

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

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2020
Open to Public Inspection

A F	or th	e 2020 calendar year, or tax year beginning	07/01 ,202	0, and endir	ng		06/30	20 21			
B c	heck if ap	C Name of organization AMERICAN ASSOCI	ATION OF PROFESS	SIONAL		D Employer ide	entification	number			
	Addre	SS Doing Business As				75-0975	500				
	7	change Number and street (or P.O. box if mail is not deliver	red to street address)	Room/suite		E Telephone number					
	+	return 800 FOURNIER STREET				(817) 84	7-7700				
	Term	0:1:	foreign postal code								
	Amer	ded FORT WORTH, TX 76102				G Gross receip	ts \$	6,912	,024.		
	return Applie	F Name and address of principal officer: DR	GRETA ZEIMETZ			H(a) Is this a grou	p return for	Yes	X No		
	pendi	SAME AS C ABOVE, FORT WORT				subordinates H(b) Are all subord	I	Yes	No		
$\overline{}$	Tax-ex	empt status: 501(c)(3) X 501(c) (6)) or 52	7		th a list. (see in				
<u>. </u>		te: WWW.LANDMAN.ORG	(IIISCITTIO.) 4347 (d)(1) 01 32		H(c) Group exem					
		of organization: X Corporation Trust Association	on Other ►	I Year o	f formati	ion: 1987 M			TX		
	art I	Summary	on Calor P	= 10010	Tionnati		Otato or roge				
		Briefly describe the organization's mission or most si	anificant activities: MISS	ON IS TO	PROI	MOTE THE	HIGHEST	7			
ø	'	STANDARDS OF PERFORMANCE FOR ALI									
auc		STATURE, AND ENCOURAGE SOUND AND									
ern	2	Check this box ▶ if the organization discontinu									
Governance	3	Number of voting members of the governing body (Pa					3		47.		
	4	Number of independent voting members of the government of the gove					4		47.		
ies	1 -	Total number of individuals employed in calendar year					5		35.		
Activities &		Total number of volunteers (estimate if necessary)					6		47.		
Act	72	Total unrelated business revenue from Part VIII, colum	nn (C) line 12				7a	9:	1,990		
		Net unrelated business taxable income from Form 99					7b		0		
		TVCt difference business taxable income from 1 om 350	0-1, IIIIC 0+	<u> </u>		Prior Year		Current Y	ear		
	8	Contributions and grants (Part VIII, line 1h)					0.		0		
Revenue	9	Program service revenue (Part VIII, line 2g)		2,538,52	0.	2,28	7,055				
, ve	10	Investment income (Part VIII, column (A), lines 3, 4, a		INSPECTION		-129,98			7,874		
å	11	Other revenue (Part VIII, column (A), lines 5, 4d, 8c, 9				2,769,20			4,178		
	12	Total revenue - add lines 8 through 11 (must equal Pa				5,177,74			0,751		
_	13	Grants and similar amounts paid (Part IX, column (A),				33,53			0		
	14	Benefits paid to or for members (Part IX, column (A), I					0.		0		
"	4.5	Salaries, other compensation, employee benefits (Par				3,356,01	.5.	3,538	8,898		
Expenses	16a						0.	•			
ber	b	Professional fundraising fees (Part IX, column (A), line Total fundraising expenses (Part IX, column (D), line 2	5)	0.							
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 1	1f-24e)			3,231,11	3.	2,86	7,642		
		Total expenses. Add lines 13-17 (must equal Part IX,				6,620,66			5,540		
	19	Revenue less expenses. Subtract line 18 from line 12				-1,442,92			5,789		
or		The second control of				ning of Current \		End of Yea			
ets	20	Total assets (Part X, line 16)				38,723,97	4.	45,73	7,646		
Ass Ba	21	Total liabilities (Part X, line 26)				2,040,69			4,175		
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line				36,683,28	0.	43,073			
	rt II	Signature Block									
Un	der pei	nalties of perjury, I declare that I have examined this return,					my knowle	dge and b	elief, it is		
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is	s based on all information of w	hich preparer ha	s any kn	owledge.					
Sig		Signature of officer				Date					
He	re										
		Type or print name and title									
		Print/Type preparer's name Prepare	r's signature	Date		Check	if PTIN				
Paid		NOELLE ALBERTO				self-employ		704142	!		
	parer	Firm's name ▶ BKD, LLP		1		Firm's EIN	44-0160				
Use	Only	Firm's address > 777 MAIN STREET, SUITE 2000 FOR	RT WORTH, TX 76102			· •	817.332				
May	the I	RS discuss this return with the preparer shown above?					Х		No		
For	Pape	rwork Reduction Act Notice, see the separate instruc	tions.					Form 99			

Page 2 Form 990 (2020)

Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	AAPL'S MISSION IS TO PROMOTE THE HIGHEST STANDARDS OF PERFORMANCE
	FOR ALL LAND PROFESSIONALS, TO ADVANCE THEIR STATURE, AND TO
	ENCOURAGE SOUND AND ETHICAL STEWARDSHIP OF ENERGY AND MINERAL
	RESOURCES.
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?
4	If "Yes," describe these changes on Schedule O. 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 \$ including grants of \$) (Revenue \$)
	AAPL IS AN ORGANIZATION REPRESENTING MEN AND WOMEN ENGAGED IN LAND
	MATTERS. ITS PURPOSES ARE CARRIED OUT BY A MONTHLY MAGAZINE/JOURNAL
	WITH A DISTRIBUTION OF APPROXIMATELY 13,000 COPIES; IN EXCESS OF 65
	EDUCATIONAL EVENTS, QUARTERLY BOARD MEETINGS AND AN ANNUAL
	MEETING/CONFERENCE. AAPL HAS APPROXIMATELY 13,000 MEMBERS.
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$including grants of \$) (Nevertide \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
<u></u>	Other program services (Describe on Schedule O.)
- T U	(Expenses \$ including grants of \$) (Revenue \$)
	(Expenses # Introduing grants or #) (Nevertide #)

4e Total program service expenses ►

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Part	Checklist of Required Schedules		Vaa	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
1	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
·	assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		37	
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			77
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more	44.		Х
اہ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		- 1
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	114		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	21
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's separate of consolidated mandal statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
_	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	_		37
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ا پر ا		v
20 -	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21		Х

Part	Checklist of Required Schedules (continued)		V	NI -
	Did the constitution and the AT 000 of constant and the confiction of the decoration is a		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		Х
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
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		
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		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			v
00	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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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		Х
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	Х	
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		
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	20	Х	
Dart	19? Note: All Form 990 filers are required to complete Schedule O. Statements Pogarding Other IPS Filings and Tay Compliance	38	Λ	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 9	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		. 03	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c	Х	
				$\overline{}$

Par	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 35			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	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 on Schedule O</i>	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
- -a	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 \[\bigs_{			
D				
. .	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	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		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	60		Х
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>		
_	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> · · · · ·	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
13	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
10	If "Yes," complete Form 4720, Schedule O.			

