

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 202	0 calendar year, or tax year begir	nning 07/	01,2020), and	ending	_	06	/30 ,20	21	
R ch	eck if ap	policable:	C Name of organization					D Employer ic	lentific	cation num	ber	
	Addre		AAPL EDUCATION FOUNDA	rion, inc.						_		
	chang		Doing Business As		, 1		,	23-724				
	Name	change	Number and street (or P.O. box if mail is	not delivered to street address	5)	Room	/suite	E Telephone r				
	Initial	return	800 FOURNIER ST.	1715 () ()				(817) 84	£'/ — '/	7700		
	Termi		City or town, state or province, country, a	and ZIP or foreign postal code				.	_	-	0.50	0.2.2
	Amen	n	FORT WORTH, TX 76102					G Gross receip				,033.
	Applio		F Name and address of principal officer:	DR. GRETA ZEI				H(a) Is this a gro subordinate	oup retu s?	Irn for	Yes	X No
			800 FOURNIER ST., FOR	· ·				H(b) Are all subor			Yes	No
		empt st) (insert no.)	4947(a)(1)	or	527	\dashv		t. (see instrud	tions)	
			WWW.LANDMAN.ORG					H(c) Group exen				
$\overline{}$			i i i i i i i i i i i i i i i i i i i	Association Other		L	Year of form	ation: 1983 M	State	of legal do	micile:	TX
Pa	rt I		mmary		DDOMOS	ים סיים	DIIGARTO	NINT DDOGD7	MC	CONCE		
-	1		/ describe the organization's mission o							CONCER		
Governance			PETROLEUM, MINERAL, ANI THE GENERAL PUBLIC.	ENERGY INDUSTR		R ME	MBERS O	F AAPL				
rua	•											
ove			this box if the organization d						1 1			7
ა დ			er of voting members of the governing						3			$\frac{7.}{7.}$
es			er of independent voting members of t						4			0.
Activities			number of individuals employed in cale						5			9.
\cti			number of volunteers (estimate if necess						6			0
`			unrelated business revenue from Part V						7a			0
_	D	Net ui	nrelated business taxable income from	Form 990-1, line 34				Prior Year	7b	Cur	rent Ye	
		Contr	ibutions and grants (Dort VIII line 4b)					1,8	10	Our		2,124
ne	8	Drage	ibutions and grants (Part VIII, line 1h)		COP	Y FOR		1,0	0.			
Revenue			am service revenue (Part VIII, line 2g)		PUBLIC IN	NSPEC	TION -	34,8			550	,183
Re			ment income (Part VIII, column (A), line					1,2				,104
			revenue (Part VIII, column (A), lines 5,					37,8				,411
			revenue - add lines 8 through 11 (must		120,6				,039			
			s and similar amounts paid (Part IX, colu		120,0	0.			7000			
			its paid to or for members (Part IX, colu es, other compensation, employee bene						0.			
an I											0	
ben	ıva h	Total	ssional fundraising fees (Part IX, column fundraising expenses (Part IX, column (I	D) line 25))	• • •		0.			
Ĕ			expenses (Part IX, column (A), lines 11					36,6	88.		37	7,855
	18	Total	expenses. Add lines 13-17 (must equal	Part IX column (A) line 2	25)		• • • -	157,3				,894
			nue less expenses. Subtract line 18 from		.5)		• • • -	-119,4				,517
es	13	IXCVCI	The reas expenses. Subtract line to from	TIIIIC IZ			Beg	inning of Current		End	of Yea	
anc	20	Total	assets (Part X, line 16)				3	4,331,2				,591
Ass Bal			liabilities (Part X, line 26)				•••		73.		-	2,900
ボミ			ssets or fund balances. Subtract line 21	from line 20			• • •	4,330,2	72.	5	,477	,691
Pa			gnature Block	HOITIMO ZO				, ,	- 1			
Und	er per	nalties o	of perjury, I declare that I have examined th	is return, including accompa	ınying schedu	ules and	d statements,	and to the best of	of my	knowledge	and be	elief, it is
true	, corre	ct, and	complete. Declaration of preparer (other than	officer) is based on all inform	nation of whi	ich prep	parer has any	knowledge.				
Sig			Signature of officer					Date			-	
Her	е											
			Type or print name and title									
		Print/	Type preparer's name	Preparer's signature		Da	ate	Check	if I	PTIN		
Paid		NOE:	LLE ALBERTO					self-employ	۱ ا	P0170	1142	
Prep		Firm's	sname ▶ BKD, LLP	1				Firm's EIN	44-	016026	0	
Use	Only		saddress > 777 MAIN STREET, SUITE	2000 FORT WORTH, TX 76	102			Phone no.	817	.332.2	301	
May	the II	_	cuss this return with the preparer show							XY	es	No
For	Pape	rwork	Reduction Act Notice, see the separat	e instructions.								(2020)

Page 2 Form 990 (2020)

Pa	Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III X Briefly describe the organization's mission:
•	ATTACHMENT 1
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O. 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 \$ 156,900. including grants of \$ 156,900.) (Revenue \$ 0.)
	TO PROVIDE ASSISTANCE TO PROMOTE EDUCATION FOR THE MEMBERS OF AAPL
	AND THE GENERAL PUBLIC.
4b	(Code:) (Expenses \$ 37,139. including grants of \$ 37,139.) (Revenue \$ 0.)
	TO PROVIDE DISASTER RELIEF TO THOSE WITHIN THE PETROLEUM, MINERAL,
	AND ENERGY INDUSTRIES.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	/(code:) /(code: do t) /(code: do t)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 194,039.

