONTRACT, COMPENSATION SURVEY

OR STUDY AND APPROVAL BY THE BOARD OF COMPENSATION COMMITTEE.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number 23-7243157

AAPL EDUCATION FOUNDATION, INC.

FORM 990, PART VI, SECTION B, LINE 11B

A COPY OF FORM 990 WAS PROVIDED TO THE BOARD OF DIRECTORS OF AAPL

EDUCATION FOUNDATION, INC. FOR REVIEW PRIOR TO SUBMITTING TO THE IRS.

FORM 990, PART VI, SECTION C, LINE 19

AAPL EDUCATIONAL FOUNDATION, INC. WILL PROVIDE ITS FINANCIAL

INFORMATION TO THE PUBLIC UPON REQUEST. THE BY-LAWS ARE PUBLISHED

ANNUALLY IN THE LANDMAN DIRECTORY, WHICH IS DISTRIBUTED TO THE

MEMBERSHIP OF THE AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC.

THE FINANCIAL REPORTS ARE PUBLISHED ANNUALLY IN THE ANNUAL REPORT,

WHICH IS ALSO SENT TO THE MEMBERSHIP OF THE AMERICAN ASSOCIATION OF

PROFESSIONAL LANDMEN, INC. THE FORM 990 IS AVAILABLE ONLINE AT

WWW.GUIDESTAR.ORG.

FORM 990, PART XII, LINE 2C

THE FOUNDATION'S FINANCIAL STATEMENTS ARE INCLUDED IN THE CONSOLIDATED

INDEPENDENT AUDIT REPORT WITH THEIR SUPPORTED ORGANIZATION, AMERICAN

ASSOCIATION OF PROFESSIONAL LANDMEN, INC. OVERSIGHT OF THE AUDIT AND

SELECTION OF THE INDEPENDENT ACCOUNTANT ARE PERFORMED BY AMERICAN

ASSOCIATION OF PROFESSIONAL LANDMEN, INC. THIS PROCESS REMAINS UNCHANGED

FROM PRIOR YEAR.

FORM 990, PART VI, LINE 15A

THE FOUNDATION UTILIZES EMPLOYEES OF THEIR SUPPORTED ORGANIZATION,

Schedule O (Form 990 or 990-EZ) 2018 Page **2**

Name of the organization

AAPL EDUCATION FOUNDATION, INC.

Employer identification number
23-7243157

AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC. PERFORMANCE AND PAY

ARE REVIEWED ANNUALLY BY THE AAPL COMPENSATION COMMITTEE AND REVIEWED AND

APPROVED BY THE EXECUTIVE COMMITTEE. NO COMPENSATION IS PAID BY THE

FOUNDATION.

ATTACHMENT	1	

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE EDUCATIONAL FOUNDATION WAS FORMED FOR THE PURPOSE OF

- 1. PROMOTING EDUCATION, INSTRUCTION AND TRAINING FOR MEMBERS TO IMPROVE OR DEVELOP THEIR CAPABILITIES,
- 2. INSTRUCT THE PUBLIC ON SUBJECTS USEFUL TO INDIVIDUALS AND BENEFICIAL TO THE COMMUNITY,
- 3. FURTHER THE ADVANCEMENT OF EDUCATION AND
- 4. SUPPORT OTHER CHARITABLE PURPOSES, SUCH AS NATURAL DISASTER RELIEF FOR MEMBERS.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► 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

AAPL EDUCATION FOUNDATION, INC.

Department of the Treasury

Internal Revenue Service

Employer identification number 23-7243157

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (c) Legal domicile (state (e) End-of-year assets Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income Direct controlling or foreign country) entity (1) (2) (3) (4) (5) (6)