AMERICAN ASSOCIATION OF PROFESSIONAL 75-0975500 Page 6 Form 990 (2020) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 47 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 47 Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ 2 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, trustees, or key employees to a management company or other person?.... 4 Χ 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Χ 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint Χ 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X 8b Х Each committee with authority to act on behalf of the governing body?................ Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Yes

10a	Did the organization have local chapters, branches, or affiliates?	Iva		21
	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		12a	X	
b		12b	X	
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	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent 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			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 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-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Upon request Another's website Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records ► AMANDA F. JOHNSON 800 FOURNIER STREET FORT WORTH, TX 76102 817-847-7700 20

Form **990** (2020)

No

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, unless officer and Institution of direct		Pos neck ss pe	rson	re than one is both an tor/trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) LEANN CALLIHAN	40.00									
DIRECTOR OF COMMUNICATIONS AND	3.00				Х			266,566.	0.	79,507.
(2)GRETA ZEIMETZ	40.00									
EXECUTIVE VICE PRESIDENT	6.00			Х				289,969.	0.	52,050.
(3) STACEY GARVIN-PART YEAR	40.00									
DIRECTOR OF EDUCATION AND MEMB	3.00				Х			260,614.	0.	58,805.
(4) AMANDA JOHNSON	40.00									
CHIEF ACCOUNTING OFFICER	6.00			Х				147,062.	0.	20,493.
(5) RUSSELL COHEN	40.00									
GOVERNMENTAL AFFAIRS MANAGER	0.					X		132,827.	0.	15,248.
(6)LESTER ZITKUS, CPL	5.00									
PRESIDENT	0.	Х		X				0.	0.	0.
(7) JAMES DEVLIN, CPL	5.00									
1ST VICE PRESIDENT	0.	X		X				0.	0.	0.
(8) NANCY MCCASKELL, CPL	2.00									
2ND VICE PRESIDENT	0.	Х		Х				0.	0.	0.
(9) MARC TATE, CPL	2.00								0	
3RD VICE PRESIDENT	0.	X		Х				0.	0.	0.
(10) ANDREW COOPER, CPL	5.00	3,7		3.7				0	0	
SECRETARY CDI	0.	X		X				0.	0.	0.
(11) KYLE REYNOLDS, CPL	5.00	v		3.7				0	0	0
TREASURER	5.00	X		Х				0.	0.	0.
(12) JAY BEAVERS III, CPL IMMEDIATE PAST PRESIDENT	0.	Х		Х				0.	0.	0.
(13) ADAM PETZ, CPL	2.00	Λ		Λ				0.	0.	0.
DIRECTOR	0.	х						0.	0.	0.
(14) ADAM ROBINSON, CPL	2.00	Λ.						0.	0.	0.
DIRECTOR	0.	Х						0.	0.	0.
									<u> </u>	Form 990 (2020)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continue									ed)			
(A)	(B)			((C)			(D)	(E)		(F)	
Name and title	Average	(-1			sition			Reportable	Reportable		timated	
	hours per week (list any	,				e than o is both		compensation from	compensation from related		nount of other	
	hours for	office	er and	dac	direct	or/trust	ee)	the	organizations		pensati	on
	related organizations	Indi or d	Insti	Officer	Ey ey	High	Former	organization	(W-2/1099-MISC)		om the anizatio	n
	below dotted	/idua	tutio	ĕ	emp	lest	ner	(W-2/1099-MISC)			d related	
	line)	Individual trustee or director	Institutional trustee		Key employee	com				orga	anization	าร
		stee	trust		Ф	pens						
			ee			Highest compensated employee						
15) ALLYSON JOHNSTONE HOWARD, CPL	2.00											
DIRECTOR	0.	Х						0	0.			(
16) ANDREW UELTSCHEY, CPL	2.00											
DIRECTOR	0.	Х						0	0.			C
17) BENJAMIN HOLLIDAY	2.00											
DIRECTOR	0.	X						0	0.			(
18) BENJAMIN WARING CPL	2.00											
DIRECTOR	0.	X						0	0.			(
19) BRUCE PAYNE, CPL	2.00								_			_
DIRECTOR	0.	X						0	0.			(
20) CHRISTIN FABER, RPL	2.00											
DIRECTOR	0.	X						0	0.			(
21) CLAY WARREN, CPL	2.00											
DIRECTOR	0.	X						0	0.			(
22) CRANFORD NEWELL JR., CPL	2.00	,										,
DIRECTOR	0.	X						0	0.			(
23) DAN KOSTRUB	2.00	37							0			,
DIRECTOR	0.	X						0	0.			(
24) DION WARR, CPL	2.00	37							0			,
DIRECTOR	0.	X						0	0.			(
25) DUSTIN HAMLETT, RPL DIRECTOR	2.00							0	0			,
-	0.	X						1,097,038.	0.		226,1	102
1b Sub-total								0.	0.		220,	0
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)			• •		• •			1,097,038.	0.		226,2	
2 Total number of individuals (including but not							ro				120,1	
reportable compensation from the organization		11036	5	ua	DOV	c) wiic	<i>3</i> 16	ceived more man	φ 100,000 01			
-											Yes	No
3 Did the organization list any former office	er, directo	r. or	trı	ıste	e.	kev e	emn	lovee or highes	t compensated			
employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the												
organization and related organizations gro												
individual										4	Х	
5 Did any person listed on line 1a receive or												
for services rendered to the organization? If "Y										5		Χ
Section B. Independent Contractors												
1 Complete this table for your five highest com	nensated i	ndene	ende	ent	con	tracto	rs t	hat received more	than \$100 000 o	f	_	_