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Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	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			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			37
_	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			Х
10	debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
• •	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,"			
	complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		3.5	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	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	140		
. •	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		X
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			
	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?			
	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		Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

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Part	Checklist of Required Schedules (continued)		Vaa	N _a
00	Did the consciention report the OF 000 of reports on although a sciention to or few demonstic individuals are		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	x	
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	21	
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 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? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		X	
Dort	19? Note: All Form 990 filers are required to complete Schedule O.	38	Λ	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No No
1 ~	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		169	140
	Enter the number reported in Box 3 of Form 1096. 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	

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 0.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
- 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 \blacktriangleright			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5.2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		Х
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		Х
Ч	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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		
	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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	4.4		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4.5		Х
	excess parachute payment(s) during the year?	15		
4.0	If "Yes," see instructions and file Form 4720, Schedule N.	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		21
	ii res, complete i unii 4720, sonedule O.			

AAPL EDUCATION FOUNDATION, INC. 23-7243157 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 1a 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. 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 X 3 supervision of officers, directors, trustees, or key employees to a management company or other person?.... 4 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 7a 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, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X 8b Χ 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 X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Х 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Χ Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 13 Х 14 14 Did the organization have a written document retention and destruction policy?............ 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? 15a Χ Χ 15b 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 Χ 16a 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

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) (3)s only) available for <u>public</u> inspection. Indicate <u>how</u> you made these a<u>vailable</u>. Check all that apply.

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

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

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

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and 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, office or direct	unles	Pos neck ss pe	rson	e than cor/trust e is both cor/trust employee	an tee)	(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)GRETA ZEIMETZ	3.00					<u> </u>				
AAPL EXECUTIVE VICE PRESIDENT	42.00			X				0.	289,969.	52,050.
(2) STACEY GARVIN (PARTIAL YEAR)	3.00							_		
DIRECTOR OF EDUCATION AND MEMB	42.00					X		0.	260,614.	58,805.
(3) AMANDA JOHNSON	3.00			3.7					147 060	20 403
AAPL CHIEF ACCOUNTING OFFICER (4) SEAN MARSHALL, CPL	42.00			Х				0.	147,062.	20,493.
CHAIRMAN EMERITUS	0.	X		Х				0.	0.	0.
(5) MARC S. TATE, CPL	2.00	Λ		Λ				0.	0.	0.
CHAIRMAN	0.	X		Х				0.	0.	0.
(6) KYLE REYNOLDS, CPL	2.00							0.	<u> </u>	
TREASURER	0.	Х		Х				0.	0.	0.
(7) DAMON WEGER, CPL	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(8) MICHAEL PISCIOTTE, CPL	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(9) WILL PORTER, CPL	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(10)LINDSEY MILES, CPL	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(11) JASON MALOY, CPL	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(12) CINDY PERDUE, CPL	2.00	_						_	_	_
DIRECTOR	0.	Х						0.	0.	0.
<u>(13)</u>										
(14)										

	990 (2020) It VII Section A. Officers, Directors, Tr	ustees. Ke	v En	olar	vee	es. i	and F	lia	hest Compensat	ed Employ	vees (c	ontinue		Page 8
	(A) Name and title	Average Po hours per (do not chec week (list any box, unless p			Pos heck ss pe	c) ition more	e than o	ne an	(D) Reportable compensation from	(E) Reporta	able on from	Est am	(F) timated ount of other	
		hours for related organizations below dotted line)	office Individual trustee or director	a Institutional trustee	a Officer	Key employee	Highest compensated employee	ee) Former	the organization (W-2/1099-MISC)	organiza (W-2/1099		compensa from th organizat and relat organizati		n d
	Sub-total							>	0.	697	,645.	1	31,3	348.
	Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	-						>	0.	697	,645.	1	31,3	
	Total number of individuals (including but not reportable compensation from the organizatio	limited to t		liste				re	eceived more than	\$100,000	of			
3	Did the organization list any former office employee on line 1a? If "Yes," complete Sched	cer, directo	or, or	tru								3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations grindividual	sum of represents	oortab \$15	le 0 50,0	com 00?	pen <i>If</i>	satior "Yes	n a	nd other compens	sation from	the	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	from	n any	un				5		X
Se	tion B. Independent Contractors						20.0.7	,						
1	Complete this table for your five highest comcompensation from the organization. Report of year.													
	(A) Name and business ad	dress							(B) Description of se	rvices	C	(C) ompens	ation	

