

TAX RETURN FILING INSTRUCTIONS

PUBLIC INSPECTION COPY

Prepared by	Grant Thornton LLP
Special Instructions	The return should be signed and dated by the appropriate officer(s). Exempt organizations are required to provide copies of their returns for a period of three years from the filing date for public inspection upon request. On the Form 990 the names of any contributors should not be disclosed, so we have deleted them. Charities must also provide copies of: 1) Forms 990-T filed after August 17, 2006. 2) Forms 4720 filed by the organization. Form 990-PF contributors must be disclosed.
Application for Recognition of Exemption	Exempt Organizations are also required to provide a copy of the Application for Recognition of Exemption (Form 1023 or 1024) including all documents and statements submitted in support of such application and any letter or other document issued by the Internal Revenue Service with respect to such application. An organization that submitted its Form 1023 or 1024 on or before July 15, 1987 must make this form available for public inspection only if they had a copy of the Application on July 15, 1987.
Requests made in person	If the request is made in person, the organization must respond by the end of the business day.
Requests made in writing	If the request is made in writing, response is generally required within 30 days.
Fees charged for copies	The organization can make a reasonable charge for copying and postage. The regulations limit the copying charge to that charged by the IRS for providing copies, currently \$1.00 for the first page and \$0.15 for each additional page.
What if we post the Form 990 on our website?	The requirement to provide copies can be eliminated if the organization posts the relevant documents on its website. The public must be able to download the documents and print them in the exact form they were filed with the IRS (except for disclosing contributors). The download must be free and use software that is available without charge. Even if the documents are posted on the web, the organization must still have a copy available for inspection at its offices.
What if we fail to comply with requests?	Please be aware that significant monetary penalties may be imposed by the IRS on an organization for failure to follow the above provisions.

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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



ΑF	or th	e 2022 calendar year, or tax year beginning and o	ending		
B c	heck if pplicab	E Name of organization		D Employer identif	ication number
	Addre	ss THE AOPA FOUNDATION, INC.			
	Name			20-8817225	
	Initial		Room/suite	E Telephone numbe	er
	 Final return	A21 AVIATION WAY		(301) 695-20	
	termin	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	34,127,588.
	Amen	ded EDEDEDTCK ND 21701		H(a) Is this a group r	eturn
	Applic	F Name and address of principal officer: MARK BAKER, CEO/PRESIDENT		for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates i	
11	ax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o	or 527	If "No," attach a	a list. See instructions
	Vebsi			H(c) Group exemption	on number
ΚF	orm o	f organization: X Corporation Trust Association Other	L Year of		M State of legal domicile: MD
Pa	art I	Summary			
•	1	Briefly describe the organization's mission or most significant activities: SEE SCH	HEDULE O		
nce					
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)			12
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			11
8 8	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			33
viti	6	Total number of volunteers (estimate if necessary)			0
\ct i	7a	Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
_	b	et unrelated business taxable income from Form 990-T, Part I, line 11			
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		11,064,996.	11,516,655.
Revenue	9	Program service revenue (Part VIII, line 2g)		11,951.	238,435.
se v		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,162,120.	1,457,290.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		50,000.	52,952.
	12			13,289,067.	13,265,332.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,207,158.	2,647,922.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,616,290.	3,599,261.
sus		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 591, 9			
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,090,134.	3,800,672.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,913,582. 4,375,485.	10,047,855.
	19	Revenue less expenses. Subtract line 18 from line 12			3,217,477.
S OF			Bei	ginning of Current Year	End of Year
sset Salai	20	Total assets (Part X, line 16)		50,016,255.	45,859,308.
Net Assets	21	Total liabilities (Part X, line 26)		1,768,922.	1,760,781.
Ž	22	Net assets or fund balances. Subtract line 21 from line 20		48,247,333.	44,098,527.

Part II Signature Block

Т

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of off	icer			Date			
Here	ERICA SACCO	IA, SVP FINANCE & ACCOUNTI	NG					
	Type or print name and title							
	Print/Type prepa	arer's name	Preparer's signature	Date	Check	PTIN		
Paid	MARY TORRETTA				ir self-employed	P00847851		
Preparer	arer Firm's name GRANT THORNTON LLP			Firm's EIN 36-	-6055558			
Use Only	Firm's address 1000 WILSON BOULEVARD, SUITE 1500							
ARLINGTON, VA 22209					Phone no. (703)	847 - 7500		
May the I	May the IRS discuss this return with the preparer shown above? See instructions							
232001 12-1	2001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)							

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		-			'es 🔟 No
HEDULE O	any significant prog	gram services during the year	which were not listed on the		
HEDULE O					
HEDULE O					
escribe the organization	on's mission:				
neck if Schedule O cont	ntains a response or i	note to any line in this Part III			X
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Form 990 (2022) THE AOPA FOUNDATION Part IV Checklist of Required Schedules THE AOPA FOUNDATION, INC. 20-8817225 Page 3

			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	х	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	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			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	
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Form **990** (2022)

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THE AOPA FOUNDATION, INC.

Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
		23	x	
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
2 4a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	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 line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•••	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
0,	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 on Schedule O for Part VI, lines 11b and 19?	-07		
50		38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	30		<u>I</u>
	Check it Schedule O contains a response or note to any line in this Part V		Yes	No
19	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 262		100	110
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	х	
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202002	4	1 0111		(-022)

		(2022) THE AOPA FOUNDATION, INC.	20-881722	5	P	Page 5
Par	τν	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
					Yes	No
2a		r 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 33			
b	If at	least one is reported on line 2a, did the organization file all required federal employment tax return	าร?	2b	X	
3a				3a	<u> </u>	X
b		es," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	X	
4a		ny time during the calendar year, did the organization have an interest in, or a signature or other a			ĺ	
	finan	ncial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a	X	
b	lf "Ye	es," enter the name of the foreign countryCAYMAN_ISLANDS, BERMUDA				
	See	instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).			
5a	Was	the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did a	any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac	tion?	5b		X
С	lf "Ye	es" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does	s the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
	any o	contributions that were not tax deductible as charitable contributions?		6a		X
b	lf "Ye	es," did the organization include with every solicitation an express statement that such contribution	ons or gifts			
	were	e not tax deductible?		6b		
7	Orga	anizations that may receive deductible contributions under section 170(c).				
а	Did tl	he organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	vices provided to the payor?	7a	х	
b				7b	х	
с	Did t	the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa				
	to file	e Form 8282?	·	7c	х	
d		es," indicate the number of Forms 8282 filed during the year	7d 1			
е		the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		x
f		the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		х
g		e organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h		e organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizat		7h	х	
8		nsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
				8		
9	-	nsoring organizations maintaining donor advised funds.				
а	-			9a		
b				9b		
10		tion 501(c)(7) organizations. Enter:				
a		ation fees and capital contributions included on Part VIII, line 12	10a			
b		ss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11		tion 501(c)(12) organizations. Enter:		1		
		ss income from members or shareholders	11a			
b		ss income from other sources. (Do not net amounts due or paid to other sources against		1		
D		unts due or received from them.)	11b			
12a		tion 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
		es," enter the amount of tax-exempt interest received or accrued during the year	12b	120		
13		tion 501(c)(29) qualified nonprofit health insurance issuers.	12.5	1		
а		e organization licensed to issue qualified health plans in more than one state?		13a		
a		e: See the instructions for additional information the organization must report on Schedule O.		154		
h		or the amount of reserves the organization is required to maintain by the states in which the				
b		nization is licensed to issue qualified health plans	13b			
•			13c	1		
		er the amount of reserves on hand		140		x
14a			- 0	14a 14b		<u> </u>
		es," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		<u> </u>
15		e organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		45	ĺ	x
		ess parachute payment(s) during the year?		15		
10		es," see the instructions and file Form 4720, Schedule N.	incomo	40		x
16		e organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		
47		es," complete Form 4720, Schedule O.				
17		tion 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act		4-	ĺ	
		would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
		es," complete Form 6069.		Г	000	(00000
232005	12-13	-22		FOLU	1 990	(2022)

	990 (2022) THE AOPA FOUNDATION, INC. 20-88172			age 6
a	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for	a "No" i	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
ec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a1	.2		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	.1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
Da	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
3	Did the organization have a written whistleblower policy?	13	Х	
4	Did the organization have a written document retention and destruction policy?	14	Х	
5	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
ec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filedSEE_SCHEDULE_O			
B	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	3)s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	nd finan	cial	
	statements available to the public during the tax year.			
0	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ERICA SACCOIA, SVP FINANCE & ACCOUNTING - 301-695-2000			
	421 AVIATION WAY, FREDERICK, MD 21701			
2006	3 12-13-22	Form	990	(202
1	6 14 153424 0152431-00004 2022.05000 THE AOPA FOUNDATION,	INC	01	5
4	= 10012 + 0102 + 00000 + 00000 + 00000 + 0000 + 0000 + 0000 + 0000 + 0000 + 0000 + 0	TTAC .	U T	22

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compen	sated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		X
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
de Comula	ata the table for all parageness and include to be listed. Depart componenties for the color department and include		

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

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one				ane	Reportable	Reportable	Estimated	
	hours per	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of				
	week		cer an	id a d	irecto	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		96	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	organizations below	ual tr	tional		voldr	vee vee	_	1099-INEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MARK R. BAKER	10.00									
PRESIDENT/CEO	40.00	Х		х				0.	1,687,681.	194,540.
(2) JUSTINE A. HARRISON	10.00									
SVP - GENERAL COUNSEL	40.00			х				0.	465,985.	41,182.
(3) GREGORY L. COHEN	10.00									
CHIEF ADMINISTRATIVE OFFICER	40.00			Х				0.	370,237.	45,066.
(4) ERICA J. SACCOIA	10.00									
SVP - FINANCE & ACCOUNTING	40.00			Х				٥.	322,835.	33,479.
(5) ELIZABETH A. TENNYSON	40.00									
SVP - AOPA FOUNDATION, INC	0.00					X		301,633.	0.	26,243.
(6) DAN JUSTMAN	40.00									
VP - YOU CAN FLY	0.00					x		166,851.	0.	31,925.
(7) PETER BOWERS	40.00									
AMBASSADOR	0.00					x		131,928.	0.	25,364.
(8) KAY SUNDARAM	40.00									
AMBASSADOR	0.00					X		124,283.	0.	20,051.
(9) JAMES F. BECKETT	40.00									
AMBASSADOR	0.00					x		129,871.	0.	12,110.
(10) WILLIAM C. TRIMBLE III	1.00									
CHAIRMAN	1.00	Х		Х				0.	0.	0.
(11) DARRELL W. CRATE	1.00									
VICE CHAIRMAN	1.00	Х		Х				0.	0.	0.
(12) JAMES N. HAUSLEIN	1.00									
TREASURER	1.00	Х		Х				0.	0.	0.
(13) LAWRENCE D. BUHL III	1.00									
TRUSTEE	1.00	Х						0.	0.	0.
(14) MATTHEW J. DESCH	1.00									
TRUSTEE	1.00	Х						0.	0.	0.
(15) AMANDA C. FARNSWORTH	1.00									
TRUSTEE	1.00	Х						0.	0.	0.
(16) WILLIAM B. L. HUDSON	1.00									
TRUSTEE	1.00	Х						0.	0.	0.
(17) MICHAEL POZNANSKY	1.00									
TRUSTEE	1.00	Х						0.	0.	0.
232007 12-13-22										Form 990 (2022)