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

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 ► 4

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

(A)	(B)			(C)			(D)	(E)		(F)	
Name and title	Average	(-1			sition			Reportable	Reportable		stimated	
	hours per week (list any	'				e than o is both		compensation from	compensation from related	aı	mount of other	i
	hours for	l .				or/trust		the	organizations	cor	npensati	on
	related	or -	Ins	Qf	.ĕ	Highest co employee	Fol	organization	(W-2/1099-MISC)		rom the	
	organizations	livid	量	Officer	/ en	ploy	Former	(W-2/1099-MISC)	, ,	-	ganizatio	
	below dotted line)	ual	tiona	'	Key employee	t co	~				nd related ganization	
	iiile)	Individual trustee or director	Institutional trustee		yee	compensated				org	jarnzatioi	13
		tee	ıste			sane						
			Φ			ted						
26) JASON LYONS, RPL	2.00											
DIRECTOR	0.	Х						0.	0.			0
27) JASON DOWNS, RPL	2.00											
DIRECTOR	0.	Х						0.	0.			0
28) JASON SOUTH, CPL	2.00											
DIRECTOR	0.	Х						0.	0.			0
29) JASON SEBASTINAS, RPL	2.00											
DIRECTOR	† <u>-</u> -	Х						0.	0.			0
30) JEREMY PRESTON, RPL	2.00											
DIRECTOR	t	Х						0.	0.			0
31) JESS ROWE, CPL	2.00											
DIRECTOR	1	Х						0.	0.			0
32) JOHN KROGMANN JR., CPL	2.00											
DIRECTOR	1	Х						0.	0.			0
33) JOHN LEE, RPL	2.00											
DIRECTOR	† <u>-</u> -	Х						0.	0.			0
34) KRISTIN RENNIE	2.00											
DIRECTOR	1	Х						0.	0.			0
35) KYLE DUBIEL	2.00											
DIRECTOR	1	Х						0.	0.			0
36) LARS NOBLE, CPL	2.00											
DIRECTOR	1	Х						0.	0.			0
					l			0.	0.			0.
1b Sub-total c Total from continuation sheets to Part VII, S	Coction A		• •	• •	• •							
d Total (add lines 1b and 1c)	_		• •	• •	• •							
2 Total number of individuals (including but not							re	ceived more than	\$100,000 of			
reportable compensation from the organization			5	uu	DOV	S) WIII	<i>3</i> 10	cored more than	φ100,000 01			
	,		-								Yes	No
2 Did the executation list one former office			4		_	م بدها		lovoo or biaboo			103	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3		Х
										3		
4 For any individual listed on line 1a, is the												
organization and related organizations gr										4	X	
individual										4	1	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y										5		Х
Tot services rendered to the organization? If Y	es, comple	10 OCI	ieul	ııe u	, 101	SUCII	ρ e r.	SUII				

Section B. Independent Contractors

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

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

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

Form **990** (2020)

Part VII

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for	box,	unles	heck ss pe	erson	e than o is both tor/trust	an	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
37) LINDSEY STINSON	2.00									
DIRECTOR	0.	X						0	0.	
38) LUCY WATHEN, CPL	2.00									
DIRECTOR	0.	Х						0	0.	
39) MATTHEW MCCAULEY, CPL	2.00									
DIRECTOR	0.	X						0	0.	
40) MICHAEL DEWALD, CPL	2.00									
DIRECTOR	0.	X						0	0.	
41) NOEL MILLIONS	2.00									
DIRECTOR	0.	X						0	0.	
42) PAUL WOOD, CPL DIRECTOR	2.00	3.7								
	2.00	X						0	0.	
43) RANDY LITTLECOTT, CPL DIRECTOR	0.	X						0	0.	
44) RICHARD HINES, CPL	2.00	Λ						0	. 0.	
DIRECTOR	0.	X						0	J 0.	
45) ROBERT WILSON III, RPL	2.00	21							·	
DIRECTOR	0.	Х						0] 0.	
46) ROBERT RICE, CPL	2.00									
DIRECTOR	0.	Х						0] 0.	
47) RODNEY BLACK, CPL	2.00									
DIRECTOR		Х						0	. 0.	
1b Sub-total								0.	0.	0
c Total from continuation sheets to Part VI	IL Section A			• •						
d Total (add lines 1b and 1c)							•			
2 Total number of individuals (including but i							o re	ceived more than	\$100,000 of	
reportable compensation from the organiza			5			,			. ,	
										Yes No
3 Did the organization list any former of employee on line 1a? If "Yes," complete Sci										3 X
4 For any individual listed on line 1a, is the organization and related organizations individual	he sum of rep greater than	ortab \$15	le c 50,0	com 00?	per	nsatior "Yes	n ar	nd other compen complete Schedu	sation from the left of the le	4 X
5 Did any person listed on line 1a receive for services rendered to the organization? I	or accrue con	mpen	sati	on 1	fron	n any	un	related organizati	on or individual	5 X
Section B. Independent Contractors										

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

(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 ▶

Form **990** (2020)

Part VII

		_	•	,			<u>J</u>		ed Employees (c		~/	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	s per	tion more	e than the than the tip to the tip tip the tip	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Esti amo of compo fror organ and	mated punt of ther ensation the nizatior related nization	1
48) RYAN BENSING, RPL	2.00					ed						
DIRECTOR	10.	X						0.	0.			(
49) STEVEN RAPANOS, CPL	2.00											
DIRECTOR	0.	Х						0.	0.			(
50) TERRY CAVES, CPL	2.00											
DIRECTOR	0.	Х						0 .	0.			(
51) TIMOTHY MCGHEE	2.00											
DIRECTOR	0.	Х						0 .	0.			(
52) WILLIAM HACKETT, CPL	2.00											
DIRECTOR	0.	X						0 .	0.			(
	 											
1b Sub-total c Total from continuation sheets to Part VII, S	-						> .	0.	0.			0
d Total (add lines 1b and 1c)	limited to t	hose					re	ceived more than	\$100,000 of			
	•									١,	Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the organization and related organizations grindividual	sum of repeater than	ortab \$15	le c	omp	pen <i>If</i>	sation <i>"Ye</i> s,	ar ," (nd other compens	sation from the le J for such	4	Х	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on f	rom	any	uni	related organization	on or individual	5		Х
Section B. Independent Contractors												
Complete this table for your five highest com- compensation from the organization. Report of												

(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 ▶

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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Total revenue Related or exempt Unrelated Revenue excluded function revenue business revenue from tax under sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts Membership dues c Fundraising events 1c Government grants (contributions) . . All other contributions, gifts, grants, and similar amounts not included above ... 1f g Noncash contributions included in lines 1a-1f 1g \$ Total. Add lines 1a-1f **Business Code** Program Service Revenue 293,950 AAPL ANNUAL MEETING 900099 293,950 611710 342,068 342,068 EDUCATIONAL SEMINAR h MEMBERSHIP DUES 900099 1,466,507 1,466,507 900099 CERTIFICATION FEES & DUES 82,398 82,398 d 900099 RENTAL INCOME FROM AFFLILIATE 102,132 102,132 All other program service revenue 2,287,055. Total. Add lines 2a-2f Investment income (including dividends, interest, and 465,088 465,088 other similar amounts)........ 0. 4 Income from investment of tax-exempt bond proceeds . 5 48,378. 48.378. (i) Real (ii) Personal Gross rents 6a **b** Less: rental expenses 6b Rental income or (loss) 6c d Net rental income or (loss) Gross amount from (i) Securities (ii) Other sales of assets 4,304,059. other than inventory 7a b Less: cost or other basis Other Revenue 7b 763,404. 17,869 and sales expenses . . 3,540,655. -17.869 c Gain or (loss) 7c 3,522,786 3,522,786 d Net gain or (loss) income from fundraising 8a Gross events (not including \$ _ of contributions reported on line 8a 1c). See Part IV, line 18 0. 8b **b** Less: direct expenses Ω c Net income or (loss) from fundraising events. 9a Gross income from gaming 0. activities. See Part IV, line 19 0. 9b **b** Less: direct expenses 0. c Net income or (loss) from gaming activities. \triangleright sales of inventory, 10a Ω returns and allowances 0. b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 0. **Business Code** Miscellaneous Revenue ADVERTISING/CIRCULATION 541800 169,499 169,499 11a 900099 100,121 100,121. NAPE EXPO FEE PARTNERSHIP LOSS - NAPE EXPO LP 532000 -486,898. -77,509. -409,389 С 24.722 24.722 All other revenue -192,556 Total. Add lines 11a-11d Total revenue. See instructions 2,311,777. 91,990. 3,726,984. 6,130,751