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Part II one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of	related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr	12(b)(13) olled
							Yes	No
(1) AMERICAN ASSOC OF PROF LANDMEN	75-0975500							
800 FOURNIER STREET	FORT WORTH, TX 76102	LAND PROFS	TX	501(C)(6)		N/A		X
(2) LANDMAN SCHOLARSHIP TRUST	23-7122144							
800 FOURNIER STREET	FORT WORTH, TX 76102	SCHOLARSHIPS	TX	501(C)(3)	12A	AAPL	X	
(3) NAPE CHARITIES FUND	45-3791212							
800 FOURNIER STREET	FORT WORTH, TX 76102	GRANTS	TX	501(C)(3)	PF	AAPL	X	
(4) NAPE EXPO CHARITIES FUND	81-3695208							
800 FOURNIER STREET	FORT WORTH, TX 76102	GRANTS	TX	501(C)(3)	10	AAPL	X	
(5)								
(6)								
(7)								

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

Schedule R (Form 990) 2018

JSA 8E1307 1.000 Schedule R (Form 990) 2018

	THE COURT OF THE PARTY OF THE P
Dow4 III	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34,
Part III	handling it had and ar more related arganizations treated as a partnership during the tay year
	because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportiona allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		,,,		,			Yes	No		Yes	No	
(1) NAPE EXPO, LP 20-4920808												
800 FOURNIER STREET FORT WORTH	TRADE SHOW	TX	N/A	N/A								
_(2)	-											
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(1 controlle entity?
<u>(1)</u>								Yes No
(2)								\vdash
(3)								
(4)								
(5)								
(6)								
(7)								

Schedule R (Form 990) 2018

Sched	ule R (Form 990) 2018					Page :
Part	V Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Pa	rt IV, line 34, 35b, or 36.			
Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Ye	s No
1	During the tax year, did the organization engage in any of the following transactions with one or more	related organizations lis	sted in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	•		[1a	Σ
b	Gift, grant, or capital contribution to related organization(s)			I	1b	X
С	Gift, grant, or capital contribution from related organization(s)				1c	Σ
d	Loans or loan guarantees to or for related organization(s)				1d	Σ
	Loans or loan guarantees by related organization(s)				1e	2
	Dividends from related ergenization(s)				1f	2
'	Dividends from related organization(s)				1g	1 2
y	Sale of assets to related organization(s)				1h	1 2
'' :	Purchase of assets from related organization(s)				1i	7
	Lease of facilities, equipment, or other assets to related organization(s)				1j	7
J	Lease of facilities, equipment, of other assets to related organization(s)					
k	Lease of facilities, equipment, or other assets from related organization(s)			[1k	Σ
I	Performance of services or membership or fundraising solicitations for related organization(s)				11	Σ
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	Σ
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n :	X
0	Sharing of paid employees with related organization(s)				10	X
р	Reimbursement paid to related organization(s) for expenses				1p -	X
q	Reimbursement paid by related organization(s) for expenses				1q	Σ
_	Other transfer of each or preparty to related organization(s)				1r)
r	Other transfer of cash or property to related organization(s)				1s	3
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including cove	ered relationships and transa	action thres		
	(a)	(b)	(c)		(d)	
	Name of related organization	Transaction type (a-s)	Amount involved	Method o	of determinant involve	
		type (a-s)		amour	it invoive	·u
(4)						
(1)						
(2)						
(2)						
(3)						

Schedule R (Form 990) 2018

(4)

(5)

Schedule R (Form 990) 2018 Page 4

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) me, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	501 organiz	ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop alloc	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ner?	(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No	
	_												
				from tax under sections 512-514)	from tax under sections 512-514) Yes Organiz Yes	rom tax under sections 512-514) Yes No Organizations? Yes No I I I I I I I I I I I I I I I I I I I	from tax under sections 512-514) Yes No No Image: April 19 of the section of t	from tax under sections 512-514) Yes No In a section of 512-514 Yes No In a sect	From tax under sections \$12-\$14 Yes No Yes Yes	From tax under sections 512-514 Yes No Yes No	Trom tax under sections 512-544 Yes No	Tron tax under sections \$12-814 Yes No	Commission law under sections \$12-514 Yes No Yes Yes Yes No Yes Yes

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 Page 5

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e)) calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30, 2019.