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Form 990 (2022)

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Form 990 (2022) THE AOPA FOUN	,								20-88	1722	5	Р	age 8
Part VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	t C		s (continued)				
(A) Name and title	hours per week officer ar				(C) Position check more than one ess person is both an and a director/trustee)			(D) Reportable compensation from	(E) Reportable compensatio from related	n	an	(F) timate nount other	of
	(list any hours for related organizations below line)	In dividual trustee or director	Institutional trustee	Officer	ƙey em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	SC/	fr org and	pensa om th anizat d relat anizati	ie tion ted
(18) STEPHEN ELOP	1.00				-								
TRUSTEE (19) JAMES G. TUTHILL, JR	1.00	Х						0.		0.			0.
TRUSTEE	1.00	х						0.		٥.			0.
(20) LUKE R. WIPPLER	1.00							_		_			
TRUSTEE	1.00	X						0.		0.			0.
1b Subtotal								854,566.	2,846,	738.		429,	960.
c Total from continuation sheets to Part VII <u>d Total (add lines 1b and 1c)</u>								0. 854,566.	2,846,	0. 738		429	0.
2 Total number of individuals (including but no												,	
compensation from the organization												Yes	7 No
3 Did the organization list any former officer,	-			•	•		Ŭ	• •					
line 1a? If "Yes," complete Schedule J for stFor any individual listed on line 1a, is the su											3		X
and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	dule	J f	or such individual			4	Х	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes." com											5		x
Section B. Independent Contractors			51 51		20/3						•		1
1 Complete this table for your five highest cor the organization. Report compensation for t	•	•							•	pensat	ion fro	m	
(A) Name and business								(B) Description of s		С	(C ompei		'n
HBP, INC.	01 5 4 0												
952 FREDERICK STREET, HAGERSTOWN, MD CAMBRIDGE ASSOCIATES, INC.	21/40							PRINT/MAIL SERVICE				203,	693.
125 HIGH STREET, BOSTON, MA 02110-211	.2						_	INVESTMENT MANAGER			111,819.		
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	niteo	d to t		ie list 2	ed	above) who received mo	ore than			000	

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Form **990** (2022)

n 990 (20 rt VIII		ven	ue					5 Pag
	Check if Schedule O	conta	ains a respor	<u>ise or note to ar</u>	y line in this Part VIII			[
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclu from tax und sections 512 -
1 a F	Federated campaigns		1a					
	Membership dues							
сF	Fundraising events							
d F	Related organizations							
e (Government grants (contr							
f /	All other contributions, gifts,	grant	s, and					
S	similar amounts not included	abov	e 1f	11,516,6	55.			
g ⊧	Noncash contributions included in	lines 1	a-1f 1g \$	427,2				
h 1	Total. Add lines 1a-1f		<u></u>			·		
				Business C				
2 a -	REGISTRATION REVENU	Е		900099	238,435	238,435.		
b _								
с _								
e •	All other pregram convice	r01/0	2110					
• •	All other program service Total. Add lines 2a-2f				238,435			
	Investment income (includ							
	other similar amounts)			465,413			465,4	
	Income from investment of			···· ,			,	
	Royalties		•	•				
	,		(i) Real	(ii) Persor				
6 a (Gross rents	6a						
	Less: rental expenses	6b						
сF	Rental income or (loss)	6c						
1 b	Net rental income or (loss) <u></u>						
7a (Gross amount from sales of		(i) Securiti	. ,	r			
a	assets other than inventory	7a	21,854,13	33.				
	Less: cost or other basis							
	and sales expenses		20,862,2		_			
	Gain or (loss)	7c			991,877	,		991,8
	Net gain or (loss)				551,011	•		, J J J J J J J J J J J J J J J J J J J
	Gross income from fundraisi including \$							
	contributions reported on							
	Part IV, line 18		,	8a				
	Less: direct expenses			8b				
	Net income or (loss) from							
	Gross income from gamin		-					
F	Part IV, line 19			9a				
	Less: direct expenses			9b				
C I	Net income or (loss) from	gami	ng activities					
	Gross sales of inventory, I							
	and allowances10aLess: cost of goods sold10b				_			
				•				
C	Net income or (loss) from	sales	s of inventory					
				Business C 900099		50.000		
11 a <u>-</u>	SHARED COST ALLOCAT MISCELLANEOUS REVEN			900099	50,000	· · · · ·	+	2,9
<u>1</u> a	TICCHIMMEOUS KEVEN	10			2,932	·•		<u> </u>
ט - א								
u /					52 952			
							0	1,460,2
е	Total. Add Total revenu	lines 11a-11d	lines 11a-11d	lines 11a-11d	venue lines 11a-11d e. See instructions	lines 11a-11d	lines 11a-11d	lines 11a-11d

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9 2022.05000 THE AOPA FOUNDATION, INC. 01524311

THE AOPA FOUNDATION. TNC

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

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Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) (A) Do not include amounts reported on lines 6b. Total expenses Management and general expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations 1 1,500,000 1,500,000 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 1,147,922. 1,147,922. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,815,205. 2,573,310. 63,860. 178,035. Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 214,217 195,811. 4,859 13,547. 9,874 9,043 831. 9 Other employee benefits 559,965. 502,510 21,151 36,304. 10 Payroll taxes 11 Fees for services (nonemployees): Management а b Legal 44,394. 44,394 С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е 195,555. 195,555 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 281,936 276,896 1,120 3,920. column (A), amount, list line 11g expenses on Sch 0.) 115,106 82,650, 32,456. Advertising and promotion 12 39,427. 8,207 7,913. 55,547. 13 Office expenses _____ 29,174 25,334. 3,840. 14 Information technology 15 Royalties 16 Occupancy 272,475, 243,702, 5,743 23,030. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 337,891. 320,550. 17,341. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 22,965 22,965, 22 Depreciation, depletion, and amortization 8,500. 6,800. 1,700. 23 Insurance 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 0.) SHARED COSTS & OVERHEAD 1,926,484. 1,458,837. 331,523 136,124. а PRINT, MAIL AND POSTAGE 416,472 305,190 2,220 109,062. b RENTALS REPAIRS & MAIN 55,544. 50,097. 5,447. С BAD DEBT 21,842. 21,842. d 16,787 15,959 267 561. All other expenses е 678,899 10,047,855 8,777,003 591,953. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here X if following SOP 98-2 (ASC 958-720) 2,246,601 1,654,648 0 591,953.

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2022.05000 THE AOPA FOUNDATION, INC. 01524311

Form 990 (2022)

THE AOPA FOUNDATION, INC.

		Check if Schedule O contains a response or	note to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			6,765,982.	1	4,604,208.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			941,340.	3	2,572,717
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ubstantial c	ontributor, or 35%			
		controlled entity or family member of any of	these perso	ons		5	
	6	Loans and other receivables from other disqu	ualified per	sons (as defined			
		under section 4958(f)(1)), and persons descri	ibed in sect	tion 4958(c)(3)(B)		6	
2	7	Notes and loans receivable, net				7	
Assels	8	Inventories for sale or use				8	
ž	9	Prepaid expenses and deferred charges			427,140.	9	447,859
	10a	Land, buildings, and equipment: cost or othe	er				
		basis. Complete Part VI of Schedule D	10a	97,477.			
	b	Less: accumulated depreciation	10b	74,645.	45,797.	10c	22,832
	11	Investments - publicly traded securities			14,560,476.	11	15,022,434
	12	Investments - other securities. See Part IV, lin	ne 11		26,978,346.	12	22,894,385
	13	Investments - program-related. See Part IV, li	ine 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			297,174.	15	294,873
_	16	Total assets. Add lines 1 through 15 (must e	equal line 3	3)	50,016,255.	16	45,859,308
	17	Accounts payable and accrued expenses \hdots			1,431,511.	17	1,465,819
	18	Grants payable		18			
	19	Deferred revenue			40,237.	19	89
:	20	Tax-exempt bond liabilities				20	
1	21	Escrow or custodial account liability. Comple	ete Part IV (of Schedule D		21	
3 1	22	Loans and other payables to any current or f	ormer offic	er, director,			
		trustee, key employee, creator or founder, su	ubstantial c	ontributor, or 35%			
		controlled entity or family member of any of	these perso	ons		22	
- :	23	Secured mortgages and notes payable to un				23	
1	24	Unsecured notes and loans payable to unrela				24	
1	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on li	ines 17-24)	Complete Part X			
		of Schedule D			297,174.	25	294,873
	26	Total liabilities. Add lines 17 through 25			1,768,922.	26	1,760,781
0		Organizations that follow FASB ASC 958,	check here				
		and complete lines 27, 28, 32, and 33.					46 440 544
	27				25,630,963.	27	16,418,514
<u>ן ב</u>	28	Net assets with donor restrictions			22,616,370.	28	27,680,013
		Organizations that do not follow FASB AS	C 958, che	ck here			
		and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current fur				29	
	30	Paid-in or capital surplus, or land, building, o		Г		30	
<u>н</u>	31	Retained earnings, endowment, accumulated			10 01- 00-	31	
	32	Total net assets or fund balances			48,247,333.	32	44,098,527
;	33	Total liabilities and net assets/fund balances			50,016,255.	33	45,859,308, Form 990 (2022