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	0.							
2	Grants and other assistance to domestic								
_	individuals. See Part IV, line 22	0.							
3	Grants and other assistance to foreign								
3	organizations, foreign governments, and								
	foreign individuals. See Part IV, lines 15 and 16	0.							
4	Benefits paid to or for members	0.							
	Compensation of current officers, directors,								
Ŭ	trustees, and key employees	1,175,065.							
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	1,983,268.							
	Pension plan accruals and contributions (include								
-	section 401(k) and 403(b) employer contributions)	0.							
9	Other employee benefits	380,565.							
10	Payroll taxes	0.							
	Fees for services (nonemployees):								
	Management	0.							
	Legal	12,686.							
	Accounting	50,627.							
	Lobbying	0.							
	Professional fundraising services. See Part IV, line 17.	0.							
f	Investment management fees	143,773.							
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O.)	312,938.							
12	Advertising and promotion	39,614.							
13	Office expenses	162,993.							
14	Information technology	262,337.							
15	Royalties	0.							
16	Occupancy	298,452. 19,227.							
	Travel	19,227.							
18	Payments of travel or entertainment expenses	0							
4.	for any federal, state, or local public officials	0. 193,850.							
	Conferences, conventions, and meetings	0.							
	Interest	0.							
21 22	Payments to affiliates Depreciation, depletion, and amortization	214,553.							
		69,131.							
	Insurance Other expenses Itemize expenses not covered	55,252.							
	above (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а	ANNUAL MEETING & REPORT	377,112.							
-	LANDMAN JOURNAL & DIRECTORY	404,982.							
	UNRELATED BUSINESS TAX	17,893.							
d	EDUCATION SEMINARS	213,756.							
е	All other expenses	73,718.							
25	Total functional expenses. Add lines 1 through 24e	6,406,540.							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and								
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0.							

Part X Balance Sheet

	II A	Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	756,677.	1	0.
	2	Savings and temporary cash investments	1,482,524.	2	1,242,354.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	19,769.	4	75,388.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
	•	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0.	6	0.
ß	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
As	9	Prepaid expenses and deferred charges	373,865.	9	363,765.
	-	Land, buildings, and equipment: cost or other	<u>·</u>		
		basis. Complete Part VI of Schedule D 10a 6,629,035.			
	h	Less: accumulated depreciation	4,908,521.	100	4,738,883.
	11	Investments - publicly traded securities	30,999,467.	11	39,177,594.
	12	Investments - other securities. See Part IV, line 11	510.	12	510.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	182,168.	14	135,689.
	15	Other assets. See Part IV, line 11	473.	15	3,463.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	38,723,974.	16	45,737,646.
	17		548,654.	17	816,375.
		Accounts payable and accrued expenses	0.	18	0.
	18	Grants payable	1,492,040.	19	1,352,700.
	19	Deferred revenue	0.	20	0.
	20 21	Tax-exempt bond liabilities	0.	21	0.
		Escrow or custodial account liability. Complete Part IV of Schedule D	<u> </u>	21	0.
Liabilities	22	Loans and other payables to any current or former officer, director,			
Ξ		trustee, key employee, creator or founder, substantial contributor, or 35%	0.		0.
<u>=</u>		controlled entity or family member of any of these persons	0.	22	0.
	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	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	0.		495,100.
	20	of Schedule D	2,040,694.		2,664,175.
	26	Total liabilities. Add lines 17 through 25	2,040,094.	26	2,004,173.
es		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
auc	27	Net assets without donor restrictions	36,682,990.		43,073,471.
Bal	27 28	l la companya di managantan di managantan di managantan di managantan di managantan di managantan di managanta	290.	27	43,073,471.
힏	20	Net assets with donor restrictions.	290.	28	0.
Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
Assets	31	Retained earnings, endowment, accumulated income, or other funds.		31	
	32	Total net assets or fund balances	36,683,280.	32	43,073,471.
Net	33	Total liabilities and net assets/fund balances	38,723,974.	33	45,737,646.
			,,,.1.	_ 55	Form 990 (2020)

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			30,7	
2	Total expenses (must equal Part IX, column (A), line 25)	2			06,5	
3	Revenue less expenses. Subtract line 2 from line 1	3 -275				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4 36,68			83,280.	
5	Net unrealized gains (losses) on investments	5	6,1	6,180,344.		
6	Donated services and use of facilities				0.	
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		4	85,6	36.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	4	13,0	73,4	71.
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: CashX Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					
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 cor	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ted o	n a 📗			
	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 over	ersigh	t of			
	the audit, review, or compilation of its financial statements and selection of an independent accounts	ınt?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e		I			
	Schedule O.	•				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in	the			
	Single Audit Act and OMB Circular A-133?		[3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			3b		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

•	Section 501(c)(3) organizations	that have filed Form 5768 (election un	ider section 501(h)): Co	mplete Part II-A. Do not com	iplete Part II-B.
	. , . , .	that have NOT filed Form 5768 (election	` '	, ·	•
If the Tax)	e organization answered "Yes," (See separate instructions), the	on Form 990, Part IV, line 5 (Proxy n	Tax) (See separate in	nstructions) or Form 990-l	EZ, Part V, line 35c (Prox
•	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nam	e of organization AMERICAN	ASSOCIATION OF PROFESSI	ONAL	Employer ide	ntification number
LAN	IDMEN, INC.			75-097	5500
Pa	rt I-A Complete if the c	organization is exempt under	section 501(c) or	is a section 527 orgai	nization.
1		organization's direct and indirect p			
	definition of "political campa	•	1 0	,	
2	•	xpenditures (See instructions)		▶ \$	
3		campaign activities (See instructio			
		organization is exempt under			
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶ \$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 ► \$	
3		a section 4955 tax, did it file Form			
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pai	rt I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).
1	Enter the amount directly e	xpended by the filing organization	for section 527 ex	empt function	
	activities			▶\$	
2	Enter the amount of the filin	ng organization's funds contributed	to other organization	ons for section	
	527 exempt function activiti	es		▶\$	
3	•	enditures. Add lines 1 and 2. Ent			
4 5	Enter the names addresses	e Form 1120-POL for this year? and employer identification numb	or (FIN) of all soction	on 527 political organize	
J	organization made payment	s. For each organization listed, en	ter the amount paid	I from the filing organize	ration's funds. Also ente
		tributions received that were prom			
		nd or a political action committee (l			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	• •			filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization. If
					none, enter -0
(1)					•
(1)					
(2)					
(2)			-		
(3)					
(3)					
(4)					
`',			1		
(5)					
. ,			1		
(6)					
. ,			1		
		•	•	•	•