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

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

Part VIII Statement of Revenue

ıaı	· VIII	Check if Schedule O contains a respon	nse or note to an	v line in this Part V	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
عَ جَ	С	Fundraising events 1c					
ifts F A	d	Related organizations 1d					
ລີ່≅ີ	е	Government grants (contributions) 1e					
Sin	f	All other contributions, gifts, grants,					
a tio		and similar amounts not included above . 1f	2,124.				
혈美	g	Noncash contributions included in	,				
dit		lines 1a-1f 1g	\$				
೮ ≝	h	Total. Add lines 1a-1f		2,124.			
			Business Code				
9	2a						
ه چَ	b						
SE	C						
a a	d						
28	u u						
Program Service Revenue	e	All other program conice revenue					
	f g	All other program service revenue		0.			
	3	Investment income (including dividends,					
	"	other similar amounts)		62,817.			62,817.
	4	Income from investment of tax-exempt bond	. [0.			
	5	Royalties	•	1,104.			1,104.
		(i) Real	(ii) Personal	,			
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	C	Rental income or (loss) 6c					
	d	Net rental income or (loss)		0.			
	7a	Gross amount from (i) Securities	(ii) Other	J.			
	/ a	sales of assets	(, 5				
		other than inventory 7a 992,988.					
4)	L .	emer man miteriory ru					
evenue	b	Less: cost or other basis and sales expenses 7b 496,622.					
ě		and dated expended III					
				496,366.			496,366.
Other R	d	Net gain or (loss)		130,300.			150,500.
₹	8a	Gross income from fundraising					
		events (not including \$					
		of contributions reported on line	0.				
		1c). See Part IV, line 18 8a	0.				
	b	Less: direct expenses 8b		0.			
	С	Net income or (loss) from fundraising events		0.			
	9a	Gross income from gaming	0.				
		activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses		0			
	C	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less					
		returns and allowances	0.				
	b	Less: cost of goods sold Net income or (loss) from sales of inventory		0.			
<u></u>		The modifie of (1000) from sales of inventory.	Business Code	0.			
Miscellaneous Revenue			Dusiliess Code				
ne Jue	11a						
≝ Ver	b						
See	C	All other revenue					
Ξ	d	All other revenue		0.			
	<u>е</u> 12	Total. Add lines 11a-11d Total revenue. See instructions		562,411.			560,287.
	. 4	. J.a. i J.a. i J.a. J.a. i i J.a. i j. i		JUZ, TII.			000,207.

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 resp	onse or note to any lin	e 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	156,900.	156,900.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	37,139.	37,139.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	0.			
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	0.			
	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	0.			
9	Other employee benefits	0.			
10	Payroll taxes	0.			
	Fees for services (nonemployees):				
	Management	0.			
	Legal	0.			
	Accounting	8,620.		8,620.	
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17	0.			
	Investment management fees	24,100.		24,100.	
	Other. (If line 11g amount exceeds 10% of line 25, column				
9	· •	0.			
12	(A) amount, list line 11g expenses on Schedule O.). Advertising and promotion	217.		217.	
13	Office expenses	3,753.		3,753.	
14	Information technology	0.		,	
15	Royalties.	0.			
16	Occupancy	85.		85.	
		0.			
	Travel				
10	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
10	Conferences, conventions, and meetings	0.			
		0.			
	Interest	0.			
	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
	Insurance	0.			
24	Other expenses. Itemize expenses not covered				
	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.)				
	•				
	·		+		
	·		+		
d		1,080.	+	1,080.	
	All other expenses	231,894.	194,039.	37,855.	
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	231,094.	134,033.	31,033.	
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	_			
	TOHOWING SOF 30-2 (ASC 330-720)	0.			

Form 990 (2020) Page **11**

Part X Balance Sheet

		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	97,477.	1	116,912.
	2	Savings and temporary cash investments	0.	2	0.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	0.	4	0.
	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.
ţ	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	0.	9	0.
	_	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation	0.	10c	0.
	11	Investments - publicly traded securities	4,228,523.	11	5,433,679.
	12	Investments - other securities. See Part IV, line 11	0.	12	0.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	5,245.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	4,331,245.	16	5,550,591.
_	17	Accounts payable and accrued expenses	500.	17	72,879.
	18	Grants payable	0.	18	0.
	19	Deferred revenue.	0.	19	0.
	20	Tax-exempt bond liabilities.	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.
"	22	Loans and other payables to any current or former officer, director,	<u> </u>	21	<u> </u>
ţį	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0.	22	0.
Lia	22		0.	23	0.
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25		· ·	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			
		of Schedule D	473.	25	21.
	26	· · · · · · · · · · · · · · · · · · ·	973.		72,900.
	20	Total liabilities. Add lines 17 through 25	713.	26	72,500.
Fund Balances		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	4,307,532.	27	5,457,691.
Bal	28	Net assets with donor restrictions.	22,740.	28	20,000.
Б	20	Organizations that do not follow FASB ASC 958, check here ▶	22,710.	20	20,000.
Ŀ		and complete lines 29 through 33.			
Assets or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
ř.	32	Total net assets or fund balances	4,330,272.	32	5,477,691.
Net	33	Total liabilities and net assets/fund balances	4,331,245.	33	5,550,591.
	J J J	10141 11451111165 4114 1161 455615/14114 541411665,	1,331,413.	၂၁၁	Form 990 (2020)

Form 990 (2020) Page **12**

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Part	XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1			62,4			
2	Total expenses (must equal Part IX, column (A), line 25)	2			31,8			
3	Revenue less expenses. Subtract line 2 from line 1	3						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	272.					
5	Net unrealized gains (losses) on investments							
6	Donated services and use of facilities	6				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				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
	32, column (B))	10		5,4	77,6	91.		
Part	·							
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>			X		
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
If the organization changed its method of accounting from a prior year or checked "Other," explain in								
	Schedule 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 audit	ted o	na					
	separate basis, consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersigh	t of					
	the audit, review, or compilation of its financial statements and selection of an independent accounta	ınt?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on					
	Schedule O.							
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in	the			3.5		
	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							
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits .		3b				

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization AAPL EDUCATION FOUNDATION, INC. 23-7243157 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(y). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization. 1 Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (iv) Is the organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) instructions) document? instructions) ATTACHMENT 1 Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2020