Form 990 (2022)

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Form	1990 (2022) THE AOPA FOUNDATION, INC.	20-8817225	5	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				4
	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	13,	265,	332.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,	047,	855.
3	Revenue less expenses. Subtract line 2 from line 1	3	З,	217,	477.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	48,	247,	333.
5	Net unrealized gains (losses) on investments	5	-7,	366,	283.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			٥.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	44,	098,	527.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
		r		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 on Schedule	0.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis 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 oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?	F	2c	X	
-	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	L

Form **990** (2022)

232012 12-13-22

Department of the Treasury Internal Revenue Service

(Form 990)

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	
2022	

Open to Pu	blic
Inspectio	n

Name	e of t	he organization						Employer	identification number
Dor	+ 1		PA FOUNDATION,	-					20-8817225
Par		Reason for Public (ee instruction	S.	
The o	rgan	ization is not a private found							
1		A church, convention of ch				n 170(b)(1	I)(A)(i).		
2		A school described in sect							
3		A hospital or a cooperative	hospital service orga	anization described in so	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for section 170(b)(1)(A)(iv). (0		lege or university owned	l or operat	ed by a go	overnmental ur	nit describe	ed in
6		A federal, state, or local go		ental unit described in	section 17	70(6)(1)(1)	(₁)		
	X	An organization that norma	-					o gonoral i	aublic described in
1		section 170(b)(1)(A)(vi). (C		ntial part of its support if	on a gove	mmentai		e general j	
8 [A community trust describe		1)(A)(vi) (Complete Par	+ 11 \				
9	-	An agricultural research org				nd in coniu	unction with a	land grant	collogo
9 [or university or a non-land-							
		university:	grant conege of agric			name, eity	, and state of	the conege	
10 [An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	p fees, and	d gross receipts from
		activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)						
11 [An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12 [An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to ca	ry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 5	509(a)(3). (Check the box on
		lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	upporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		Type II. A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organization	n(s), by hav	ving
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с] Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	y integrate	ed with,
		its supported organization	n(s) (see instructions)). You must complete l	Part IV, Se	ctions A,	D, and E.		
d] Type III non-functionally	/ integrated. A supp	orting organization oper	ated in cor	nnection v	vith its suppor	ted organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	an attentiv	/eness
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	v .		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type I	I, Type III	
		functionally integrated, or	r Type III non-functior	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
g		vide the following information							
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	anization listed ng document?	(v) Amount of		(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
Total							I		1

Part II

THE AOPA FOUNDATION, INC.

20-8817225 Page **2**

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7,880,805.	8,788,993.	9,538,456.	11,064,996.	11,516,655.	48,789,905.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	7,880,805.	8,788,993.	9,538,456.	11,064,996.	11,516,655.	48,789,905.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						15,965,287.
6	Public support. Subtract line 5 from line 4.						32,824,618.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	7,880,805.	8,788,993.	9,538,456.	11,064,996.	11,516,655.	48,789,905.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	192,692.	205,172.	235,634.	337,779.	465,413.	1,436,690.
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.)	73,000.			50,000.	52,952.	175,952.
11	Total support. Add lines 7 through 10						50,402,547.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	449,386.
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						
Se	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (li	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	65.12 %
	Public support percentage from 2021					15	67.44 %
16 a	33 1/3% support test - 2022. If the c	organization did no	t check the box on	line 13, and line 1	14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	r e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a put	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organizatio	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b	, check this box a	nd see instructions	
						Schedule A	(Form 990) 2022

232022 12-09-22

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
• • • • • • • • • • • • • • • • • • • •						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	<u>.</u>	•	•	•	•	•
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	nization,
check this box and stop here	-			-	-	
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2022 (line 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 202	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves						
17 Investment income percentage for 2	022 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2022. If the					· · · ·	
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2021. If the						3%, and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						
232023 12-09-22			,, <i>z</i> , <i>z</i> een (lule A (Form 990) 2022
		15	5		20.00	

1

2

3a

3b

3c

4a

4b

4c

5a

5b

<u>5c</u>

6

7

8

9a

9b

9c

10a

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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232024 12-09-22

Schedule A (Form 990) 2022 THE	AOPA	FOUNDATION,	
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Part IV Supporting Organizations (continued)

20-8817225 Page 5

Yes

2

No

No

Yes No

		Yes	No
1 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
11c below, the governing body of a supported organization?	11a		
b A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		1

INC.

ection B. Type I Supporting Organizations

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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>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, or trustees were allocated among the</i>		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported		I

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,

upervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

			Yes	
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 experiation(a)	1		

organ ation(s) Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on 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		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to s	satisfy the Integral Part	Test during the year	(see instructions).
•	Check the box heat to the method that the organization used to s		i est during the year	(000 1100 000010)

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

c [The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruc	tion <u>s).</u>
------------	--	---	--	-----------------

17

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a 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.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 232025 12-09-22

3b Schedule A (Form 990) 2022

2a

2b

3a

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Sche	edule A (Form 990) 2022 THE AOPA FOUNDATION, INC.			20-8817225	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgar	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (explain in	Part VI). See instr	uctions.
	All other Type III non-functionally integrated supporting organizations mu				
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
с	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Y	ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
_	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting org	anization (see	

Schedule A (Form 990) 2022

232026 12-09-22

instructions).

10491114 153424 0152431-00004

e Excess from 2022

2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 **a** From 2017 **b** From 2018 c From 2019 d From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021

(i)

Excess Distributions

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

organizations, in excess of income from activity

Other distributions (describe in Part VI). See instructions.

Total annual distributions. Add lines 1 through 6.

Distributable amount for 2022 from Section C, line 6

Distributable amount for 2022 from Section C, line 6

(provide details in Part VI). See instructions.

Section E - Distribution Allocations (see instructions)

10 Line 8 amount divided by line 9 amount

4 Amounts paid to acquire exempt-use assets

1 Amounts paid to supported organizations to accomplish exempt purposes

Amounts paid to perform activity that directly furthers exempt purposes of supported

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)

Administrative expenses paid to accomplish exempt purposes of supported organizations

Distributions to attentive supported organizations to which the organization is responsive

Section D - Distributions

2

3

6

7

8

9

1

Page 7

1

2

3

4

5

6

7

8 9

10

(ii)

Underdistributions

Pre-2022

Current Year

(iii)

Distributable

Amount for 2022

Schedule A (Form 990) 2022

THE AOPA FOUNDATION, INC.

20-8817225 Page **8**

Part VI 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 II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER			
2018 AMOUNT: \$ 73,0	000.		
2019 AMOUNT: \$ 0.			
2020 AMOUNT: \$ 0.			
2021 AMOUNT: \$ 50,0	000.		
2022 AMOUNT: \$ 52,5	952.		
232028 12-09-22			Schedule A (Form 990) 2022
	152431-00004	20	DATTON TNC. 01524

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

20-8817225

THE	AOPA	FOUNDATION,	INC.

organization type (check one):				
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

Schedule B

Department of the Treasury Internal Revenue Service Name of the organization

. ..

. ..

(Form 990)

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set in the set of t

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

	B (Form 990) (2022)		Page 2
Name of or	rganization	Emp	bloyer identification number
THE AOPA	FOUNDATION, INC.		20-8817225
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$3,650,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$300,000.	Person X Payroll (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

22

	3 (Form 990) (2022)	[-	Page 2
Name of o	rganization	Em	ployer identification number
THE AOPA	FOUNDATION, INC.		20-8817225
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$250,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

223452 11-15-22

	B (Form 990) (2022)		Page 3
Name of o	rganization		Employer identification number
THE AOPA	FOUNDATION, INC.		20-8817225
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed	I.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
223453 11-15	5-22		Schedule B (Form 990) (2022)

Schedule I	B (Form 990) (2022)		Page 4			
Name of o	rganization		Employer identification number			
	from any one contributor. Complete columns (a)	h) through (e) and the following line entry. F charitable, etc., contributions of \$1,000 or less	20-8817225 n 501(c)(7), (8), or (10) that total more than \$1,000 for the year for organizations for the year. (Enter this info. once.) \$			
(a) No.		space is needed.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
			-			
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift	_			
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
·	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			

Schedule B (Form 990) (2022)