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

Schedule C (Form 990 or 990-EZ) 2020

P	art II-A	Complete if the org	janizati	on is exen	npt under section	n 501(c)(3) and	filed Form 5768 (ele	ction under
A	Check ▶			•	affiliated group (and excess lobbying exp		ach affiliated group mem	nber's name,
В	Check ▶	if the filing organiz	ation ch	ecked box A	and "limited contro	ol" provisions app	ly.	
		Limits (The term "expendit		ying Expendence)	(a) Filing organization's totals	(b) Affiliated group totals
I 0	Total lob Total lob d Other ex Total ex	obying expenditures to interpretation by the bodying expenditures (and seempt purpose expenditures) and purpose expendition of the purpose expenditures to interpretation of the purpose expenditures to interpretation of the purpose expenditures to interpretation of the purpose expenditures (and purpose expenditures).	nfluence d lines 1 tures ures (add	a legislative a and 1b) d lines 1c an	e body (direct lobbyi	ng)		
	If the am	ount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amount	is:		
		\$500,000	, , , ,		amount on line 1e.			
	Over \$50	0,000 but not over \$1,000	0,000	\$100,000 pl	us 15% of the excess	over \$500,000.		
	Over \$1,0	000,000 but not over \$1,5	00,000	\$175,000 pl	us 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the				us 5% of the excess of	over \$1,500,000.		
	Over \$17,000,000 \$1,000,000.							
	 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organiz reporting section 4911 tax for this year? 					did the organizat		Yes No
	(S	ome organizations tha	t made a See	section 50 the separa	te instructions for I	t have to comple ines 2a through	2f.)	nns below.
			Lobk	ying Exper	nditures During 4-Y	ear Averaging Pe	riod	
		ar year (or fiscal year peginning in)	(a)	2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
28	a Lobbying	g nontaxable amount						
_	-	g ceiling amount of line 2a, column (e))						
_	Total lob	obying expenditures						
_	d Grassro	ots nontaxable amount						
_		ots ceiling amount of line 2d, column (e))						
f	Grassro	ots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2020

Page 3 Schedule C (Form 990 or 990-EZ) 2020

or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed escription of the lobbying activity.		(a)			b)	
	Yes	I			ount	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
a Volunteers?	_					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c Media advertisements?						
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?	- 1					
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities?						
j Total. Add lines 1c through 1i	- 1					
 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5), or	sectio	n		
501(c)(6).					Yes	No
Were substantially all (90% or more) dues received nondeductible by members?				1	+	X
				2		Х
Did the organization make only in-house lobbying expenditures of \$2 ()()() or less?				_		Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50	1(c)(5), or	sectio	n		
Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), section 50501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes.")1(c)(5 " OR (), or	sectio art III-A	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members	01(c)(5 " OR (), or b) Pa	sectio	n A, line	3, is	
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am	01(c)(5 " OR (), or b) Pa	sectio art III-A	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid).	01(c)(5 " OR (), or b) Pa	sectio	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid). Current year	01(c)(5 " OR (), or b) Pa	sectio	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid).	01(c)(5 " OR (), or b) Pa of	sectionart III-A	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid). Current year Carryover from last year.	01(c)(5 " OR (), or b) Pa of	sectionart III-A	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid). Current year	ounts), or b) Pa	section art III-A	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid). a Current year Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) or the carryover form last year.	ounts ues), or b) Pa of	section art III-A	n A, line		
Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid). Current year Carryover from last year. Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) of light notices were sent and the amount on line 2c exceeds the amount on line 3, what portices is a section 501(c)(4),	ounts ues lobbyi), or b) Pa of	section art III-A	n A, line		

Schedule C (Form 990 or 990-EZ) 2020 Page **4**

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2020

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization AMERICAN ASSOCIATION OF PROFESSIONAL Employer identification number LANDMEN, INC. 75-0975500 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a а 2b 2c Number of conservation easements on a certified historic structure included in (a) С Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1.............................. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

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Schedule D (Form 990) 2020

▶ \$

following amounts required to be reported under FASB ASC 958 relating to these items:

Schedule D (Form 990) 2020 Page f 2

	dule D (Folili 990) 2020			A 4 11'			041	0: " 4	1 (Page Z
	rt III Organizations Maintainin										
3	Using the organization's acquisition		ion, and o	other red	cords, chec	k any of	the follow	ving that ma	ke sign	ificant us	se of its
	collection items (check all that apply	'):									
а	Public exhibition			d			nge progra	ım			
b	Scholarly research			е	Other						
С	Preservation for future genera										
4	Provide a description of the organi	zation's	collections	s and ex	plain how	they furt	her the or	ganization's	exempt	purpose	in Part
	XIII.										
5	During the year, did the organization								_	_	
	assets to be sold to raise funds rathe			ained as	part of the	organiza	tion's colle	ction?	<u> L</u>	Yes	No
Pa	rt IV Escrow and Custodial Ar									_	
	Complete if the organizat	ion ansv	vered "Ye	es" on F	orm 990, F	Part IV, I	ine 9, or r	eported an	amoun	t on For	m
	990, Part X, line 21.										
1a	Is the organization an agent, truste									_	
	included on Form 990, Part X?								L	Yes	No
b	If "Yes," explain the arrangement in	Part XIII	and comp	olete the	following ta	ble: _					
								Δ	Mount		
С	Beginning balance					_	1c				
d	Additions during the year						1d				
е	Distributions during the year					_	1e				
f	Ending balance						1f				
2a	Did the organization include an amo								_	Yes	No
	If "Yes," explain the arrangement in	Part XIII	. Check h	ere if the	explanation	has bee	n provided	on Part XIII	<u></u>		
Pa	rt V Endowment Funds.										
	Complete if the organizat	ion ansv	vered "Ye	es" on F	orm 990, I						
		(a) Curr	ent year	(b) F	rior year	(c) Two	years back	(d) Three year	rs back	(e) Four y	ears back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains,										
	and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	·										
f											
g	-										
2	Provide the estimated percentage of	of the cur	rent year	end bala	nce (line 1g	, column	(a)) held as	3:			
а	Board designated or quasi-endowme			_%	, 5		(),				
b	Permanent endowment ▶	%									
С	Term endowment ▶%	%									
	The percentages on lines 2a, 2b, ar	nd 2c sho	uld equal '	100%.							
3a	Are there endowment funds not in the	he posse	ssion of th	ne organ	ization that	are held	and admi	nistered for th	ie	_	
	organization by:									Y	es No
	(i) Unrelated organizations									3a(i)	
	(ii) Related organizations									3a(ii)	
b	If "Yes" on line 3a(ii), are the related	d organiz	ations liste	d as requ	uired on Sch	nedule R?				3b	
4	Describe in Part XIII the intended us		organiza :	tion's en	dowment fu	nds.					
Pa	rt VI Land, Buildings, and Equi	pment.	warad "V	00" 00 F	- orm 000	Dort IV	lina 11a	Caa Farm O	000 Da	rt V lino	. 10
	Complete if the organization	uon ansv	(a) Cost or			or other bas		cumulated		Book valu	
	2000 Iption of property			tment)		or other bas other)		reciation	(a)		
1a	Land	[392,05					2,051.
b	Buildings	[3,8	319,028		521,739.		3,19	7,289.
С	Leasehold improvements	[36,40		8,073.		2	8,335.
d	Equipment	[72,24		72,247.			
_е	Other				1,3	309,303	1. 1,1	.88,093.		12	1,208.
Tota	Add lines 1a through 1e (Column)		egual Forr	n 990 P	art X colum	n (B) line	10c)			4.73	8.883.