115,900

Total

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

Par	(Complete only if you checked Part III. If the organization fail	d the box on	line 5, 7, or 8	of Part I or if t	he organization	on failed to qua	
Sec	tion A. Public Support	· · ·			•	•	
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5 6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4						
	tion B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	(a) 2010	(5) 2017	(6) 2010	(u) 2013	(6) 2020	(i) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2020 (li		_	e 11, column (f))	14	9,
15	Public support percentage from 2019						9,
16a	331/3% support test - 2020. If the or						check this
	box and stop here. The organization q						I
b	331/3% support test - 2019. If the org	ganization did r	not check a box	on line 13 or 16	Sa, and line 15	is 331/3 % or mo	ore, check
	this box and stop here. The organization	on qualifies as	a publicly suppo	rted organizatio	n		▶ ∟
17a	10%-facts-and-circumstances test - 2	2020. If the or	ganization did n	ot check a box	on line 13, 16	a, or 16b, and	line 14 is
	10% or more, and if the organization					-	-
	Part VI how the organization meets	the facts-and-	circumstances te	est. The organi	zation qualifies	as a publicly s	supported
	organization						▶ ∟
b	10%-facts-and-circumstances test - 2		•				
	15 is 10% or more, and if the organia					-	
	in Part VI how the organization meets			=	-	-	
40	organization						
18	Private foundation. If the organization instructions						

Schedule A (Form 990 or 990-EZ) 2020

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

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

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

Sec	tion A. Public Support			, р	p	,	
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees		,, -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,	(,, =, =,
-	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
Ū	unrelated trade or business under section 513						
4	Tax revenues levied for the						
7	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
3							
	furnished by a governmental unit to the						
e	organization without charge						
6	Total. Add lines 1 through 5						
/a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons Amounts included on lines 2 and 3						
J	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
C	line 6.)						
	tion B. Total Support	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(6) 2016	(a) 2019	(e) 2020	(I) Total
9	Amounts from line 6. Gross income from interest, dividends,						
iva	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)		-				
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		<u> </u>				
14	First 5 years. If the Form 990 is for	ŭ	•		•		` ` ` `
	organization, check this box and stop here						▶
	tion C. Computation of Public Supp			(4))		T .= 1	
15	Public support percentage for 2020 (line 8,					15	%
16	Public support percentage from 2019 Sche					16	%
	tion D. Computation of Investment						
17	Investment income percentage for 2020 (lin		•			17	%
18	Investment income percentage from 2019 S					18	%
19 a	331/3% support tests - 2020. If the or	-					
	17 is not more than 331/3%, check this	-	-	•			
b	331/3% support tests - 2019. If the orga						
	line 18 is not more than $331/3\%$, check		-	•		• •	. —
20	Private foundation If the organization of	lid not chack '	a hov on line 1	1 10a or 10h	chack this hav	and con inetru	ctions -

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
,			
	1	Х	
	2		X
	3a	Х	
,			
	3b	Х	
	2-		Х
	3с		
•	4a		Х
,			
	4b		
1			
	4-		
,	4c		
,			
	5a		Х
	5b		
	5с		
	6		Х
	7		X
			X
	8		
	9a		Х
	9b		X
	9с		X
	10a		X
,	1 Ja		
	10h		

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	C A (1 of the 250 of 250 E2) 2225			age C
Part	Supporting Organizations (continued)		V -	N 1.
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	44-		Х
h	11c below, the governing body of a supported organization?	11a		X
	A family member of a person described in line 11a above? A 35% controlled entity of a person described in line 11a or 11b above? If "Vee" to line 11a, 11b, or 11a, provide	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		Х
Secti	on B. Type I Supporting Organizations	110		
	on on the supportant of the supportant of the support of the suppo		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	X	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		X
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
2 o o ti	.,,	1		
secu	on D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	NO
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr		
2	Activities Test. Answer lines 2a and 2b below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2h		
_	-	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the experimental base the power to regularly experiment or elect a majority of the efficiency directors or			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Part V Type III Non-Fund	ctionally Integrated 509(a)(3) Supporting Orga	nizations	<u> </u>	. age 🗸
	nization satisfied the Integral Part Test as a qualifyin			in in Part VI). See
	Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Inco		(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain		1		
2 Recoveries of prior-year dis	stributions	2		
3 Other gross income (see in	structions)	3		
4 Add lines 1 through 3.		4		
5 Depreciation and depletion		5		
	ses paid or incurred for production or collection of ement, conservation, or maintenance of property ne (see instructions)	6		
7 Other expenses (see instru	·	7		
8 Adjusted Net Income (sub	tract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Ar	nount		(A) Prior Year	(B) Current Year (optional)
	e of all non-exempt-use assets (see ar or assets held for part of year):			
a Average monthly value of s	ecurities	1a		
b Average monthly cash bala	nces	1b		
c Fair market value of other r	on-exempt-use assets	1c		
d Total (add lines 1a, 1b, and	1c)	1d		
e Discount claimed for block	age or other factors (explain in detail in Part VI):	1e		
2 Acquisition indebtedness a	pplicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d		3		
4 Cash deemed held for exercise instructions).	mpt use. Enter 0.015 of line 3 (for greater amount,	4		
5 Net value of non-exempt-us	se assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.		6		
7 Recoveries of prior-year dis	stributions	7		
8 Minimum Asset Amount (a	add line 7 to line 6)	8		
Section C - Distributable Amo	unt			Current Year
1 Adjusted net income for pr	or year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.		2		
3 Minimum asset amount for	prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or lin	• • • • • • • • • • • • • • • • • • • •	4		
5 Income tax imposed in prio	r year	5		
6 Distributable Amount. Sub	tract line 5 from line 4, unless subject to			
emergency temporary redu		6		
7 Check here if the curre	ent year is the organization's first as a non-functional	lly integra	ted Type III supporting	g organization
(see instructions).		-		

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Part	Type III Non-Functionally integrated 509(a)(3)	Supporting Organizat	a ons (continuea)		
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organia	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	provide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7: \$				

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<u>с</u> 5

6

Applied to underdistributions of prior years
Applied to 2020 distributable amount

Part VI. See instructions.