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Perturned of the reserved Perturned of the reserved of the reserved of the organization of the latest information. Perturned of the reserved	SC				OMB No. 1545-0047
Dependent rest restary Construction Dependent restary Construction Dependent restary Construction Construction Addentification Employee information Employee information Part I Organization Ministraining Donor Advised Funds or Other Similar Funds or Accounts. Complete information 2 Aggregate value of contributions to (kuring year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of contributions to (kuring year) (a) Donor advised funds (b) Funds and other accounts 4 Aggregate value of contributions to (kuring year) (b) Funds and other accounts (c) Part is fund 5 Did the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermission inform all appretes, donors, complete if the organization answered Yeat' on Form Biol. Part N, line 7. 1 Purposed is one-axition insemments held by the organization or advisor, or for any other purpose conferring impermission of a historic structure 2 Proservation of all for public use (for example, recreation or advisor, or for any other purpose conferring impermission examines included in (c) account in the form of a cortifice historic structure 4 Total science as	(Forr				2022
Name of the organization Endpart destingtion Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 950, Part IV, line 5. Complete if the organization answered 'Yes' on Form 950, Part IV, line 5. 1 Total number at end of year (a) Denor advised funds (b) Funds and other accounts. 2 Aggregate value of contributions to (during year) (a) Genor advised funds (b) Funds and other accounts. 3 Aggregate value of contributions to (during year) (a) Other organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant trutks can be used only for charitable purposes and for the benefit of the donor of donor advisor, or for any tother purpose confiring important tax of the donor of advisor and writing that grant trutks can be used only for charitable purposes and not for bealts donor advisors in writing that grant trutks can be used only for charitable purposes and not for bablest of the donor advisor and writing. Yes No Protection of natural hobitat Protection of a historic structure Yes No 2 Complete lift the organization in held a qualified conservation cantibution in the form of a conservation easements included in (c) acquired after July 25,2006, and not on a historic structure list of the Notional Rogister 2 2 2 2		ment of the Treasury	Attach to Form 990.		
THE APCA FORDINATION, INC. 20.9 B17225 Parl II Organizations Ministerining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 800, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of continuous to (during year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value at end of year (c) prime advised funds (c) Punds and other accounts 4 Aggregate value at end of year (c) advised funds (c) Punds and other accounts 6 Did the organization inform all drons and drons advisors in writing that the assets held in drons advisor of early other purpose conferring importanziation inform all grantese, dronse, advisor, or for any other purpose conferring importanziation inform all drons pace accounts (c) Preservation of a historically important land area Purposely of conservation easements held by the organization icheck all that apply. Preservation of a historically important land area Protection of natural habitat (c) Preservation of a conservation easements (c) Preservation actice at the face of the Tax Year 8 Total number of conservation easements (c) advised fund in (a) (c) 2 Complete inse 2a through 2d if the orga			990 for instructions and the latest information.	Employ	•
orgänization 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 (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) Aggregate value of ansit for (during year) (b) Funds and other accounts 3 Aggregate value of ansit for (during year) (c) Funds and other accounts (c) Funds and other accounts 4 Aggregate value of ansit for (during year) (c) Funds and other accounts (c) Funds and other accounts 4 Aggregate value of ansit for (during year) (c) Funds and other accounts (c) Funds and other accounts 5 Did the organization inform all donors and door advisors in writing that grant funds can be used only for charitable purposes and not for the baneft of the organization (answerd): vets' on Form 990, Part IV, line 7. (c) Preservation of a fund for public use (for example, recreation or education) (c) Preservation of a historically important land area 1 Purpose(s) of conservation easements (c) Conservation easements (c) Conservation easements (c) Conservation easements (c) Conservation easements 2 Complete lines 2a through 2d if the organization held a qualified conservation conservation easements (c) Conservation ease (THE AOPA FOUNDATION, INC.			20-8817225
1 Total number at end of year (a) Donar advised funds (b) Funds and other accounts 1 Total number at end of year (a) Aggregate value of contributions to (during year) (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (c) Aggregate value at end of year (c) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that grant funds can be used only for obaritable provide to for the benefit of the donor or donor advisor, or for any other purpose conferring importantial assection or advisor and the organization answered. Yea' on Form 930, Part IV, Imo 7. Particely of conservation easements held by the organization (check all that apps). Preservation of a historically important land area Protection of natural habitat Preservation of open space (c) and the organization held a qualified conservation contribution in the form of a conservation easements included in (a) qualified conservation conservation easements included in (a) cancell atter July 25,2006, and not on a historic structure lates and endogradin easements included in (a) cancell atter July 25,2006, and not on a historic structure lates where property subject to conservation easements building of violations, and enforcing conservation easements building of violations, and enforcing conservation easements during the year 6 Number of conservation easements included in (a) cancell atter July 25,2006, and not on a historic structure lates and endograding the periodic monitoring, inspecting, handling of violations, and enforcing conservation easements d	Pa			counts.	Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of and the set of the donor advisors in writing that the assets held in donor advised funds are the organization inform all donors advisors in writing that grant funds can be used only for sharitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring immemizable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring immemization informal digrantes, donors, and donor advisor, or for any other purpose conferring immemizable purposes and not for the benefit of the donor or doucation immediate approximation in the digrantes and one agree and done advisor, or for any other purpose conferring immemizable purposes and not for the benefit of the donor or doucation immediate approximation assements held by the organization neasement "Protection of a historically important land area Protection of ratural habitat important land area improvement or a construction easements in bala qualified conservation contribution in the form of a conservation assements in a dirified historic structure improvements on a cortified historic structure improvements on a cortified historic structure induced in (a) important land area instorical structure listed in the National Register 8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. 9 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year instructure listed in the conservation easements in block? 9 Number of states where property subject to conservation easements in block? 9 Staff and volunteer hours devided to montoring, inspecting, handling of violations, and enforcing conservation easements during the year instructure include, if appli		organization answered fes on Form 990, Part IV, 1		(b) Funds a	ind other accounts
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are the organization's property, subject to the organization's exclusive legal control? Ves No 6 Did the organization inform all grantees, donors, and donor advisor, in writing that grant funds can be used only to charatable purposes and not for the benefit of the donor advisor, or for any other purpose confering impermisable private benefit? Yes No 7 Purpose(g) of conservation easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Yes No 9 Protection of natural habitat Preservation of add of or public use (for example, recreation or education) Preservation of a conservation easements in bld by the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Improve of the add of the Tax Year Improve of conservation easements Improve of the tax year. 8 Total anreage restricted by conservation easements 20 Improve of conservation easements 20 0 Number of conservation easements in outed in (a) aquified conservation easements conservation easements in outed in (a) aquified atter July 25.2006, and not on a historic structure line advises where grouperty subject to conservation easements during the zx year 2d 9 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the zx year 2d 9 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year Stataf and volumeter hue a writte	4	Aggregate value at end of year			
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to charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring					Yes No
Impermissible private benefit? Yes No Part II Conservation Easements. Complete if the organization check all that apply.	6				
Part III Conservation Easements. Complete If the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a certified historic structure 1 Perservation of open space Preservation of a conservation easement on the last day of the tax year. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2a 2 Total anrough 2d if the organization held a qualified conservation contribution in the form of a conservation easements on a certified historic structure included in (a) 2a 2 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d 3 Number of states where property subject to conservation easements is located					
1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of conservation easements Preservation of a certified historic structure 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 3 Total number of conservation easements 2a 4 Number of conservation easements 2a 2 Number of conservation easements included in (c) acquired after July 25,2006, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located	Pa				Ves No
Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Preservation of a certified historic structure Preservation of a certified historic structure Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total another of conservation easements Total acreage restricted by conservation easements total acreage restructure included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register A Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easements is located Soes the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in tolds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements outling the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements. Test in the organization nectored as a mentice on the organization is feasible for conservation easements. Test in the organ					
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Preservation of open space 2 Complete lines 2a through 2d if the organization heid a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on certified historic structure included in (a) d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 2 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easements is located 5 Conservation easement monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 8 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 9 9 9 10 21 9 10 22 23 24 24 25 26 27 28 29 29 29 29 29 20 20 20 20 20 21				• •	
day of the tax year. Held at the End of the Tax Year. a Total number of conservation easements 2a 2b 2c 2c 2d 2d 2d 2d </td <td></td> <td></td> <td></td> <td></td> <td></td>					
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a Revenue included on Form 990, Part VIII, line 1 \$	2			orovide	
b Assets included in Form 990, Part X \$				*	
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Sche		DUNDATION, INC.				20-881		Pa	age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	easures, or Othe	er Simila	r Assets	(conti	nued)	
3	Using the organization's acquisition, accessi	on, and other records	, check any of the f	following that make	significant ı	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organization's exe	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	f art, historical treas	sures, or other simila	ir assets		_		_
	to be sold to raise funds rather than to be ma				<u></u>		Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organizatio	n answered "Yes" o	n Form 990), Part IV, I	ine 9, or		
1a	Is the organization an agent, trustee, custodi	ian or other intermedia	ary for contribution	s or other assets not	included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table:						
							Amoun	t	
с	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1 f				_
	Did the organization include an amount on F				• • • • • • • • • • • • • • • • • • • •	L	Yes		No
_	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete	i i i i i i i i i i i i i i i i i i i		1	1		() [h 1-
		(a) Current year	., ,	(c) Two years back					
1a	Beginning of year balance	15,172,701.	14,192,341.			94,534.	13	,444,	
b	Contributions	195,000.	980,360.	421,808.		75,999.		250,	000.
C.	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses	15 367 701	15,172,701.	14,192,341.	13 7	70,533.	13	,694,	531
g	End of year balance				13,7	/0,555.	15	,094,	JJ4.
2	Provide the estimated percentage of the curr	rent year end balance 17.0000)) held as:					
a L	Board designated or quasi-endowment Permanent endowment83.0000		_%						
D		%							
С		<u>%</u>							
2-	The percentages on lines 2a, 2b, and 2c sho		ion that are hold ar	ad administered for t	ha				
38	Are there endowment funds not in the posse	ssion of the organizat	ion that are neid ar	la administerea for t	ne			Yes	No
	organization by:						3a(i)	100	x
	(i) Unrelated organizations(ii) Related organizations						3a(ii)		X
h	If "Yes" on line 3a(ii), are the related organizations						3b		
4	Describe in Part XIII the intended uses of the						_ 00		
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" on Form 990,	Part IV, line 11a. S	See Form 990, Part X	, line 10.				
	Description of property	(a) Cost or ot basis (investm	• • •		Accumulate	ed	(d) Boo	k valu	e
19	Land		, 200	····/ ···	,				
b	Buildings								٥.
	Leasehold improvements								0.
	Equipment								0.
	Other			97,477.	74.	645.		22.	832.
	. Add lines 1a through 1e. (Column (d) must e		(column (R) line 1		,				832.
		guari uni 330, FallA		<i>vv.</i> /		Schodulo		,	

Schedule D (Form 990) 2022

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	22,894,385.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	22,894,385.	

D .	\/				-	D		
Total.	(Col. (b) must ec	qual Form §	990, Part X,	col. (B) line 12.)	22,894

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value				
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.					
Part X Other Liabilities.					

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	CHARITABLE GIFT ANNUITY	294,873.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	294,873.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

X

232053 09-01-22

Sche	dule D (Form 990) 2022 THE AOPA FOUNDATION, INC.			20-881722	25 Page 4
Par	·		Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			E 702 E24
1				1	5,703,524.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		7 266 252		
-	Net unrealized gains (losses) on investments		-7,366,253.		
b	Donated services and use of facilities				
-	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				7 266 252
-	Add lines 2a through 2d			2e	<u>-7,366,253.</u> 13,069,777.
3	Subtract line 2e from line 1			3	13,009,777.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		105 555		
	Investment expenses not included on Form 990, Part VIII, line 7b		195,555.		
b	Other (Describe in Part XIII.)				105 555
	Add lines 4a and 4b			4c	195,555.
5 Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) t XII Reconciliation of Expenses per Audited Financial Staten	onts With	Fynenses ner F	5 Return	13,203,332.
I UI	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				
1	Total expenses and losses per audited financial statements			1	9,852,300.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				, ,
_	Donated services and use of facilities	2a			
b	Prior year adjustments				
c	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	9,852,300.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	195,555.		
b	Other (Describe in Part XIII.)				
с	Add lines 4a and 4b			4c	195,555.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	10,047,855.
Par	t XIII Supplemental Information.			· · ·	
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t IV, lines 1b a	and 2b; Part V, line 4	; Part X, line 2	2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad	ditional inform	nation.		
PART	V, LINE 4:				
ENDO	WMENT FUNDS				
ENDO	WMENT FUNDS ARE USED TO SUPPORT AOPA FOUNDATION'S MISSION. SI	E			

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SCHEDULE O FOR DETAILED MISSION STATEMENT.