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Donortmont of the Treesury		►Go to www.irs.g	ov/Form99/)	Tfor in	structions and	the l	latest informatio	, .n		$\angle ($	<i>y</i> 10			
Department of the Treasury Internal Revenue Service	▶ Do	not enter SSN numbers							3).	Open to Pub	olic Inspection for ganizations Only			
A Check box if address changed		Name of organization (ne changed and se				Emplo	oyer identification	tion number			
B Exempt under section		AAPL EDUCATI	ON FOUN	OATI	ON, INC.									
X 501(C)(3)	Print	Number, street, and room	m or suite no. I	f a P.O.	box, see instruction	ns.			23-7	243157				
408(e) 220(e)	Type							E	E Unrelated business activity (See instructions.)					
408A530(a)		800 FOURNIER	ST.						(GGC INSTRUCTIONS.)					
529(a)		City or town, state or pr	ovince, country	y, and Z	IP or foreign postal	code								
C Book value of all assets at end of year		FORT WORTH,	TX 7610:	2										
at end of year		up exemption number	` , 											
4,394,566.		ck organization type		` '		5	501(c) trust		401(a)	trust	Other trust			
H Enter the number of	the orga	nization's unrelated trad	des or busine	sses.	<u>1</u>		D	escribe t	he only	(or first) uni	related			
trade or business her	e ► <u>A'</u>	TCH 1			If	only	one, complete	Parts I-V	. If mor	e than one, c	lescribe the			
first in the blank spa	ce at the	end of the previous s	entence, cor	nplete	Parts I and II, co	mple	te a Schedule M	for each	additio	nal				
trade or business, th	en comple	ete Parts III-V.												
I During the tax year,	was the	corporation a subsidia	ry in an affili	ated gi	oup or a parent-s	subsid	diary controlled o	group?		▶∟	Yes X No			
		identifying number of t	the parent co	rporatio	on. 🕨									
J The books are in care						Tele	ephone number	▶ 817	-747-	-7700				
Part I Unrelated	Trade o	or Business Incon	ne		(A) Inco	me	(B)	Expense	s	((C) Net			
1a Gross receipts or	sales		_											
b Less returns and allowa	ances		c Balance ▶	1c										
2 Cost of goods sol	ld (Sched	ule A, line 7)		2										
		2 from line 1c		3										
4a Capital gain net in	ncome (a	ttach Schedule D)		4a										
b Net gain (loss) (Fo	orm 4797,	Part II, line 17) (attach Fo	orm 4797)	4b										
c Capital loss dedu	ction for t	rusts		4c										
5 Income (loss) from a p	artnership o	r an S corporation (attach state	ement)	5										
6 Rent income (Sch	edule C)			6										
7 Unrelated debt-fire	nanced in	come (Schedule E)		7										
8 Interest, annuities, roya	alties, and re	ents from a controlled organizat	tion (Schedule F)	8										
9 Investment income of a	a section 50	1(c)(7), (9), or (17) organization	on (Schedule G)	9										
	•	ncome (Schedule I)		10										
11 Advertising incom	ne (Sched	dule J)		11										
12 Other income (Se	ee instruc	ctions; attach schedule)		12										
		ough 12		13			0.							
		Taken Elsewhere	•					ns.) (Ex	cept f	or contrib	utions,			
		be directly conne directors, and trustees							. 14					
		(see instructions)												
,	,								_					
		See instructions for limi												
		4562)			1	- 1								
		on Schedule A and els							22b					
					_									
		compensation plans												
		S												
		Schedule I)												
		chedule J)												
		schedule)							1					
		s 14 through 28												
		ole income before ne												
		g loss arising in tax ye												
		e income. Subtract line	_	-			,	,	32					