Breakdown of line 7:

Excess from 2016 . . .

Excess from 2017 . . .

Excess from 2018 . . .

Excess from 2019 . . .

Excess from 2020 . . .

and 4c.

Remainder. Subtract lines 4a and 4b from line 4.

Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI.** See instructions.

Remaining underdistributions for 2020. Subtract lines 3h

and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2021. Add lines 3j

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

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

THE FOUNDATION OBTAINED THE SUPPORTED ORGANIZATION'S IRS

DETERMINATION LETTER AND REVIEWED THE SUPPORTED ORGANIZATION'S PRO

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

				ATTACHMENT :	1
SCHEDULE A, PART I - INFORMATION ABOUT	SUPPORTED (ORGANIZATIO	NS		
		(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) OTHER
(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	ORGANIZATION	YES NO	SUPPORT	SUPPORT AMOUNT
AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC	75-0975500	10	Х	115,900.	0.
TOTAL AMOUNT OF SUPPORT				115,900.	

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.

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

AAI	PL EDUCATION FOUNDATION, INC.	23-7243157
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fur	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for an	
_	conferring impermissible private benefit?	Yes No
Pa	Conservation Easements.	
1	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).	for historically increase at least and
		f a historically important land area f a certified historic structure
	Preservation of open space	r a certified historic structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in t	he form of a conservation
_	easement on the last day of the tax year.	Held at the End of the Tax Year
а		2a
b		2b
C		2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
_		2d
3	Number of conservation easements modified, transferred, released, extinguished, or termin	·
-	tax year ▶	g
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection	on, handling of
	violations, and enforcement of the conservation easements it holds?	-
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing c	
	>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cor	nservation easements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	n 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financia	I statements that describes the
D	organization's accounting for conservation easements.	Circilar Assats
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	Similar Assets.
	· · · · · · · · · · · · · · · · · · ·	atata a anti-a al balanca abantunal a
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education, or	or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes the	ese items.
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue sta	
	art, historical treasures, or other similar assets held for public exhibition, education, or research provide the following amounts relating to these items:	arch in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar as	
-	following amounts required to be reported under FASB ASC 958 relating to these items:	socio foi ilitariolal galli, provide tile
а	Revenue included on Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	> \$

Schedule D (Form 990) 2020

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Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical Tre	asures, or Other	Similar Assets (d		rage =
3	Using the organization's acquisition	on, accession, and c	ther records, check	any of the follow	ring that make sign	nificant use	of its
	collection items (check all that app	ly):					
а	Public exhibition		d Loan o	or exchange progra	m		
b	Scholarly research		e Other				
С	Preservation for future gene	rations					
4	Provide a description of the organ	nization's collections	and explain how t	hey further the or	ganization's exemp	t purpose ir	า Part
	XIII.						
5	During the year, did the organization	on solicit or receive d	lonations of art, histo	orical treasures, or	other similar		
	assets to be sold to raise funds rath	ner than to be mainta	ained as part of the o	organization's collec	ction?	Yes	No
Pa	rt IV Escrow and Custodial A	rrangements.			<u>, </u>		
	Complete if the organiza	ition answered "Ye	s" on Form 990, F	Part IV, line 9, or r	eported an amour	nt on Form	
	990, Part X, line 21.						
1a	Is the organization an agent, trus	tee, custodian or of	ther intermediary fo	or contributions or	other assets not		
	included on Form 990, Part X?				[Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	lete the following tab	ole:			
					Amount		
С	Beginning balance			1c			
d	Additions during the year			1d			
е	Distributions during the year			1e			
f	Ending balance			1f			
	Did the organization include an am					Yes	No
b	If "Yes," explain the arrangement is	n Part XIII. Check he	ere if the explanation	has been provided	on Part XIII		
Pa	rt V Endowment Funds.						
	Complete if the organiza	tion answered "Ye	s" on Form 990, F				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1a	Beginning of year balance	20,000.	20,000.	20,000.	26,000.	26	,000
b	Contributions	818.	234.				
C	Net investment earnings, gains,						
	and losses	-818.	-234.	718.			86
d	Grants or scholarships						
e	Other expenditures for facilities						
	and programs			718.	6,000.		86
f	Administrative expenses						
g	End of year balance	20,000.	20,000.	20,000.	20,000.	26	,000
2	Provide the estimated percentage	of the current year	end balance (line 1g.	column (a)) held as	:		
а	Board designated or quasi-endown		_%	(//			
b	Permanent endowment ▶ 100.0	0000 %					
С	Term endowment ▶	%					
	The percentages on lines 2a, 2b, a	and 2c should equal 1	00%.				
3a	Are there endowment funds not in	the possession of th	e organization that	are held and admir	nistered for the		
	organization by:					Yes	No
	(i) Unrelated organizations					3a(i)	X
	(ii) Related organizations					3a(ii)	X
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	d as required on Sch	edule R?		3b	
4	Describe in Part XIII the intended u		tion's endowment fur	nds.			
Pa	rt VI Land, Buildings, and Equ Complete if the organize	lipment.	os" on Form 000 I	Dart IV line 11a 9	Soo Form 000 Pa	rt V lino 1	0
	Description of property	(a) Cost or) Book value	J
	2 00011110111 01 1110111111		ment) (o		eciation) Book value	
1a	Land						
b	Buildings						
С	Leasehold improvements						
d	Equipment						
	Other						
	I. Add lines 1a through 1e. (Column		n 990, Part X, columi	n (B), line 10c.)	•		