PART X, LINE 2:

FIN 48 FOOTNOTE

THE FOUNDATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR

UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX

RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND

MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN

TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE

232054 09-01-22

Schedule D (Form 990) 2022

Part XIII Supplemental Information (continued)

POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO

BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS

BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO

THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

THE FOUNDATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX

POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL

STATEMENTS.

Schedule D (Form 990) 2022

232055 09-01-22

		le Service	Go to w	ww.irs.gov/Form	990 for instructions and the latest in	nformation.	Inspe	ction
Nam	e of th	e organization					Employer identifi	cation number
		FOUNDATION,					20-8817225	
Pa	rtI			ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	es" on
		Form 990, Pa						
1					ds to substantiate the amount of its gra			
	the g	rantees' eligibili	ty for the grants or a	assistance, and t	he selection criteria used to award the	grants or assis		Yes 🔄 No
•	_							
2			escribe in Part V the	e organization's j	procedures for monitoring the use of its	grants and ot	ner assistance outsi	de the
•		d States.	(The fellowing Dout	l line Otable as				
_3		ities per Region a) Region	(b) Number of		n be duplicated if additional space is n (d) Activities conducted in the region		vity listed in (d)	(f) Total
	(offices	employees,	(by type) (such as, fundraising, pro-		gram service,	expenditures
			in the region	agents, and independent	gram services, investments, grants to	•	e specific type	for and investments
				contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
				in the region				
CEN'	FRAL 2	AMERICA AND						
	CARII		0	0	INVESTMENTS			6,767,865.
3 a	Subt	otal	0	0				6,767,865.
		from continuati						
-		ts to Part I		0				0.
с		ls (add lines 3a						

Statement of Activities Outside the United States

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

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

0

0

Schedule F (Form 990) 2022

6,767,865.

OMB No. 1545-0047

Open to Public

232071 10-17-22

and 3b)

SCHEDULE F (Form 990)

Department of the Treasury

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2022

THE AOPA FOUNDATION, INC. Schedule F (Form 990) 2022 Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	nization by the IRS, o	or for which the grantee o	ecognized as charities by the t or counsel has provided a sect					

32

20-8817225

~	~
- 3	· .
-	5

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

THE AOPA FOUNDATION, INC. Schedule F (Form 990) 2022

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

20-8817225

Page 3

Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

232074 10-17-22

	Supplemental Information				
	Provide the information required by Part I, line 2 (monito				
	investments vs. expenditures per region); Part II, line 1 ((estimated number of recipients), as applicable. Also co				
	(estimated number of recipients), as applicable. Also co	inplete this part to pr		ai intornation. See ins	
10-17-22				Sched	ule F (Form 990) 2022
		35	=		
14 1	53424 0152431-00004	2022.05000	THE AOPA	FOUNDATION,	INC. 0152

20-8817225

Page 5

SCHEDULE I (Form 990)		Go	Frants and Other of the organization of the or	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury			-	Attach to Form				Open to Public
Internal Revenue Service			Go to www.irs	s.gov/Form990 for	the latest inform	ation.		Inspection
Name of the organizatio	ON THE AOPA FOUN	DATION, INC.						Employer identification number 20-8817225
Part I General In	formation on Grants a	nd Assistance						
criteria used to a	ation maintain records t ward the grants or assis IV the organization's pro	stance?				for the grants or assis		on X Yes No
Part II Grants and	d Other Assistance to hat received more than \$	Domestic Organiz	zations and Domestic	c Governments. C	complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
	dress of organization rernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AIRCRAFT OWNERS & ASSOCIATION - 421 FREDERICK, MD 217	AVIATION WAY -	52-0636210	501(C)(4)	683,000.	0.			SAFETY SUPPORT
AIRCRAFT OWNERS & ASSOCIATION - 421 FREDERICK, MD 217	AVIATION WAY -	52-0636210	501(C)(4)	425,000.	0.			GROW PILOT POPULATION
AIRCRAFT OWNERS & ASSOCIATION - 421 FREDERICK, MD 217	AVIATION WAY -	52-0636210	501(C)(4)	392,000.	0.			AIRPORT SUPPORT
	er of section 501(c)(3) a er of other organization		•	le line 1 table				<u>0.</u> 1.

3 Enter total number of other organizations listed in the line 1 table

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

Page 2

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.

LIGHT TRAINING SCHOLARSHIP	252	1,147,922.			
LIGHT TRAINING SCHOLARSHIP	252	1 147 922.			
			0.		
Part IV Supplemental Information. Provide the information re	quired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.	
PART I, LINE 2:	· · · ·				
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS					

THE AOPA FOUNDATION (FOUNDATION) HAS WRITTEN PROCEDURES FOR REQUESTING

FUNDING. THE REQUEST FOR FUNDING MUST CONFORM TO, AND FOSTER THE PURPOSES

SET FORTH IN THE FOUNDATION'S ARTICLES OF INCORPORATION. ALL ORGANIZATIONS

AWARDED GRANTS BY THE FOUNDATION MUST COMPLETE AND RETURN, UPON COMPLETION

OF THE PROJECT, A FINAL REPORT DETAILING AND ACCOUNTING FOR HOW THE GRANT

FUNDS WERE SPENT. GRANT FUNDS MAY ONLY BE SPENT IN FURTHERANCE OF THE

PROJECT DOCUMENTED ON THE GRANT APPLICATION. ANY UNUSED FUNDS MUST BE

THE AOPA FOUNDATION, INC.

RETURNED.

GRANTS AND OTHER ASSISTANCE TO DOMESTIC INDIVIDUALS

FLIGHT TRAINING SCHOLARSHIPS: THE SCHOLARSHIP RULES REQUIRE THE

RECIPIENT(S) TO BE:

(A) U.S. CITIZEN OR U.S. PERMANENT RESIDENT,

(B) AT LEAST 15 YEARS OF AGE ON OR BEFORE THE APPLICATION CLOSE DATE,

(C) HAVE HAD AN AOPA MEMBER ACCOUNT AT THE TIME OF APPLICATION,

(D) NOT HAVE COMPLETED THE FAA PRACTICAL TEST/CHECKRIDE AT THE TIME OF

APPLICATION.

THE MONEY IS TO BE USED FOR FLIGHT TRAINING EXPENSES ONLY AND IF THE MONEY

IS NOT USED FOR THAT PURPOSE, IT MUST BE RETURNED TO AFI. AFI MONITORS THE

USE OF THESE FUNDS ON A WEEKLY BASIS.

Schedule I (Form 990)

232291 04-01-22

SC	HEDULE J	Compensation Information	L	OMB No.	1545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		2022		
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20		
	tment of the Treasury	Attach to Form 990.		Open to Inspe		ic
	al Revenue Service 1e of the organizatior	Go to www.irs.gov/Form990 for instructions and the latest information.	Employer ide			mbor
Indii	le of the organization	THE AOPA FOUNDATION, INC.	20-88:		Jii nui	IDEI
Pa	rt I Question	s Regarding Compensation	20 00.	17225		
	duootion.				Yes	No
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990.		103	
		line 1a. Complete Part III to provide any relevant information regarding these items.	,			
	First-class or c		nal use			
	Travel for com					
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	s			
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		. 1b		
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		. 2		
-						
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organizati	on to			
		ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
		ompensation consultant				
	Form 990 of o	ther organizations Approval by the board or compensation of	ommittee			
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
4	organization or a re					
а	-	e payment or change-of-control payment?		4a		x
b		eive payment from a supplemental nonqualified retirement plan?			Х	
c	-	eive payment from an equity-based compensation arrangement?		· _		x
Ū	-	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	j					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the re					
а	The organization?			5a		х
		ation?				х
		or 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the n	-				
а	The organization?			6a		X
b	Any related organiz	ation?		6b		X
	If "Yes" on line 6a c	r 6b, describe in Part III.				
7	•	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		nes 5 and 6? If "Yes," describe in Part III		7	Х	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	1e			
				. 8		X
9		id the organization also follow the rebuttable presumption procedure described in		-		
	Regulations section			9		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Schedul	le J (Forr	n 990)	2022

232111 10-18-22

20-8817225

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MARK R. BAKER	(i)	0.	0.	0.	0.	0.	0.	0.
PRESIDENT/CEO	(ii)	961,249.	675,000.	51,432.	176,078.	18,462.	1,882,221.	0.
(2) JUSTINE A. HARRISON	(i)	0.	0.	0.	0.	0.	0.	0.
SVP - GENERAL COUNSEL	(ii)	355,515.	109,518.	952.	26,078.	15,104.	507,167.	0.
(3) GREGORY L. COHEN	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF ADMINISTRATIVE OFFICER	(ii)	287,464.	82,138.	635.	25,850.	19,216.	415,303.	0.
(4) ERICA J. SACCOIA	(i)	0.	0.	0.	0.	0.	0.	0.
SVP - FINANCE & ACCOUNTING	(ii)	245,582.	76,059.	1,194.	23,571.	9,908.	356,314.	0.
(5) ELIZABETH A. TENNYSON	(i)	244,273.	56,192.	1,168.	23,195.	3,048.	327,876.	0.
SVP - AOPA FOUNDATION, INC	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DAN JUSTMAN	(i)	151,742.	14,400.	709.	14,140.	17,785.	198,776.	0.
VP - YOU CAN FLY	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PETER BOWERS	(i)	130,939.	0.	989.	11,661.	13,703.	157,292.	0.
AMBASSADOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4B:

NONQUALIFIED RETIREMENT PLAN

MARK BAKER PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED 457(F) PLAN, WHICH

IS INCLUDED IN PART II, COLUMN C. THE 2022 CONTRIBUTION TO THIS PLAN WAS

\$150,000.