Part VII Investments - Other Securities. Complete if the organization answer	ed "Yes" on Form 990,	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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G) (H)		
(Column (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
	ed "Yes" on Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
<u>(5)</u>		
<u>(6)</u>		
<u>(7)</u> (8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
	ed "Yes" on Form 990,	Part IV, line 11d. See Form 990, Part X, line 15.
	Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
_(7)		
(8)		
(9)	2) " 45)	
Total. (Column (b) must equal Form 990, Part X, col. (E Part X Other Liabilities.	3) line 15.)	>
PENANT ()thor I ishilitide		
Complete if the organization answer	ed "Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,
Complete if the organization answer line 25.	ed "Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part X, (b) Book value
Complete if the organization answer line 25.		
Complete if the organization answer line 25. 1. (a) Description		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (1) Federal income taxes (2) PPP LOAN (3)		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (a) Description (b) PPP LOAN		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (a) Descripti		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (a) Descripti		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (a) Descripti		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (a) Descripti		(b) Book value
Complete if the organization answer line 25. 1. (a) Description (a) Descripti	eription of liability	(b) Book value 495,100

PAGE 25

Schedule D (Form 990) 2020 Page 4

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 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	12,652,958.
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.)	0-	6,180,344.
е	Add lines 2a through 2d	2e 3	6,472,614.
3	Subtract line 2e from line 1	3	0/1/2/0111
4 a	Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b		
a b	Other (Describe in Part XIII.) -485,636.		
c	Add lines 4a and 4b	4c	-341,863.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,130,751.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	6,262,767.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	.	
b	Prior year adjustments		
C	Other losses	-	
d	Carlot (December in Carlot	2e	
e	Add lines 2a through 2d	3	6,262,767.
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 143,773.		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	143,773.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	6,406,540.
	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; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

Part XIII Supplemental Information (continued)

SCHEDULE D, PART XI, LINE 4B

RECONCILIATION OF AUDITED REVENUE TO FORM 990 REVENUE:

PASS-THROUGH LOSSES FROM K-1

(485,636)

SCHEDULE D, 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 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

Name of the organization LANDMEN, INC.

Department of the Treasury Internal Revenue Service

AMERICAN ASSOCIATION OF PROFESSIONAL

Employer identification number 75-0975500

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

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

AMERICAN ASSOCIATION OF PROFESSIONAL 75-0975500

Schedule J (Form 990) 2020 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 o	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
GRETA ZEIMETZ	(i)	251,052.	38,917.	0.	27,324.	24,726.	342,019.	0.
1 EXECUTIVE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
AMANDA JOHNSON	(i)	115,468.	17,783.	13,811.	16,575.	3,918.	167,555.	0.
2 ^{CHIEF} ACCOUNTING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
LEANN CALLIHAN	(i)	231,094.	35,472.	0.	33,949.	45,558.	346,073.	0.
3DIRECTOR OF COMMUNICATIONS AND	(ii)	0.	0.	0.	0.	0.	0.	0.
STACEY GARVIN-PART YEAR	(i)	235,094.	25,520.	0.	32,532.	26,273.	319,419.	0.
4 DIRECTOR OF EDUCATION AND MEMB	(ii)	0.	0.	0.	0.	0.	0.	0.
	(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)							

AMERICAN ASSOCIATION OF PROFESSIONAL 75-0975500

Schedule J (Form 990) 2020

Part | 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 1A

AAPL HAS A POLICY TO REIMBURSE THE PRESIDENT AND IN CERTAIN

CIRCUMSTANCES THE PRESIDENT'S SPOUSE FOR TRAVEL. AAPL ISSUES A 1099

IN THE PRESIDENT'S NAME FOR THE AMOUNT REIMBURSED FOR TRAVEL FOR THE

PRESIDENT'S SPOUSE.

SCHEDULE J, PART I, LINE 4A

SEVERANCE PAYMENT:

SEVERANCE IS A VOLUNTARY AGREEMENT THAT SET FORTH THE AGREED UPON

SEPARATION DATE FOR EMPLOYMENT AND BENEFITS COVERAGE, THE AMOUNT OF

PAYMENT, A CONFIDENTIALITY AGREEMENT CONCERNING COMPANY INFORMATION AND

MATERIALS, RETURN OF COMPANY MATERIALS, AND COOPERATION CONCERNING

BUSINESS MATTERS.

SCHEDULE J, PART I, LINE 7

NON-FIXED PAYMENTS:

THE BONUSES REPORTED ARE DISCRETIONARY. IN THE EMPLOYEE'S OFFER LETTER,

IT IS COMMUNICATED THE EMPLOYEE WILL HAVE AN OPPORTUNITY FOR AN ANNUAL

PERFORMANCE BONUS.

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.

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

AMERICAN ASSOCIATION OF PROFESSIONAL Employer ide

Name of the organization LANDMEN, INC.

Employer identification number 75-0975500

FORM 990, PART VI, SECTION A, LINE 4
SIGNIFICANT CHANGES TO GOVERNING DOCUMENTS:

MINERAL(S) SHALL BE DEFINED WITHOUT LIMITATION TO INCLUDE OIL, GAS,
RELATED HYDROCARBONS, COAL, LIGNITE, URANIUM AND SUBSTANCES CLASSIFIED AS
BASE, INDUSTRIAL, PRECIOUS OR STRATEGIC MINERALS. OTHER ENERGY SOURCES
SHALL BE DEFINED WITHOUT LIMITATION TO INCLUDE WIND ENERGY, GEOTHERMAL
ENERGY AND SOLAR ENERGY.