Schedule D (Form 990) 2020

23-7243157 Page **3**

	Investments - Other Securities.			40
	, , , , , , , , , , , , , , , , , , , ,), 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) Financi	al derivatives	•		
(2) Closely	held equity interests	•		
(A)				
(B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
. ,	n (b) must equal Form 990, Part X, col. (B) line 12.)	•		
Part VIII	Investments - Program Related.			
r art viii	Complete if the organization answe	red "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	
(4)			3331 of Ghu-of-year market value	
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(9) Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)	>		
	Other Assets.	<u> </u>		
Total. (Colum	Other Assets. Complete if the organization answe	red "Yes" on Form 990), Part IV, line 11d. See Form 990, Part X, line	
Total. (Colum.	Other Assets. Complete if the organization answe	<u> </u>), Part IV, line 11d. See Form 990, Part X, line	
Part IX (1)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
Part IX (1) (2)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
Part IX (1) (2) (3)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
Part IX (1) (2) (3) (4)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
(1) (2) (3) (4) (5)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
(1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
(1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answe	red "Yes" on Form 990		
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answe (a)	red "Yes" on Form 990 Description	(b) Book v	
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answe	red "Yes" on Form 990 Description	(b) Book v	
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answe (a) umn (b) must equal Form 990, Part X, col. (Other Liabilities.	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	ralue
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25.	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answe (a) umn (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Des	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25.	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X) 1. (1) Feder (2) DUE	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X) 1. (1) Feder (2) DUE	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X 1. (1) Feder (2) DUE (3) (4)	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Coli Part X 1. (1) Feder (2) DUE (3) (4) (5)	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X 1. (1) Feder (2) DUE (3) (4) (5) (6)	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.)	(b) Book v	X,
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Color Part X 1. (1) Feder (2) DUE (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answe (a) (a) (b) must equal Form 990, Part X, col. (Other Liabilities. Complete if the organization answe line 25. (a) Desertal income taxes	red "Yes" on Form 990 Description B) line 15.) red "Yes" on Form 990 cription of liability	(b) Book v	X,

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

JSA
0E1270 1.000
2693NU A87C 5/16/2022 9:11:39 AM V 20-7.21 1178930 PAGE 26

Page 4 Schedule D (Form 990) 2020

	C D (1 01111 000) 2020		r age -r
Part	XI 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	1,355,213.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	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.)		816,902.
е	Add lines 2a through 2d	2e 3	538,311.
3 4	Subtract line 2e from line 1	3	
4 a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 24,100.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	24,100.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	562,411.
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	207,794.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	-	
a	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	007 704
3	Subtract line 2e from line 1	3	207,794.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. 4a 24,100.		
a	investment expenses not included on Form 990, Fart VIII, line 75.	-	
b	Other (Describe in Lat Ain.)	4c	24,100.
С 5	Add lines 4a and 4b	5	231,894.
	XIII Supplemental Information.		
Provid	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	Part V,	line 4; Part X, line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the complete this part to provide any additional information.	nation.	
SEE	PAGE 5		

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

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

PART X, LINE 2

ASC 740 FOOTNOTE:

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

SCHEDULE I (Form 990)

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

2020

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identificat	ion number
AAPL EDUCATION FOUNDATION, INC.						23-724315	57
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					X Yes N
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	additional space is n		es" on Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) IPAA EDUCATIONAL FOUNDATION							STEM CAREER
1201 15TH STREET N.W., SUITE 300	54-1849282	501(C)3	25,000.				PROGRAM
(2) OKLAHOMA CITY ASSOC OF PROF LANDMEN							EDUCATION ABOUT
P.O. BOX 18714 OKLAHOMA CITY, OK 73154	73-1099493	501(C)6	10,000.				INDUSTRY
(3) AMERICAN ASSOCIATION OF PROFESSIONAL LANDME							EDUCATION ABOUT
800 FOURNIER STREET FORT WORTH, TX 76102	75-0975500	501(C)6	115,900.				INDUSTRY
(4)	-						
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			1.
3 Enter total number of other organizations list	-	_					2.

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

Schedule I (Form 990) 2020

AAPL EDUCATION FOUNDATION, INC. 23-7243157

Schedule I (Form 990) (2020)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 disaster relief grant	7.	37,139.			
2					
3					
4					
5					
6					
7					

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

SCHEDULE I, PART I, LINE 2

THE FOUNDATION'S OPERATING COMMITTEES REVIEW THE GRANT REQUEST

APPLICATION AND APPROVE THE REQUESTS. THE APPROVAL IS DOCUMENTED IN THE

MEETING MINUTES. DUE TO THE CLOSE RELATIONSHIP THE FOUNDATION HAS WITH

SOME OF THE RECIPIENTS, IT IS UNNECESSARY TO MONITOR THE USE OF FUNDS.

FOR UNRELATED RECIPIENTS, THE FOUNDATION SOMETIMES REQUESTS RECEIPTS FOR

COSTS BEFORE PAYMENT IS MADE TO ENSURE THE FUNDS ARE BEING USED FOR THE

DIRECTED PURPOSE.

Schedule I (Form 990) (2020)

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 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AAPL EDUCATION FOUNDATION, INC.

