

Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation****or Section 4947(a)(1) Trust Treated as Private Foundation**

- Do not enter social security numbers on this form as it may be made public.
- Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

**2019****Open to Public  
Inspection****For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019**

Name of foundation APPLE CORPS INC		A Employer identification number 59-3075454			
Number and street (or P.O. box number if mail is not delivered to street address) 4400 BAYOU BLVD		B Telephone number (see instructions) (850) 494-2194			
City or town, state or province, country, and ZIP or foreign postal code PENSACOLA, FL 32503		C If exemption application is pending, check here ► <input type="checkbox"/>			
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D</b> 1. Foreign organizations, check here..... ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ► <input type="checkbox"/>			
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... ► <input type="checkbox"/>			
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ►\$ <u>1,007,458</u>		<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <u>(Part I, column (d) must be on cash basis.)</u>			
		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	31,000			
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	4,251	4,251		
	4 Dividends and interest from securities	25,667	25,667		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		139,160		
	8 Net short-term capital gain			6,333	
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	<b>12 Total.</b> Add lines 1 through 11	60,918	169,078	6,333	
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,200	719		481
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	611	550		61
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	5,711	5,561		150
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23	7,522	6,830		692
	25 Contributions, gifts, grants paid	74,200			74,200
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	81,722	6,830		74,892
	<b>27 Subtract line 26 from line 12:</b>				
	a <b>Excess of revenue over expenses and disbursements</b>	-20,804			
	b <b>Net investment income</b> (if negative, enter -0-)		162,248		
	c <b>Adjusted net income</b> (if negative, enter -0-)			6,333	

	<b>Part II Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	<b>1</b> Cash—non-interest-bearing				
	<b>2</b> Savings and temporary cash investments		320,829	216,564	216,564
	<b>3</b> Accounts receivable ►				
	Less: allowance for doubtful accounts ►				
	<b>4</b> Pledges receivable ►				
	Less: allowance for doubtful accounts ►				
	<b>5</b> Grants receivable				
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	<b>7</b> Other notes and loans receivable (attach schedule) ►				
	Less: allowance for doubtful accounts ►				
	<b>8</b> Inventories for sale or use				
	<b>9</b> Prepaid expenses and deferred charges				
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)				
	<b>b</b> Investments—corporate stock (attach schedule)		462,440	685,061	742,094
	<b>c</b> Investments—corporate bonds (attach schedule)				
	<b>11</b> Investments—land, buildings, and equipment: basis ►				
	Less: accumulated depreciation (attach schedule) ►				
	<b>12</b> Investments—mortgage loans				
	<b>13</b> Investments—other (attach schedule)				
	<b>14</b> Land, buildings, and equipment: basis ►				
	Less: accumulated depreciation (attach schedule) ►				
	<b>15</b> Other assets (describe ► _____)		48,800	48,800	48,800
	<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)		832,069	950,425	1,007,458
	<b>17</b> Accounts payable and accrued expenses				
	<b>18</b> Grants payable				
	<b>19</b> Deferred revenue				
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons				
	<b>21</b> Mortgages and other notes payable (attach schedule)				
	<b>22</b> Other liabilities (describe ► _____)				
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22)			0	
	<b>Foundations that follow FASB ASC 958, check here ► <input type="checkbox"/></b> <b>and complete lines 24, 25, 29 and 30.</b>				
	<b>24</b> Net assets without donor restrictions				
	<b>25</b> Net assets with donor restrictions				
	<b>Foundations that do not follow FASB ASC 958, check here ► <input type="checkbox"/></b> <b>and complete lines 26 through 30.</b>				
	<b>26</b> Capital stock, trust principal, or current funds				
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund				
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds		832,069	950,425	
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions)		832,069	950,425	
	<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions)		832,069	950,425	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	832,069
<b>2</b> Enter amount from Part I, line 27a	<b>2</b>	-20,804
<b>3</b> Other increases not included in line 2 (itemize) ►	<b>3</b>	139,160
<b>4</b> Add lines 1, 2, and 3	<b>4</b>	950,425
<b>5</b> Decreases not included in line 2 (itemize) ►	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	<b>6</b>	950,425