PART I, LINE 7:

NONFIXED PAYMENTS

TARGET INCENTIVE AMOUNTS, AS A PERCENTAGE OF BASE SALARY, ARE

ESTABLISHED BASED ON THE PARTICIPANT'S POSITION. THE ACTUAL BONUS PAID

IS PROPOSED BY THE EXECUTIVE MANAGEMENT TEAM AND THE PRESIDENT BASED ON

THEIR ASSESSMENT OF THE PARTICIPANT'S INDIVIDUAL PERFORMANCE AND THAT

OF THE ORGANIZATION AGAINST PRE-ESTABLISHED GOALS. THE BOARD OF

TRUSTEES AND COMPENSATION COMMITTEE REVIEW AND MAKE A FINAL

DETERMINATION AS TO THE ACTUAL BONUS AMOUNT PAID TO PARTICIPANTS. NONE

OF THE PERSONS MENTIONED ABOVE PARTICIPATE IN THE DELIBERATION OF THEIR

COMPENSATION ARRANGEMENT. THE DELIBERATIONS AND DECISIONS OF THESE

COMPENSATION ARRANGEMENTS ARE MAINTAINED IN CONTEMPORANEOUS

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

DOCUMENTATION WITH OUR HUMAN RESOURCES DEPARTMENT.

PART II:

COMPENSATION INFORMATION

AOPA FOUNDATION USES THE SERVICES OF AIRCRAFT OWNERS & PILOTS

ASSOCIATION'S HUMAN RESOURCES DEPARTMENT IN ORDER TO DETERMINE

REASONABLE COMPENSATION OF ITS EMPLOYEES. THE COMPENSATION LEVELS AND

SALARY RANGES FOR CERTAIN EMPLOYEES OF THE ORGANIZATION ARE ESTABLISHED

BASED ON COMPETITIVE MARKET DATA OBTAINED THROUGH PERIODIC SALARY

SURVEYS PERFORMED BY OUTSIDE COMPENSATION EXPERTS ENGAGED BY THE

ORGANIZATION. THESE SURVEYS PROVIDE GUIDANCE FOR ESTABLISHING

REASONABLE COMPENSATION RATES AS COMPARED TO COMPENSATION PAID BY

SIMILARLY SITUATED ORGANIZATIONS FOR POSITIONS OF SIMILAR SCOPE OF

RESPONSIBILITY. ALL POSITIONS ARE EVALUATED AND PLACED IN THE

APPROPRIATE GRADES/SALARY RANGES. AN INDIVIDUAL EMPLOYEE'S SALARY,

WITHIN THEIR ASSIGNED RANGE, VARIES DEPENDING PRIMARILY UPON EXPERIENCE

AND PERFORMANCE. THE ORGANIZATION HAS ADOPTED A "PAY FOR PERFORMANCE"

PHILOSOPHY ALLOWING MANAGERS TO AWARD MERIT INCREASES BASED ON AN

INDIVIDUAL'S PERFORMANCE AGAINST PRE-ESTABLISHED GOALS. THE

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

ORGANIZATION'S ANNUAL MERIT INCREASE BUDGET IS APPROVED BY THE BOARD OF

TRUSTEES BASED ON MARKET SURVEYS. CERTAIN EMPLOYEES ALSO PARTICIPATE IN

THE ORGANIZATION'S INCENTIVE PAY PROGRAM.

Schedule J (Form 990) 2022

Page 3

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

	Inspection
plover	identification number

2

Name of the organization THE AOPA FOUNDATION INC Employer identification 20-8817225

Image: Construction of the second	Par	t I Types of Property	1						
applicable contributions or items contributed amounts reported on Form 990, Part VIII, line 1g noncash contribution amounts 1 Art - Works of art			(a)	(b)	(c)	(d)			
1 Art - Works of art Immediate Commediation Amounto 2 Art - Fractional interests Immediate Commediation Amounto 3 Art - Fractional interests Immediate Commediation Amounto 4 Books and publications Immediate Commediation Amounto 5 Clothing and household goods Immediate Commediation Amounto 6 Cars and other vehicles Immediate Commediation Amounto 7 Books and publications Immediate Commediation Amounto 6 Cars and other vehicles Immediate Commediation Amounto 7 Boots and planes X 1 80, 350. SELLING PRICE 8 Intellectual property Immediate Commediation Amounto Immediate Commediate C				I a substitution at the substitution					
1 Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 11 Securities - Closely held stock 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Historic structures 15 Real estate - Commercial 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies			applicable			noncash contribu	ition ar	nount	S
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3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 16 9 Securities - Publicly traded 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Commercial 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies									
4 Books and publications									
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7 Boats and planes X 1 80,350. SELLING PRICE 8 Intellectual property X 16 346,902. FMV 9 Securities - Closely held stock X 16 346,902. FMV 10 Securities - Closely held stock X 16 346,902. FMV 11 Securities - Closely held stock X 16 346,902. FMV 11 Securities - Partnership, LLC, or trust interests X 16 X 16 12 Securities - Miscellaneous X X 16 X X 16 13 Qualified conservation contribution - Historic structures X X X 16 X X 16 X<									
8 Intellectual property X 16 346,902. FMV 9 Securities - Publicly traded X 16 346,902. FMV 10 Securities - Closely held stock Image: Closely held stock Image: Closely held stock Image: Closely held stock 11 Securities - Partnership, LLC, or trust interests Image: Closely held stock Image: Closely held stock Image: Closely held stock 12 Securities - Miscellaneous Image: Closely held stock Image: Closely held stock Image: Closely held stock 13 Qualified conservation contribution - Historic structures Image: Closely held stock Image: Closely held stock Image: Closely held stock 14 Qualified conservation contribution - Other Image: Closely held stock Image: Closely held stock Image: Closely held stock 15 Real estate - Residential Image: Closely held stock Image: Closely held stock Image: Closely held stock 16 Real estate - Other Image: Closely held stock Image: Closely held stock </th <th></th> <th></th> <th>x</th> <th>1</th> <th>80 350.</th> <th>SELLING PRICE</th> <th></th> <th></th> <th></th>			x	1	80 350.	SELLING PRICE			
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14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies	13	I Pata da sturatores							
15 Real estate - Residential Image: Commercial in the second	14								
16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies									
17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies									
18 Collectibles 19 Food inventory 20 Drugs and medical supplies									
19 Food inventory									
20 Drugs and medical supplies									
						-			
23 Scientific specimens									
24 Archeological artifacts									
25 Other ()		· · · · · · · · · · · · · · · · · · ·							
26 Other ()									
27 Other ()									
28 Other () 29 Number of Forms 8283 received by the organization during the tax year for contributions		· · · · · · · · · · · · · · · · · · ·		the tex year for a					
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29	29	, .						0	
		for which the organization completed Form 62	os, Fart V, L	Jonee Acknowledg	ement 29			Vac	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it	202	During the year, did the organization receive h	v contributio	n any proporty rop	orted in Part L lines 1 throug	ah 28 that it		165	
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for	30a								
		-			·		202		x
exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II.	h		•				30a		
			onliny that re	ouires the review (of any nonstandard contribu	tions?	24	x	
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 31 X									
	JZd			-			200	x	1
b If "Yes," describe in Part II.	F						JZa		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,		-	olumn (a) fa	r a type of property	(for which column (a) is sho	cked			
describe in Part II.	00			a type of property	a) is che	JACU,			

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Schedule M (Form 990) 2022

232141 09-09-22

Schedule M (Form 990) 2022 THE	AOPA FOUNDATION,	INC.
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Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

NUMBER OF CONTRIBUTIONS

THE ORANGIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN

(B).

SCHEDULE M, LINE 32B:

AIRCRAFT SALES BROKER

THE AOPA FOUNDATION, INC. USES A BROKER SPECIALIZING IN AIRCRAFT SALES

TO SELL DONATED AIRCRAFT. THE BROKER IS RESPONSIBLE FOR ADVERTISING AND

PLACING LISTINGS TO ALLOW MAXIMUM EXPOSURE AND TO EXPEDITE THE SALE.

Schedule M (Form 990) 2022

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SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047			
(Form 990)	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.		2022			
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.		Open to Public Inspection			
Name of the organization	THE AOPA FOUNDATION, INC.		identification number			
FORM 990, PART 1, 1	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
THE AOPA FOUNDATION	N (THE FOUNDATION) WORKS TO IMPROVE AVIATION SAFETY,					
PRESERVE COMMUNITY	AIRPORTS, AND ENCOURAGE LEARNING TO FLY FOR CAREER					
AND PERSONAL BENEF	IT.					
FORM 990 PART III	, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
TO PROMOTE, ADVANCI	E AND ENCOURAGE AVIATION AND AIRPORT SAFETY AND					
SECURITY AND THE R	ESEARCH AND TESTING IN THE SUPPORT THEREOF; TO					
EDUCATE THE PUBLIC	AND USERS OF THE NATIONAL AIR TRANSPORTATION SYSTEM					
TO THE VALUE AND IN	MPORTANCE OF GENERAL AVIATION TO THE NATIONAL AIR					
TRANSPORTATION SYST	TRANSPORTATION SYSTEM; TO ENCOURAGE AND SUPPORT THE FLIGHT TRAINING OF					
PILOTS TO ASSURE TH	HE FUTURE OF GENERAL AVIATION AS AN IMPORTANT					
COMPONENT OF THE NA	ATIONAL AIR SYSTEM; TO LESSEN THE BURDENS OF FEDERAL,					
STATE AND LOCAL GOV	VERNMENTS IN CONNECTION WITH THE MAINTENANCE AND					
ADVANCEMENT OF GENI	ERAL AVIATION, AND AVIATION AND AIRPORT SAFETY AND					
SECURITY; AND TO AS	SSIST OTHER CHARITABLE AND OTHER ORGANIZATIONS IN THE					
CONDUCT OF SIMILAR	ACTIVITIES TO THE EXTENT THAT SUCH ACTIVITIES ARE IN					
THE FURTHERANCE OF	CHARITABLE, EDUCATIONAL AND/OR SCIENTIFIC PURPOSES.					
FORM 990, PART III	, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:					
THE AOPA FOUNDATION	N (THE FOUNDATION) IS A TAX-EXEMPT CHARITABLE,					
EDUCATIONAL, AND SO	CIENTIFIC ORGANIZATION THAT EDUCATES THE PUBLIC ABOUT					
THE VALUE OF GENERA	AL AVIATION. THE FOUNDATION'S MISSION IS TO ENSURE					
THE FUTURE OF GENEI	RAL AVIATION BY IMPROVING SAFETY THROUGH THE AIRCRAFT					
OWNERS AND PILOTS A	OWNERS AND PILOTS ASSOCIATION'S (AOPA) AIR SAFETY INSTITUTE, PRESERVING					
	· · · · · ·					
	, AND ENCOURAGING LEARNING TO FLY FOR CAREER AND eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schee	dule O (Form 990) 2022			
232211 10-28-22	46					

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Schedule O	(Form 990) 2022 (
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Name of the organization

THE AOPA FOUNDATION, INC.