23-7243157

Employer identification number

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations 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			
7	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
•	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the net earnings of:			Х
a	The organization?	6a		X
b	Any related organization?	6b		21
7				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
•	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	-		
-	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2020

AAPL EDUCATION FOUNDATION, INC. 23-7243157

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)	0.	0.	0.	0.	0.	0.	
1 AAPL EXECUTIVE VICE PRESIDENT	(ii)	251,052.	38,917.	0.	27,324.	24,726.	342,019.	
AMANDA JOHNSON	(i)	0.	0.	0.	0.	0.	0.	
2 AAPL CHIEF ACCOUNTING OFFICER	(ii)	115,468.	17,783.	13,811.	16,575.	3,918.	167,555.	
STACEY GARVIN (PARTIAL	(i)	0.	0.	0.	0.	0.	0.	
3DIRECTOR OF EDUCATION AND MEMB	(ii)	235,094.	25,520.	0.	32,532.	26,273.	319,419.	
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

AAPL EDUCATION FOUNDATION, INC. 23-7243157

Schedule J (Form 990) 2020 Page 3

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 3

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

COMPENSATION OF THE EXECUTIVE DIRECTOR; FINANCE COMMITTEE, FORM 990 OF

OTHER ORGANIZATIONS, WRITTEN EMPLOYMENT CONTRACT, COMPENSATION SURVEY OR

STUDY AND APPROVAL BY THE FINANCE COMMITTEE, EXECUTIVE COMMITTEE, AND

BOARD OF DIRECTORS.

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 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

Omage

Om

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.

Name of the organization

23-7243157

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

POWER TO APPOINT GOVERNING BODY:

AAPL EDUCATION FOUNDATION, INC.

THE BOARD OF DIRECTORS SHALL CONSIST OF EIGHT (8) DIRECTORS, NONE OF WHOM NEED TO BE RESIDENTS OF THE STATE OF TEXAS. ALL PERSONS SERVING AS DIRECTORS SHALL BE CERTIFIED PROFESSIONAL LANDMEN OR REGISTERED PROFESSIONAL LANDMEN AND SHALL BE MEMBERS IN GOOD STANDING OF AAPL. SIX (6) OF THE DIRECTORS SHALL BE ELECTED BY THE BOARD OF DIRECTORS OF AAPL AND SHALL SERVE THREE (3) YEAR TERMS BEGINNING ON JULY 1 AND ENDING ON JUNE 30, AND ONE DIRECTOR SHALL BE THE THIRD VICE PRESIDENT OF AAPL AND ONE DIRECTOR SHALL BE THE TREASURER OF THE AAPL WHOSE TERM SHALL BE ONE YEAR BEGINNING ON JULY 1 AND ENDING ON JUNE 30 EACH YEAR. A MAJORITY OF THE DIRECTORS SHALL BE CERTIFIED PROFESSIONAL LANDMEN.

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

REVIEW PROCESS:

A COPY OF FORM 990 WAS PROVIDED TO THE BOARD OF DIRECTORS OF AAPL EDUCATION FOUNDATION, INC. FOR REVIEW PRIOR TO SUBMITTING TO THE IRS.

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

COMPENSATION REVIEW AND APPROVAL PROCESS:

THE FOUNDATION UTILIZES EMPLOYEES OF THEIR SUPPORTED ORGANIZATION,

AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC. PERFORMANCE AND PAY

FOR THE EXECUTIVE DIRECTOR IS REVIEWED AND APPROVED ANNUALLY BY THE AAPL

FINANCE COMMITTEE, EXECUTIVE COMMITTEE, AND BOARD OF DIRECTORS. NO

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

Name of the organization

AAPL EDUCATION FOUNDATION, INC.

Employer identification number
23-7243157

COMPENSATION IS PAID BY THE FOUNDATION.

FORM 990, PART VI, SECTION C, LINE 19

AVAILABILITY OF DOCUMENTS:

AAPL EDUCATIONAL FOUNDATION, INC. WILL PROVIDE ITS FINANCIAL INFORMATION
TO THE PUBLIC UPON REQUEST. THE BY-LAWS ARE PUBLISHED ANNUALLY IN THE
LANDMAN DIRECTORY, WHICH IS DISTRIBUTED TO THE MEMBERSHIP OF THE AMERICAN
ASSOCIATION OF PROFESSIONAL LANDMEN, INC. THE FINANCIAL REPORTS ARE
PUBLISHED ANNUALLY IN THE ANNUAL REPORT, WHICH IS ALSO SENT TO THE
MEMBERSHIP OF THE AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC. THE
FORM 990 IS AVAILABLE ONLINE AT WWW.GUIDESTAR.ORG.

FORM 990, PART XII, LINE 2C

THE FOUNDATION'S FINANCIAL STATEMENTS ARE INCLUDED IN THE CONSOLIDATED INDEPENDENT AUDIT REPORT WITH THEIR SUPPORTED ORGANIZATION, AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC. OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT ARE PERFORMED BY AMERICAN ASSOCIATION OF PROFESSIONAL LANDMEN, INC. THIS PROCESS REMAINS UNCHANGED FROM PRIOR YEAR.

ATTACHMENT 1

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

THE EDUCATIONAL FOUNDATION WAS FORMED FOR THE PURPOSE OF

- 1. PROMOTING EDUCATION, INSTRUCTION AND TRAINING FOR MEMBERS TO IMPROVE OR DEVELOP THEIR CAPABILITIES,
- 2. INSTRUCT THE PUBLIC ON SUBJECTS USEFUL TO INDIVIDUALS AND BENEFICIAL TO THE COMMUNITY,
- 3. FURTHER THE ADVANCEMENT OF EDUCATION AND

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

Name of the organization Employer identification number AAPL EDUCATION FOUNDATION, INC. 23-7243157 ATTACHMENT 1 (CONT'D)

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

4. SUPPORT OTHER CHARITABLE PURPOSES, SUCH AS NATURAL DISASTER RELIEF FOR MEMBERS.

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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.