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Additional Data Table				
b				
c				
d				
e				
(e) Gross sales price		(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a See Additional Data Table				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2 139,160
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8				3 6,333

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

 Yes  No

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	50,510	941,862	0.053628
2017	48,392	972,724	0.049749
2016	44,951	984,380	0.045664
2015	53,123	970,582	0.054733
2014	45,219	945,750	0.047813
<b>2 Total of line 1, column (d)</b>			2 0.251587
<b>3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years</b>			3 0.050317
<b>4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5</b>			4 942,903
<b>5 Multiply line 4 by line 3</b>			5 47,444
<b>6 Enter 1% of net investment income (1% of Part I, line 27b)</b>			6 1,622
<b>7 Add lines 5 and 6</b>			7 49,066
<b>8 Enter qualifying distributions from Part XII, line 4</b>			8 74,892

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1.	1	1,622
	Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	1,622
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	1,622
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.	5	1,622
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	325
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	325
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	1,297
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	
11	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> ►	Refunded	11

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<input type="checkbox"/>	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).	<input type="checkbox"/>	Yes	No
	<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year?	<input type="checkbox"/>	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
(1)	On the foundation. ► \$ _____	(2)	On foundation managers. ► \$ _____	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach a detailed description of the activities.</i>			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	<input type="checkbox"/>	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<input type="checkbox"/>	Yes	No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<input type="checkbox"/>	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach the statement required by General Instruction T.</i>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	• By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<input type="checkbox"/>	Yes	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	► FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	<input type="checkbox"/>	Yes	No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	<input type="checkbox"/>	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<input type="checkbox"/>	Yes	No

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	13	Yes
14	The books are in care of ►RICHARD L APPLEYARD	Telephone no. ►(850) 494-2194	
Located at ►4400 BAYOU BLVD PENSACOLA FL			ZIP+4 ►32503
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here. . . . .	15	<input type="checkbox"/>
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.). . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►	1b	<input type="checkbox"/>
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? . . . . .	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . If "Yes," list the years ► 20____, 20____, 20____, 20____	2a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____	2c	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	3a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.) . . . . .	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

		<b>Yes</b>	<b>No</b>
<b>5a</b>	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945-5(d).</i>	<input type="checkbox"/>	<input type="checkbox"/> Yes
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a) Name and address</b>	<b>(b) Title, and average hours per week devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>(e) Expense account, other allowances</b>
RICHARD L APPLEYARD 765 TANGLEWOOD PENSACOLA, FL 32503	PRES DIR 0	0		
KATE VAN METER 103 FLORIDA AVE GULF BREEZE, FL 32561	DIR 0	0		
DIANE APPLEYARD 254 SEVERIN DRIVE PENSACOLA, FL 32503	DIR 0	0		
CAROLYN APPLEYARD 765 TANGLEWOOD PENSACOLA, FL 32503	DIR 0	0		
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a) Name and address of each employee paid more than \$50,000</b>	<b>(b) Title, and average hours per week devoted to position</b>	<b>(c) Compensation</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>(e) Expense account, other allowances</b>
NONE				
<b>Total number of other employees paid over \$50,000.</b>				

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	Expenses
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

1	Amount
2	
3	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities. . . . .	1a	670,607
b	Average of monthly cash balances. . . . .	1b	237,855
c	Fair market value of all other assets (see instructions). . . . .	1c	48,800
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	957,262
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	957,262
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	14,359
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	942,903
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	47,145

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign**Part XI** organizations check here ►  and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	47,145
2a	Tax on investment income for 2019 from Part VI, line 5. . . . .	2a	1,622
b	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	1,622
3	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	3	45,523
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	45,523
6	Deduction from distributable amount (see instructions). . . . .	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	7	45,523

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	1a	74,892
b	Program-related investments—total from Part IX-B. . . . .	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	74,892
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	5	1,622
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	73,270
<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.			