Form	990-1 (20	·				ŀ	age ∠
Par	t III	Total Unrelated Business Taxable Income					
33		f unrelated business taxable income computed from all unrelated trades or businesses (see					
	instruct	ons)	- 33				
34	Amount	s paid for disallowed fringes	. 34				
35	Deducti	on for net operating loss arising in tax years beginning before January 1, 2018 (see	e				
	instruct	ons)	. 35				
36		f unrelated business taxable income before specific deduction. Subtract line 35 from the sun					
	of lines	33 and 34	- 36				
37	Specific	deduction (Generally \$1,000, but see line 37 instructions for exceptions)	. 37				
38	Unrelat	ed business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36	i,				
	enter th	e smaller of zero or line 36	- 38				0.
Par	t IV	Tax Computation					
39	Organiz	ations Taxable as Corporations. Multiply line 38 by 21% (0.21)	▶ 39				
40	Trusts	Taxable at Trust Rates. See instructions for tax computation. Income tax or					
	the amo	ount on line 38 from: Tax rate schedule or Schedule D (Form 1041)	▶ 40				
41		ax. See instructions					
42		ive minimum tax (trusts only)					
43		Noncompliant Facility Income. See instructions					
44		dd lines 41, 42, and 43 to line 39 or 40, whichever applies					
Par		Tax and Payments					
		tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a					
	_	redits (see instructions)					
		business credit. Attach Form 3800 (see instructions)	\dashv				
		or prior year minimum tax (attach Form 8801 or 8827)	\dashv				
		edits. Add lines 45a through 45d	. 45e				
46		t line 45e from line 44					
47		xes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)					
		x. Add lines 46 and 47 (see instructions)					0.
48			1				
49 50 a		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	. 49				
		tts: A 2017 overpayment credited to 2018	\dashv				
			\dashv				
			\dashv				
	•	- games and part of manners and control (control and control and c	\dashv				
e		withholding (see instructions)	\dashv				
Ţ		or small employer health insurance premiums (attach Form 8941)	\dashv				
g		edits, adjustments, and payments: Form 2439					
		orm 4136					
51		ayments. Add lines 50a through 50g	. 51				
52		ed tax penalty (see instructions). Check if Form 2220 is attached	52	<u> </u>			
53		. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	► 53	<u> </u>			
54		yment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	► 54	<u> </u>			
55		e amount of line 54 you want: Credited to 2019 estimated tax Refunded		<u> </u>			
Par	t VI	Statements Regarding Certain Activities and Other Information (see instruction)					
56		time during the 2018 calendar year, did the organization have an interest in or a signature				Yes	No
		financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	•		- 1		
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	e foreig	n cou	ıntry		
	here >						Х
57	During t	he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fo	reign trus	st?			Х
	If "Yes,"	see instructions for other forms the organization may have to file.					
58		e amount of tax-exempt interest received or accrued during the tax year > \$		_			
		nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the ie, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	e best of i	my kno	wledge a	and beli	ief, it is
Sig	n 🛌 '''	io, contoct, and complete. Declaration of preparet (other than taxpayer) is based on all information of which preparet has any knowledge.	May the	IRS 4	discuss	this r	return
Her	e 🚩		with the				
	Si	gnature of officer Date Title	(see instruc	tions)?	X Ye	s	No
<u> </u>		Print/Type preparer's name Preparer's signature Date Ch	neck	if F	PTIN		
Paic		KEVIN ENSMINGER See 06/11/2020 se	elf-employe	d I	P0131		
	oarer	Firm's name ▶ BKD, LLP	m's EIN	44	-0160	0260	
use	Only		one no. 8				

Form **990-T** (2018)