FORM 990, PART VI, SECTION A, LINE 6

MEMBERS OR STOCKHOLDERS:

SHALL BE REQUIRED TO MEET THE FOLLOWING MINIMUM OBJECTIVE STANDARDS:

I. PRACTICING LAND PROFESSIONAL. THE APPLICANT SHALL BE A LAND

PROFESSIONAL WITH A 4-YEAR COLLEGE DEGREE OR FOUR OR MORE YEARS OF

ALL NEW APPLICANTS FOR ACTIVE MEMBER STATUS ON OR AFTER JUNE 1, 1993,

CONTINUOUS ENGAGEMENT AS A LAND PROFESSIONAL.

II. SPONSORSHIP. THE APPLICATION MUST BE SPONSORED BY ONE ACTIVE MEMBER OF AAPL.

III. EMPLOYMENT CLASSIFICATION. THE APPLICANT SHALL BE CLASSIFIED EITHER
AS AN EXEMPT EMPLOYEE BY THE APPLICANT'S EMPLOYER OR AS AN INDEPENDENT
CONTRACTOR.

IV. ETHICAL CONDUCT AND STANDARDS OF PRACTICE. THE APPLICANT MUST EXECUTE SUCH DOCUMENTATION AS AAPL MAY REQUIRE AFFIRMING THE APPLICANT'S WILLINGNESS TO BE BOUND BY AND ABIDE WITHIN THE AAPL CODE OF ETHICS AND STANDARDS OF PRACTICE.

Name of the organization AMERICAN ASSOCIATION OF PROFESSIONAL Employer identification number
LANDMEN, INC. 75-0975500

THREE NON-VOTING MEMBERSHIPS ARE ALSO AVAILABLE:

ASSOCIATE MEMBER, STUDENT MEMBER, AND HONORARY MEMBER.

POWER TO ELECT OR APPOINT ONE OR MORE MEMBERS OF THE GOVERNING BODY:

MEMBERSHIP APPLICATIONS, OR SERVE AS A DIRECTOR OF THE AAPL. THE ELECTION

OF OFFICERS SHALL BE BY BALLOT OF THE VOTING MEMBERS. RECORDS ARE

ONLY ACTIVE MEMBERS MAY VOTE IN THE AFFAIRS OF THE AAPL, SPONSOR

MAINTAINED AT THE HEADQUARTERS TO DETERMINE THE VOTING ELIGIBILITY OF ANY

MEMBER. EACH ACTIVE MEMBER OF THE AAPL SHALL BE ENTITLED TO ONE VOTE.

FORM 990, PART VI, SECTION A, LINE 7B

FORM 990, PART VI, SECTION A, LINE 7A

GOVERNING DECISIONS BY PERSONS OTHER THAN THE GOVERNING BODY:

THE ELECTION OF OFFICERS SHALL BE BY BALLOT OF THE VOTING MEMBERS.

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

FORM 990 REVIEW PROCESS:

A COPY OF IRS FORM 990 WAS PROVIDED TO THE BOARD OF DIRECTORS OF AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN FOR REVIEW PRIOR TO SUBMITTING IT TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C

CONFLICT OF INTEREST POLICY:

CONFLICT OF INTEREST STATEMENTS ARE OBTAINED FROM ALL NEW DIRECTORS AND COMMITTEE CHAIRMAN AT ORIENTATION AND ALL NEW AAPL AND NAPE EMPLOYEES UPON HIRING.

Name of the organization AMERICAN ASSOCIATION OF PROFESSIONAL Employer identification number
LANDMEN, INC. 75-0975500

FORM 990, PART VI, SECTION B, LINE 15A

COMPENSATION REVIEW:

THE FOLLOWING METHODS ARE USED TO ESTABLISH COMPENSATION OF THE EXECUTIVE DIRECTOR: FORM 990 OF OTHER ORGANIZATIONS, WRITTEN EMPLOYMENT CONTRACT AND COMPENSATION SURVEY OR STUDY. PERFORMANCE AND PAY FOR THE EXECUTIVE DIRECTOR ARE REVIEWED ANNUALLY BY THE AAPL FINANCE COMMITTEE AND REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE AND BOARD OF DIRECTORS IN JUNE.

FORM 990, PART VI, SECTION C, LINE 19

AVAILABILITY OF DOCUMENTS:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, THE AAPL BYLAWS,
STANDARDS OF PRACTICE AND THE AAPL CERTIFICATION PROGRAM, ARE PUBLISHED
ANNUALLY IN THE LANDMAN'S DIRECTORY. THE DIRECTORY IS MAILED AND
AVAILABLE ONLINE TO ALL PAID MEMBERS. AUDITED FINANCIAL STATEMENTS ARE
MADE AVAILABLE TO ALL MEMBERS UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 16B

JOINT VENTURE ARRANGEMENT SAFEGAURDS:

NAPE EXPO LP IS AN ARRANGEMENT THAT IS SIMILAR TO A JOINT VENTURE. NAPE'S ONLY ACTIVITIES ARE TRADE SHOWS WHICH IS AN EXEMPT ACTIVITY UNDER IRC SECTION 513. ALL PARTNERS IN NAPE EXPO LP ARE TAX EXEMPT ORGANIZATIONS.

FORM 990, PART VI, SECTION B, LINE 15B

COMPENSATION REVIEW:

PERFORMANCE AND PAY ARE REVIEWED ANNUALLY BY THE EXECUTIVE VICE-PESIDENT IN JUNE OF EACH YEAR FOR OTHER KEY EMPLOYEES.

Schedule O (Form 990 or 990-EZ) 2020 Page 2

AMERICAN ASSOCIATION OF PROFESSIONAL Name of the organization Employer identification number 75-0975500 LANDMEN, INC.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS:

PASS-THROUGH LOSS FROM K-1

\$485,636

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION		
DIGITAL 3 PRINTING 2730 N. STEMMONS FWY. STE. 740W DALLAS, TX 75207	PRINTING	439,576.		
PERSONIFY, INC. P.O. BOX 735327 DALLAS, TX 75373	SOFTWARE ENHANCEMENT	150,075.		
SEEK CIO 105 SUNRISE DRIVE COPPELL, TX 75019	PERSONIFY SUPPORT	143,125.		
LUTHER KING CAPITAL MANAGEMENT 301 COMMERCE STREET, SUITE 1600 FORT WORTH, TX 76102	INVESTMENT SERVICES	138,065.		

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF PROFESSIONAL

Employer identification number 75-0975500

LANDMEN, INC.