Employer identification number 20-8817225

PERSONAL BENEFIT.

YOU CAN FLY

THE AOPA FOUNDATION'S YOU CAN FLY PROGRAM IS A SET OF INITIATIVES

DESIGNED TO GET PEOPLE FLYING AND KEEP THEM FLYING. WITH INITIATIVES TO

INTRODUCE HIGH SCHOOL STUDENTS TO CAREER OPPORTUNITIES IN AVIATION AND

AEROSPACE, PROVIDE SUPPORT FOR FLIGHT SCHOOLS AND STUDENTS, DELIVER

TOOLS AND RESOURCES TO HELP PILOTS CREATE AND GROW FLYING CLUBS, AND

HELP LAPSED PILOTS GET BACK IN THE AIR, YOU CAN FLY IS SUPPORTING

AVIATORS AT EVERY STAGE OF THEIR JOURNEY.

THE FOUNDATION PROVIDES FREE FOUR YEAR AVIATION STEM CURRICULUM TO

THOUSANDS OF HIGH SCHOOL STUDENTS NATIONWIDE. AN ANNUAL SYMPOSIUM FOR

EDUCATORS HELPS SCHOOLS CREATE AND GROW AVIATION STEM PROGRAMS TO MEET

THEIR SPECIFIC NEEDS, WHILE \$1 MILLION IN SCHOLARSHIPS ARE AWARDED

ANNUALLY TO HIGH SCHOOL TEACHERS AND STUDENTS TO HELP THEM EARN A PILOT

CERTIFICATE.

FOR FLIGHT SCHOOLS, INSTRUCTORS, AND STUDENTS, THE FOUNDATION IS

DELIVERING TRAINING AND TOOLS DESIGNED TO HELP REDUCE THE DROPOUT RATE

BY MAKING TRAINING MORE EFFICIENT, TRANSPARENT, AND CUSTOMER FOCUSED.

THE ANNUAL FLIGHT TRAINING EXPERIENCE AWARDS SUPPORT BEST PRACTICES AND

RECOGNIZE SCHOOLS FROM ACROSS THE COUNTRY THAT DELIVER EXCEPTIONAL

TRAINING EXPERIENCES TO THEIR CLIENTS WHILE THE AOPA FLIGHT TRAINING

ADVANTAGE PLATFORM BRINGS ADAPTIVE LEARNING INTO THE FLIGHT DECK.

TO HELP INCREASE AIRCRAFT UTILIZATION AND BUILD A STRONGER COMMUNITY OF

47

AVIATORS, THE FOUNDATION IS HELPING PILOTS LAUNCH AND GROW FLYING

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Schedule O (Form 990) 2022

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Schedule O (Form 990) 2022	Page 2
Name of the organization THE AOPA FOUNDATION, INC.	Employer identification number 20-8817225
CLUBS. THE FOUNDATION DELIVERS EXTENSIVE RESOURCES, INCLUDING IN PERSON	
ASSISTANCE AND ONLINE GUIDANCE, TO HELP PILOTS CREATE NEW CLUBS. THE	
FOUNDATION'S FLYING CLUB FINDER ALSO LISTS HUNDREDS OF FLYING CLUBS,	
MAKING IT EASIER FOR PILOTS EVERYWHERE TO CONNECT WITH A CLUB CLOSE TO	
HOME.	
FOR LAPSED PILOTS WHO WANT TO RETURN TO FLYING, THE FOUNDATION'S RUSTY	
PILOTS INITIATIVE PROVIDES IN PERSON SEMINARS AND LIVE WEBINARS THAT	
GIVE PILOTS THREE HOURS OF GROUND TRAINING THAT FULFILLS THE FAA'S	
FLIGHT REVIEW REQUIREMENTS FOR GROUND INSTRUCTION. AN ONLINE COURSE	
OPTION MAKES IT POSSIBLE FOR PILOTS TO REFRESH THEIR CRITICAL GROUND	
SCHOOL KNOWLEDGE ANY TIME. BOTH THE IN PERSON AND THE ONLINE PROGRAMS	
PROVIDE FAA WINGS CREDIT.	
FOUNDATION GRANTS	
DURING 2022, THE AOPA FOUNDATION GRANTED \$1,500,000 TO VARIOUS PROJECTS	
IN SUPPORT OF ITS MISSION.	
THE FOUNDATION PROVIDED A \$683,000 GRANT TO SUPPORT AOPA'S AIR SAFETY	
INSTITUTE (ASI). ASI SERVES ALL PILOTS BY PROVIDING FREE OR LOW-COST	
EDUCATION PROGRAMS TO PILOTS AND FLIGHT INSTRUCTORS NATIONWIDE,	
ANALYZING SAFETY DATA, AND CONDUCTING SAFETY RESEARCH. AS A RESULT OF	
THE GRANT, ASI'S MATERIAL WAS ACCESSED NEARLY 10 MILLION TIMES. THIS	
WAS MADE POSSIBLE IN PART BY THE RELEASE OF VARIOUS NEW PRODUCTS	
INCLUDING VIDEOS, PODCASTS, PUBLICATIONS, AND WEBINARS TO PILOTS AND	
AVIATION ENTHUSIASTS.	
THE FOUNDATION PROVIDED A \$392,000 GRANT TO SUPPORT THE AOPA AIRPORT	
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Schedule O (Form 990) 2022 Name of the organization	Page : Employer identification number
THE AOPA FOUNDATION, INC.	20-8817225
SUPPORT NETWORK. THE AIRPORT SUPPORT NETWORK IS A GROUP OF NEARLY 2,250	
VOLUNTEERS TASKED WITH PROMOTING, PROTECTING, AND DEFENDING AMERICA'S	
COMMUNITY AIRPORTS FROM PRESSURES MOUNTING AGAINST SUCH AIRPORTS.	
THE FOUNDATION PROVIDED A \$425,000 GRANT TO SUPPORT MEMBER OUTREACH.	
EVENTS ARE FOCUSED ON PROVIDING AOPA MEMBERS EDUCATIONAL CONTENT,	
ACCESS TO AVIATION INDUSTRY PARTNERS FOR TRANSACTIONS, AND THE	
OPPORTUNITY TO CONNECT WITH THE AVIATION COMMUNITY. EACH EVENT IS	
INTENDED TO INCREASE ENGAGEMENT BY AOPA MEMBERS WHICH WILL LEAD TO	
SAFER PILOTS AND A MORE ROBUST AVIATION INDUSTRY.	
FORM 990, PART VI, SECTION A, LINE 2:	
BUSINESS RELATIONSHIPS	
THERE ARE TWO TRUSTEES (MR. TRIMBLE AND MR. CRATE) WHO HAVE A BUSINESS	
RELATIONSHIP OUTSIDE OF AFI. THESE TWO TRUSTEES ARE PARTNERS IN THE SAME	
COMPANY.	
FORM 990, PART VI, SECTION A, LINE 6:	
MEMBERS OR STOCKHOLDERS	
THE AOPA FOUNDATION'S BYLAWS STATE THE MEMBERS SHALL BE THOSE PERSONS WHO,	
FROM TIME TO TIME, CONSTITUTE THE BOARD OF TRUSTEES OF AIRCRAFT OWNERS &	
PILOTS ASSOCIATION, A NON PROFIT NEW JERSEY CORPORATION. WHENEVER ANY	
PERSON SHALL CEASE TO BE A MEMBER OF THE BOARD OF TRUSTEES OF SAID	
ASSOCIATION, FOR ANY REASON, HE SHALL CONTEMPORANEOUSLY CEASE TO BE A	
MEMBER OF THIS FOUNDATION, AND HIS SUCCESSOR UPON THE BOARD OF TRUSTEES OF	
SAID ASSOCIATION SHALL FORTHWITH BECOME A MEMBER OF THIS FOUNDATION.	

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

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Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page
Name of the organization THE AOPA FOUNDATION, INC.	Employer identification numbe 20-8817225
FORM 990 REVIEW PROCESS	
IN CONJUNCTION WITH GRANT THORNTON LLP TAX SPECIALISTS, AOPA FOUNDATION	
MANAGEMENT REVIEWS THE FORM 990 WITH THE AUDIT COMMITTEE PRIOR TO	
PRESENTING THE RETURN TO OUR BOARD OF TRUSTEES FOR REVIEW.	
FORM 990, PART VI, SECTION B, LINE 12C:	
CONFLICT OF INTEREST POLICY	
THE AOPA FOUNDATION'S BOARD IS PROVIDED A WRITTEN "CODE OF ETHICS, CONFLICT	
OF INTEREST QUESTIONNAIRE AND DISCLOSURE FORM" ("FORM"). THE FORM REQUIRES	
PERSONS COVERED (OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES) TO	
ANNUALLY DISCLOSE AND UPDATE THE FORM AND PROVIDE TO LEGAL COUNSEL	
INTERESTS THAT COULD GIVE RISE TO CONFLICT(S). LEGAL COUNSEL REVIEWS THE	
ANNUAL DISCLOSURES BY ALL COVERED PERSONS. DISCLOSURES ARE REGULARLY	
MONITORED BY COUNSEL, ANY POTENTIALLY CONFLICTING OR OTHERWISE QUESTIONABLE	
RESPONSES ARE FLAGGED AND THE ETHICS POLICY IS ENFORCED.	
FORM 990, PART VI, SECTION B, LINE 15:	
PROCESS FOR DETERMINING COMPENSATION	
THE COMPENSATION FOR THE PRESIDENT IS SET BY THE BOARD OF TRUSTEES AND	
COMPENSATION COMMITTEE OF AOPA. THE BASE SALARY FOR THIS POSITION MAY BE	
ADJUSTED BY THE BOARD FROM TIME TO TIME AT ITS SOLE DISCRETION. THE	
PRESIDENT IS ALSO CONSIDERED ANNUALLY BY THE BOARD FOR AN INCENTIVE BONUS	
WHICH IS A TARGET PERCENT OF BASE SALARY. THE ACTUAL BONUS PAID IS	
DETERMINED BY THE BOARD BASED ON ITS ASSESSMENT OF THE PRESIDENT'S	
PERFORMANCE AND THAT OF THE ORGANIZATION AGAINST APPROPRIATE GOALS SET BY	
THE COMPENSATION, ORGANIZATION, AND HUMAN RESOURCES COMMITTEE AND THE	
PRESIDENT. PERIODIC INDEPENDENT REVIEWS OF THE PRESIDENT'S COMPENSATION ARE	
CONDUCTED BY OUTSIDE COMPENSATION EXPERTS TO ENSURE THAT THE COMPENSATION	
232212 10-28-22 50	Schedule O (Form 990) 202