-orm 990-1 (2018)								Page 3
Schedule A - Cost of Go	oods Sold. Er	nter metho	d of invent	ory valuation	>			
1 Inventory at beginning of y	ear . 1			6 Inventory	at end of yea	ır	6	
2 Purchases	2					d. Subtract line		
3 Cost of labor	3			6 from	line 5. En	ter here and in		
4a Additional section 263A co	osts			Part I, line	2		7	
(attach schedule)	4a					section 263A (w	ith respect to	Yes No
b Other costs (attach schedu						or acquired for		
5 Total. Add lines 1 through	· - —							X
Schedule C - Rent Income	(From Real P	roperty a	nd Perso	nal Property	Leased V	ith Real Proper	ty)	1
(see instructions)	•					•		
Description of property								
(1)								
(2)								
(3)								
(4)								
	2. Rent recei	ved or accru	ed					
(a) From paragraph reports (if the					/:f +l= =	2(a) Dadwatiana di	مانئن ومعامل معاملات والمعاملات	4h a in a ana a
(a) From personal property (if the for personal property is more th				l personal property or personal property			rectly connected with a) and 2(b) (attach sch	
more than 50%)				based on profit or		((1)	,
(4)								
(1)								
(2)								
(3)								
(4)								
Total		Total				(b) Total deduction	ns.	
(c) Total income. Add totals of co	• ,	,				Enter here and on		
nere and on page 1, Part I, line 6						Part I, line 6, colum	nn (B) 🕨	
Schedule E - Unrelated De	ept-Financed i	ncome (s	ee instructi	ions)	3 [Deductions directly con	unacted with or allocah	ale to
4 Description of dol	t financed managety.			income from or	J. L	debt-finance		ne to
1. Description of deb	n-linanced property		1	to debt-financed roperty		t line depreciation	(b) Other dedu	
			<u>'</u>	-1 - 7	(atta	ch schedule)	(attach sched	dule)
(1)								
(2)								
(3)								
(4)								
Amount of average acquisition debt on or	Average adju of or alloca		6.	Column	7 Cross	income reportable	8. Allocable dec	ductions
allocable to debt-financed	debt-financed		1	divided		n 2 x column 6)	(column 6 x total o	
property (attach schedule)	(attach sch	edule)	ру	column 5			3(a) and 3((D))
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						e and on page 1,	Enter here and c	
					Part I, lin	e 7, column (A).	Part I, line 7, col	lumn (B).
Totals				.				
Total dividends-received deduct								

Form **990-T** (2018)

Page 4

Schedule F—Interest, Ann	unies, Royanies				ntrolled Or			(30)	e mandem	0113)	
Name of controlled organization	2. Employer identification number	er			ated income	4. Total payme	of specifi ents made	ed include	of column 4 t ed in the contr ation's gross in	olling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organi							40	Dant of column	O that is		4 Dadwatiana dinasthe
7. Taxable Income	8. Net unrelated in (loss) (see instructi				Total of specifi ayments made		incl	Part of columuded in the control of the column is a control of the column in the column is a column in the column in the column is a column in the colum	controlling		Deductions directly nnected with income in column 10
(1)											
(2)											
(3)											
(4)							۸ ما	d columns 5	and 10	—	dd columns 6 and 11.
Totals	ncome of a Sec	tion 5	01(c)(7),	(9), or (17		Pai		structions)		ter here and on page 1, art I, line 8, column (B). 5. Total deductions
1. Description of income	2. Amount of	income			directly co (attach sc	nnected	4. Set-asides (attach schedule)				and set-asides (col. 3 plus col. 4)
(1)											
(2)											
<u>(3)</u> (4)											
Totals ▶ Schedule I-Exploited Exe		olumn (A).	er Th	an Advert	ising Ir	come	(see instr	ructions)		Enter here and on page 1 Part I, line 9, column (B)
1. Description of exploited activity	2. Gross unrelated business income from trade or business	conn prod ur	Expense directly lected valuction nrelated less inco	vith of	4. Net incor from unrela or business 2 minus co If a gain, c cols. 5 thr	ted trade (column lumn 3). compute	from is no	oss income activity that t unrelated less income	6. Expe attribut colun	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col. (A).	page	here an e 1, Par 10, col.	t I,							Enter here and on page 1, Part II, line 26.
Totals Schedule J- Advertising In	ncome (see instru	ıctione	1								
Part I Income From Per	•			nsol	idated Ra	eie					
Parti income From Fer	2. Gross		. Direct		4. Adver	tising	5.0	Circulation	culation 6. Readership		7. Excess readership costs (column 6
Name of periodical	advertising income		tising c		2 minus c a gain, co cols. 5 thr	mpute	income costs		minus column 5, but not more than column 4).		
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5)) ▶											Form 990-T (2018

2 through 7 on a			Tate Dasis (1 0)	cach periodica	i iistea iii i ait ii	, illi ili coldiilis
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col (A).	Enter here and on page 1, Part I, line 11, col (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)						
Schedule K - Compensatio	n of Officers, D	Directors, and Tr	ustees (see inst	ructions)		
1. Name		2. Title		3. Percent of time devoted to business	Compensation attributable to unrelated business	
(1)				%		
(2)				%		
(3)				%		
(4)				%		<u> </u>
Total. Enter here and on page 1, P	art II, line 14					

Form **990-T** (2018)

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.