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				45,523
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .	465			
<b>c</b> From 2016. . . . .				
<b>d</b> From 2017. . . . .	291			
<b>e</b> From 2018. . . . .	3,642			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	4,398			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ 74,892				
<b>a</b> Applied to 2018, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2019 distributable amount. . . . .				45,523
<b>e</b> Remaining amount distributed out of corpus	29,369			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>	33,767			
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . . . .				
<b>9</b> <b>Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a. . . . .	33,767			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .	465			
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .	291			
<b>d</b> Excess from 2018. . . . .	3,642			
<b>e</b> Excess from 2019. . . . .	29,369			

**Part XIV** **Private Operating Foundations** (see instructions and Part VII-A, question 9)

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

## 1 Information Regarding Foundation Managers

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

## **2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

- a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
RICHARD L APPLEYARD  
765 TANGLEWOOD  
PENSACOLA, FL 32503  
(850) 494-2194
- b** The form in which applications should be submitted and information and materials they should include:  
WRITTEN REQUESTS ONLY
- c** Any submission deadlines:  
NONE
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  
NONE

## **Part XV    Supplementary Information (continued)**

### **3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:					
a					
b					
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	4,251	
<b>4</b> Dividends and interest from securities. . . . .			14	25,667	
<b>5</b> Net rental income or (loss) from real estate:					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b> Net income or (loss) from special events:					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue: a					
b					
c					
d					
e					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .				29,918	
<b>13</b> Total. Add line 12, columns (b), (d), and (e). . . . .					29,918
(See worksheet in line 13 instructions to verify calculations.)					

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
BOEING COMPANY	P	2019-02-25	2019-03-22
CME GROUP INC	P	2019-03-19	2019-05-03
CARNIVAL CORP	P	2019-02-25	2019-06-26
BROADCOM LTD	P	2019-02-25	2019-07-09
MERCK AND CO	P	2019-02-25	2019-07-29
TORONTO DOMINION	P	2019-02-25	2019-08-16
ASTRAZENECA PLC	P	2019-04-09	2019-09-17
TORONTO DOMINION	P	2019-02-25	2019-09-12
CHUBB LTD	P	2019-02-25	2019-10-28
MERCK AND CO	P	2019-02-25	2019-10-25

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis (g) plus expense of sale	(h) (e) plus (f) minus (g)
3,297		3,845	-548
521		536	-15
137		169	-32
2,198		2,237	-39
1,483		1,443	40
818		875	-57
863		816	47
678		699	-21
894		814	80
1,815		1,764	51

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) or (l) Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	
			-548
			-15
			-32
			-39
			40
			-57
			47
			-21
			80
			51

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
AMN ELECT POWER	P	2019-02-25	2019-11-11
DIGITAL RLTY TR	P	2019-02-25	2019-11-08
VERIZON COMM	P	2019-05-02	2019-11-08
SIMON PROP GRP	P	2019-05-21	2019-12-16
DUKE ENERGY	P	2011-06-14	2019-02-25
FT NASDAQ US MA	P	2013-05-01	2019-02-25
SOUTHERN COMP	P	2012-05-24	2019-02-25
SIMON PROP GRP	P	2004-05-03	2019-09-12
CD WEBSTER BK	P	2014-02-26	2019-03-05
CME GROUP INC	P	2019-02-25	2019-03-18

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis (h) plus expense of sale	(h) (e) plus (f) minus (g)
445		404	41
819		825	-6
1,664		1,597	67
577		689	-112
32,696		20,653	12,043
11,940		13,817	-1,877
3,705		3,475	230
1,244		373	871
40,000		40,000	1,941
2,554		2,689	-135

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) or (l) Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	
			41
			-6
			67
			-112
			12,043
			-1,877
			230
			871
			1,941
			-135

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
CME GROUP INC	P	2019-02-25	2019-03-19
CME GROUP INC	P	2019-02-25	2019-03-20
SPDR BLMBRG BR	P	2019-02-25	2019-03-21
CARNIVAL CORP	P	2019-02-25	2019-05-02
CARNIVAL CORP	P	2019-02-25	2019-05-03
CARNIVAL CORP	P	2019-02-25	2019-05-06
CME GROUP INC	P	2019-02-25	2019-05-02
CME GROUP INC	P	2019-02-25	2019-05-03
DUKE ENERGY	P	2019-04-09	2019-05-17
OPPNHMR ROCH SR	P	2019-01-22	2019-02-19