Part I

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a Name, address, and EIN (if a	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
(1) NAPE MANAGEMENT, LLC	20-4920726					
800 FOURNIER STREET	FORT WORTH, TX 76102	TRADE SHOWS	TX	-4,762.	12,218.	AAPL
(2)						
_(3)						
(4)						
(5)						
(6)						

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

(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	g) 512(b)(13) rolled tity?
					Yes	No
EDUCATION	TX	501(C)(3)	12A, TYPE 1	AAPL	X	
SCHOLARSHIPS	TX	501(C)(3)	12A, TYPE 1	AAPL	X	
GRANTS	TX	501(C)(3)	10	AAPL	X	
	Primary activity EDUCATION SCHOLARSHIPS	Primary activity Legal domicile (state or foreign country) EDUCATION TX SCHOLARSHIPS TX	Primary activity Legal domicile (state or foreign country) EXEMPT Code section TX 501(C)(3) SCHOLARSHIPS TX 501(C)(3)	Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) EDUCATION TX 501(C)(3) 12A, TYPE 1 SCHOLARSHIPS TX 501(C)(3)	Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Direct controlling entity EDUCATION TX 501(C)(3) 12A, TYPE 1 AAPL SCHOLARSHIPS TX 501(C)(3) 12A, TYPE 1 AAPL	Primary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Exempt Code section (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Yes EDUCATION TX 501(C)(3) 12A, TYPE 1 AAPL X SCHOLARSHIPS TX 501(C)(3) 12A, TYPE 1 AAPL X

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

Schedule R (Form 990) 2020

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 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)	income year assets allocations? amount in box 20		x 20 managing K-1 partner?		(k) Percentage ownership			
		,		,			Yes	No		Yes	No	
(1) NAPE EXPO, LP 20-4920808												
800 FOURNIER STREET FORT WORTH	TRADE SHOWS	TX	NONE	EXCLUDED FROM TAX	-480,874.	1,233,986.		Х	-76,749.	Х		50.5000
_(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)(13) controlled entity? Yes No
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

Schedule R (I	F0III 990) 2020	Page
Part V	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part 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.					Yes	No
NOI							
1	During the tax year, did the organization engage in any of the following transactions with one or more	_			10	Х	\vdash
	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	X	\vdash
	Gift, grant, or capital contribution to related organization(s)				1b	X	
	Gift, grant, or capital contribution from related organization(s)				1c	Λ	Х
d	Loans or loan guarantees to or for related organization(s)				1d		
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)				1f		Х
a a	Sale of assets to related organization(s)				1g		Х
9					1h		Х
- "	Purchase of assets from related organization(s)				1i		х
	Exchange of assets with related organization(s)				1j	Х	
J	Lease of facilities, equipment, or other assets to related organization(s)				٠,		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11		X
m	Performance of services or membership or fundraising solicitations by related organization(s).				1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х	
	Sharing of paid employees with related organization(s)				10	Х	
·	on paid omproyoso man rotated organization(o) 111111111111111111111111111111111111						
р	Reimbursement paid to related organization(s) for expenses				1p	Х	
a.					1q	X	
•							
r	Other transfer of cash or property to related organization(s)				1r		X
s	Other transfer of cash or property from related organization(s)				1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including cove	ered relationships and trans	action thre	shold	s.	
	(a)	(b)	(c)		(d)		
	Name of related organization	Transaction type (a-s)	Amount involved	Method amo	of dete unt inv		ng
(4)	NADE EVDO ID	7	102 122	E-MZ 7			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NAPE EXPO, LP	A	102,132.	FMV
_(2)			
_(3)			
_(4)			
_(5)			
(6)			

Schedule R (Form 990) 2020

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) Name, address, and EIN of entity	(a) (b) (c) Iress, and EIN of entity Primary activity Egal domicile (state or foreign country)		(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514) (e) Are all par section 501(c)(corganization year)		(e) Are all partners section 501(c)(3) organizations? (f) Share of total income		(g) Share of end-of-year assets	(h) Disproportionate allocations?		amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			sections 512 - 514)	Yes	No			Yes	No	(1 01111 1003)	Yes	No		
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
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(13)														
(14)														
(15)														
(16)														

Schedule R (Form 990) 2020 Page 5

Part VII Supplemental Information

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

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic

iling of this	form, visit www.irs.gov/e-file-providers/e-file-f	or-charities	-and-non-profits.				
Automatic	6-Month Extension of Time. Only subm	it original	(no copies needed).				
•	ons required to file an income tax return othe orm 7004 to request an extension of time to fi		, -	O-C filers), partnerships,	, RE	MICs,	and trusts
Гуре or	Name of exempt organization or other filer, see in AMERICAN ASSOCIATION OF	structions.		Taxpayer identification nu	ımbe	r (TIN)	
orint	PROFESSIONAL LANDMEN, INC.			75-097550	0		
File by the lue date for iling your	te for our 800 FOURNIER STREET						
eturn. See nstructions.	City, town or post office, state, and ZIP code. For FORT WORTH, TX 76102	a foreign ad	dress, see instructions.				
Enter the Re	eturn Code for the return that this application	is for (file	a separate application fo	or each return)			0 1
Application		Return	Application				Return
s For		Code	Is For				Code
	r Form 990-EZ	01	Form 990-T (corporat	ion)			07
orm 990-BI		02	Form 1041-A				08
orm 4720	,	03	Form 4720 (other tha	n individual)			09
Form 990-PF 04 Form 5227							10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069							11
-orm 990-1	(trust other than above) AMANDA F. JOHNSO	06	Form 8870				12
Telephono If the orga If this is for the whole Itst with the	s are in the care of ▶ 800 FOURNIER ST e No. ▶ 817 847-7700 anization does not have an office or place of the property of a Group Return, enter the organization's force group, check this box ▶	l ousiness ir ur digit Gro it is for pa on is for.	Fax No. the United States, checoup Exemption Number (art of the group, check the process of the control of the group, check the group is group.	GEN) _ his box ▶ [If t and a	this is
	est an automatic 6-month extension of time ur			to file the exempt	t org	janiza	tion return
2 If the ta	organization named above. The extension is calendar year 20 or tax year beginning 07/0 ax year entered in line 1 is for less than 12 m change in accounting period	<u>1</u> , 20 <u>2</u> 0	O, and ending	06/30_, eturn Final return		<u>21</u> .	
3a If this	application is for Forms 990-BL, 990-PF, 99	90-T, 4720), or 6069, enter the	tentative tax, less any			
nonrefu	undable credits. See instructions.				3a	\$	0.
b If this	application is for Forms 990-PF, 990-T,	4720, o	r 6069, enter any re	fundable credits and			
estima	ted tax payments made. Include any prior yea	r overpayn	nent allowed as a credit		3b	\$	0.
c Balanc	e due. Subtract line 3b from line 3a. Include	your paym	ent with this form, if re-	quired, by using EFTPS			
(Electro	onic Federal Tax Payment System). See instru	ctions.			3с	\$	0.
Caution: If you	u are going to make an electronic funds withdrawa	(direct deb	it) with this Form 8868, se	e Form 8453-EO and Forn	n 88	79-EO	for payment
nstructions.							
or Privacy A	Act and Paperwork Reduction Act Notice, see instr	uctions.			Forr	n 886 8	8 (Rev. 1-2020)