► 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

AAPL EDUCATION FOUNDATION, INC.

Employer identification number 23-7243157

raiti	identification of Distegatued Littles. Complete if the organization	alisweled les oil	TOITH 990, Fait I	v, iii ie 55.		
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	(a) (512(b)(13) (rolled (ity?
						Yes	No
(1) AMERICAN ASSOCIATION OF PROFESSIONA 75-0975500							
800 FOURNIER ST. FORT WORTH, TX 76102	LAND PROFS	TX	501(C)(6)		N/A		X
(2) LANDMAN SCHOLARSHIP TRUST 23-7122144							
800 FOURNIER ST. FORT WORTH, TX 76102	SCHOLARSHIPS	TX	501(C)(3)	12A	AAPL	Х	
(3) NAPE EXPO CHARITIES FUND 81-3695208							
800 FOURNIER STREET FORT WORTH, TX 76102	GRANTS	TX	501(C)(3)	10	AAPL	X	
(4)							
(5)							
(6)							
(7)							
							İ

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

Schedule R (Form 990) 2020

JSA

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,	
ai t iii	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	ct controlling Predominant		(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		,		,			Yes	No		Yes	No	
(1) NAPE EXPO, LP 20-4920808												
800 FOURNIER STREET FORT WORTH	TRADE SHOW	TX	N/A	N/A								
_(2)	_											
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total	(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 (Form 990) 2020

Scriedule K (F	0111 990) 2020	гауе
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
1	During the tax year, did the organization engage in any of the following transactions with one or more re-	elated organizations lis	ted in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
b	Gift, grant, or capital contribution to related organization(s)					Х	
	Gift, grant, or capital contribution from related organization(s)						X
	Loans or loan guarantees to or for related organization(s)						X
е	Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(s)				1f		X
g	Sale of assets to related organization(s)				1g		X
	Purchase of assets from related organization(s)						X
i	Exchange of assets with related organization(s)				1i		X
i	Lease of facilities, equipment, or other assets to related organization(s)						X
•					_		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
ı	Performance of services or membership or fundraising solicitations for related organization(s)						Х
m	Performance of services or membership or fundraising solicitations by related organization(s)						X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					Х	
	Sharing of paid employees with related organization(s)						
Ü	onaining of paid employees with related organization(s)						
n	Reimbursement paid to related organization(s) for expenses				1p	Х	
	Reimbursement paid by related organization(s) for expenses						X
ч	Trembursement paid by related organization(s) for expenses 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.				- 4		
	Other transfer of cash or property to related organization(s)				1r		Х
S	Other transfer of cash or property from related organization(s)						X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete thi	is line, including cove	red relationships and transa	action thre	eshold	s.	
	(a)	(b)	(c)		(d)		
	Name of related organization	Transaction	Amount involved	Method	of det		ng
		type (a-s)		amo	unt inv	oived	
(1)	AMERICAN ASSOCIATION OF PROF LANDMEN	В	115,900.	FMV			
` '			·				

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AMERICAN ASSOCIATION OF PROF LANDMEN	В	115,900.	FMV
(2)			
(3)			
_(4)			
(5)			
(6)			

Schedule R (Form 990) 2020

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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Ulganiz	e) partners ction (c)(3) zations?	(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)		ner?	ownership	
(4)			sections 512 - 514)	Yes	No			Yes	No		Yes	No		
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Schedule R (Form 990) 2020

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 f	form, visit www.irs.gov/e-file-providers/e-file-f	for-charities	a-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 f		, -	0-C filers), partnerships	, RE	MICs,	and trusts	
Гуре or	Name of exempt organization or other filer, see in	structions.	Taxpayer identification number (TIN))			
orint	AAPL EDUCATIONAL FOUNDATION,	INC.	23-7243157					
File by the due date for iling your eturn. See nstructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 800 FOURNIER ST.							
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FORT WORTH, TX 76102							
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	ls For				Code	
	Form 990-EZ	01	Form 990-T (corporation)			07		
orm 990-BL		02	Form 1041-A			08		
orm 4720 (,	03	Form 4720 (other than individual)			09		
Form 990-PF		04	Form 5227			10		
	(sec. 401(a) or 408(a) trust)	05 06	Form 6069			11		
Form 990-T (trust other than above) AMANDA JOHNSON			Form 8870			12		
Telephone If the orga If this is foor the whole Is with the	e No. ► 817 847-7700 anization does not have an office or place of or a Group Return, enter the organization's for e group, check this box e names and TINs of all members the extens	business ir ur digit Gro f it is for pa ion is for.	Fax No. n the United States, checoup Exemption Number (art of the group, check the process of the process of the group, check the group, check the process of the group, check the process of the group, check the group the group, check the group the	GEN)his box ▶		If and a	this is	
1 I request an automatic 6-month extension of time until $05/16$, 2022 , to file the exempt organization return								
for the organization named above. The extension is for the organization's return for: Calendar year 20								
	application is for Forms 990-BL, 990-PF, 9	90-T, 4720	0, or 6069, enter the	tentative tax, less any				
	nonrefundable credits. See instructions.						0.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and								
estimat	ated tax payments made. Include any prior year overpayment allowed as a credit.					\$	0.	
	ce due. Subtract line 3b from line 3a. Include your payment with this form, if required, 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	l (direct deb	it) with this Form 8868, se	ee Form 8453-EO and Forr	n 88	79-EO	for payment	
nstructions.	-	•	•					
For Privacy Act and Paperwork Reduction Act Notice, see instructions.						Form 8868 (Rev. 1-2020)		