^{2022.05000} THE AOPA FOUNDATION, INC. 01524311

Schedule O (Form 990) 2022 Name of the organization	Page 2 Employer identification number
THE AOPA FOUNDATION, INC.	20-8817225
PAID IS REASONABLE BASED ON APPROPRIATE DATA AS TO COMPARABILITY OF	
COMPENSATION PAID BY SIMILAR ORGANIZATIONS FOR POSITIONS OF SIMILAR S	COPE
OF RESPONSIBILITY. THE COMPENSATION LEVELS AND SALARY RANGES FOR OFFI	CERS
AND CERTAIN EMPLOYEES OF THE ORGANIZATION ARE ESTABLISHED BASED ON	
COMPETITIVE MARKET DATA OBTAINED THROUGH PERIODIC SALARY SURVEYS PERF	ORMED
BY OUTSIDE COMPENSATION EXPERTS ENGAGED BY THE ORGANIZATION. THESE SU	RVEYS
PROVIDE GUIDANCE FOR ESTABLISHING REASONABLE COMPENSATION RATES AS CO	MPARED
TO COMPENSATION PAID BY SIMILARLY SITUATED ORGANIZATIONS FOR POSITION	S OF
SIMILAR SCOPE OF RESPONSIBILITY. ALL POSITIONS ARE EVALUATED AND PLAC	ED IN
THE APPROPRIATE GRADES/SALARY RANGES. AN INDIVIDUAL EMPLOYEE'S SALARY	,
WITHIN THEIR ASSIGNED RANGE, VARIES DEPENDING PRIMARILY UPON EXPERIEN	CE AND
PERFORMANCE. THE ORGANIZATION HAS ADOPTED A "PAY FOR PERFORMANCE"	
PHILOSOPHY ALLOWING MANAGERS TO AWARD MERIT INCREASES BASED ON AN	
INDIVIDUAL'S PERFORMANCE AGAINST PRE-ESTABLISHED GOALS. THE ORGANIZAT	ION'S
ANNUAL MERIT INCREASE BUDGET IS APPROVED BY THE BOARD OF TRUSTEES BAS	ED ON
MARKET SURVEYS. OFFICERS AND CERTAIN EMPLOYEES ALSO PARTICIPATE IN TH	E
ORGANIZATION'S INCENTIVE PAY PROGRAM. TARGET INCENTIVE PAY AMOUNTS, A	S A
PERCENTAGE OF BASE SALARY, ARE ESTABLISHED BASED ON THE PARTICIPANT'S	
POSITION. THE ACTUAL INCENTIVE PAY AWARDED IS PROPOSED BY THE EXECUTI	VE
MANAGEMENT TEAM AND THE PRESIDENT BASED ON THEIR ASSESSMENT OF THE	
PARTICIPANT'S INDIVIDUAL PERFORMANCE AND THAT OF THE ORGANIZATION AGA	INST
PRE-ESTABLISHED GOALS. THE BOARD OF TRUSTEES AND COMPENSATION COMMITT	EE
REVIEW AND MAKE A FINAL DETERMINATION AS TO THE ACTUAL INCENTIVE AWAR	DS
PAID TO PARTICIPANTS. NONE OF THE PERSONS MENTIONED ABOVE PARTICIPATE	IN
THE DELIBERATION OF THEIR COMPENSATION ARRANGEMENT AND RECUSE THEMSEL	VES
FROM ALL OTHER DELIBERATIONS AND DISCUSSIONS RELATED TO A MATTER IN W	HICH
THEY MAY HAVE AN INTEREST. THE DELIBERATIONS AND DECISIONS OF THESE	
COMPENSATION ARRANGEMENTS ARE MAINTAINED IN CONTEMPORANEOUS DOCUMENTA	
232212 10-28-22 51	Schedule O (Form 990) 2022

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51 2022.05000 THE AOPA FOUNDATION, INC. 01524311

Name of the organization

THE AOPA FOUNDATION, INC.

WITH OUR HUMAN RESOURCES DEPARTMENT.

AFI DID NOT COMPENSATE ANY CEO, OFFICERS, AND/OR KEY EMPLOYEES DURING THE

YEAR, AS A RESULT, DID NOT HAVE A PROCESS IN PLACE FOR DETERMINING

COMPENSATION FOR THOSE AFOREMENTIONED POSITIONS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT

VA,WI,WV

FORM 990, PART VI, SECTION C, LINE 19:

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

THE ORGANIZATION DOES MAKE AVAILABLE ITS CONFLICT OF INTEREST POLICY,

FINANCIAL STATEMENTS, FORM 990 RETURNS, AND FORM 1023 TO THE GENERAL

PUBLIC. THE ORGANIZATION MAKES AVAILABLE ITS GOVERNING DOCUMENTS TO THE

EXTENT REQUIRED BY LAW. THE PUBLIC CAN RECEIVE COPIES BY CONTACTING THE

ORGANIZATION'S HEADQUARTERS. COPIES OF THE RETURNS CAN BE OBTAINED AT

WWW.AOPA.ORG/ABOUT-AOPA/GOVERNANCE AND OTHER PUBLIC SITES.

FORM 990, PART VII, SECTION A, COLUMN B:

HOURS WORKED FOR THE AOPA FOUNDATION, INC.

MARK BAKER, GREG COHEN, JUSTINE HARRISON, AND ERICA SACCOIA ARE

FULL-TIME EMPLOYEES OF AIRCRAFT OWNERS & PILOTS ASSOCIATION (AOPA), A

RELATED, SECTION 501(C)(4) ORGANIZATION (EIN 52-0636210), ALTHOUGH THEY

DEVOTE APPROXIMATELY TEN HOURS PER WEEK TO THE RELATED 501(C)(3) PUBLIC

CHARITY ORGANIZATION: THE AOPA FOUNDATION, INC.

232212 10-28-22

232161 09-14-22 LHA

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Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Name of the organization

Department of the Treasury Internal Revenue Service

SCHEDULE R (Form 990)

THE AOPA FOUNDATION, INC.

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

(a) Name, address, and EIN (if 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
GENERAL AVIATION STAKEHOLDERS UNLIMITED -					
88-3921187, 421 AVIATION WAY, FREDERICK, MD]				
21701	GENERAL AVIATION	DELAWARE	0.	0.	АОРА
	-				

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 Part II 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	(f) Direct controlling entity		3) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
AIRCRAFT OWNERS & PILOTS ASSOCIATION -							
52-0636210, 421 AVIATION WAY, FREDERICK, MD							
21701	MEMBERSHIP	NEW JERSEY	501(C)(4)	N/A	N/A		х
AOPA POLITICAL ACTION COMMITTEE - 56-3014117							
421 AVIATION WAY	7						
FREDERICK, MD 21701	PAC	DISTRICT OF COLUMBIA	527	N/A	АОРА		х
	7						

Schedule R (Form 990) 2022

OMB No. 1545-0047

22 **Open to Public**

Employer identification number

20-8817225

Inspection

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income			ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ^{ng} ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	lo
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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	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	i) b)(13) rolled iity?
		country)		,				Yes	No
AOPA HOLDINGS CORPORATION - 46-1036265	4								
421 AVIATION WAY									
FREDERICK, MD 21701	HOLDINGS CORP	DE	AOPA	C CORP	Ο.	0.	.00%		х
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in F	Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)		X	
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)	<u>1e</u>		
Dividends from related organization(s)			
Sale of assets to related organization(s)	1g		
Purchase of assets from related organization(s)			
Exchange of assets with related organization(s)	<u>1i</u>		
Lease of facilities, equipment, or other assets to related organization(s)		_	_
Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)	11		
n Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	-
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<u>1n</u>	X	-
Sharing of paid employees with related organization(s)		_	_
Reimbursement paid to related organization(s) for expenses	<u>1p</u>	x	
Reimbursement paid by related organization(s) for expenses			_
Other transfer of cash or property to related organization(s)			
s Other transfer of cash or property from related organization(s)	1s	X	-

2	If the answer to any of the above is	"Yes,'	' see the instructions for information on	who	o must comp	olete th	is line, i	ncluding	covered r	elationshi	ps and transaction thresh	olds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AIRCRAFT OWNERS & PILOTS ASSOCIATION	В	1,500,000.	FMV
(2) AIRCRAFT OWNERS & PILOTS ASSOCIATION	S	72,905.	FMV
(3) AIRCRAFT OWNERS & PILOTS ASSOCIATION	М	632,185.	FMV
(4) AIRCRAFT OWNERS & PILOTS ASSOCIATION	N	1,351,483.	FMV
(5) AIRCRAFT OWNERS & PILOTS ASSOCIATION	Р	3,599,262.	FMV
(6) AOPA HOLDINGS COMPANY	М	128,000.	FMV

Schedule R (Form 990) 2022 THE AOPA FOUNDATION, INC.

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)	(b)	(c)	(d)	(e)	(f)	(g)	(۲	1)	(i)	(j)	((k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are Are partne 501(org	all rs sec.	Share of	Share of	Dispr tior	opor-	Code V-UBI	Genera		entage
of entity	, ,	(state or foreign	(related, unrelated,	501(org	c)(3) s.?	total	end-of-year	tion allocat	nate tions?	amount in box 20	manag partne	_{r?} own	ership
		country)		Yes		income	assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes I	10	

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Part VII Supplemental Information

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

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