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	Depreciation allowed (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
1,016		1,076	-60
503		538	-35
3,009		2,993	16
1,204		1,295	-91
1,153		1,236	-83
109		118	-9
1,387		1,434	-47
1,735		1,793	-58
863		904	-41
3		3	

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) or (l) Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	
			-60
			-35
			16
			-91
			-83
			-9
			-47
			-58
			-41

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, <b>(a)</b> 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
OP RCH ST DUR	P	2019-01-22	2019-02-19
BOEING COMPANY	P	2019-02-25	2019-03-21
SEE ATTACHED CONTINUATION SHEETS			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis <b>(g)</b> plus expense of sale	<b>(h)</b> <b>(e)</b> plus <b>(f)</b> minus <b>(g)</b>
205		203	2
2,986		3,418	-432
919,239		779,608	139,631

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col. (h) gain minus col. (k), but not less than -0-) or <b>(l)</b> Losses (from col.(h))
<b>(i)</b> F.M.V. as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col. (i) <b>(k)</b> over col. (j), if any	
			2
			-432
			139,631

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
FIRST PRESBYTERIAN CHUR 33 E GREGORY ST PENSACOLA, FL 32502		PUBLIC	CHILD DEV CENTE	3,000
FEEDING THE GULF COAST 5709 INDUSTRIAL BLVD MILTON, FL 32583		PUBLIC	OPERATING FUND	1,200
BIG BROTHERS BIG SISTER 1149 CREIGHTON RD STE 1 PENSACOLA, FL 32504		PUBLIC	OPERATING FUND	3,000
<b>Total . . . . .</b>			► 3a	74,200

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
PATHWAYS FOR CHANGE 1211 W FAIRFIELD DR PENSACOLA, FL 32501		PUBLIC	OPERATING FUND	1,500
ARC GATEWAY 3916 N 10TH AVE PENSACOLA, FL 32503		PUBLIC	OPERATING FUND	1,000
AUTISM PENSACOLA 10001 N DAVIS HWY PENSACOLA, FL 32514		PUBLIC	OPERATING FUND	1,000
<b>Total . . . . .</b>			► 3a	74,200

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
COMM CARING AT CHRISTMA 4990 MOBILE HWY PENSACOLA, FL 32506		PUBLIC	OPERATING FUND	1,000
COUNCIL ON AGING875 ROYCE PENSACOLA, FL 32503		PUBLIC	OPERATING FUND	1,000
FIRST PRESBYTERIAN CHUR 33 E GREGORY ST PENSACOLA, FL 32502		PUBLIC	BUILDING FUND	1,000
<b>Total . . . . .</b>			► 3a	74,200

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
GULF COAST KRAKENCITY GULF BREEZE, FL 32563		PUBLIC	OPERATING FUND	1,000
SALVATION ARMY 1501 N Q ST ARMY PENSACOLA, FL 32505		PUBLIC	OPERATING FUND	1,000
SO YOUTH SPORTS ASSN 1400 W GREGORY ST PENSACOLA, FL 32502		PUBLIC	OPERATING FUND	1,000
<b>Total . . . . .</b>			► 3a	74,200

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
THE GROVE AT GLENVIEW 1421 MILWAUKEE AVE GLENVIEW, IL 60025		PUBLIC	OPERATING FUND	1,000
YMCA OF NW FLORIDA 165 E INTENDENCIA ST PENSACOLA, FL 32502		PUBLIC	OPERATING FUND	1,000
FIRST PRESBYTERIAN CHUR 33 E GREGORY ST PENSACOLA, FL 32502		PUBLIC	OPERATING FUND	12,000
<b>Total . . . . .</b>			► 3a	74,200

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
PCOLA SYMPHONY ORCHESTCITY PENSACOLA, FL 32501		PUBLIC	OPERATING FUND	9,250
STUDER COMMUNITY INSTIT 41 S ALCANIZ ST PENSACOLA, FL 32502		PUBLIC	OPERATING FUND	7,000
PCOLA CHILDRENS CHORUS 46 E CHASE ST PENSACOLA, FL 32501		PUBLIC	OPERATING FUND	6,000
<b>Total . . . . .</b>			► 3a	74,200

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
UWF HISTORIC TRUST 11000 UNIVERSITY PKWY PENSACOLA, FL 32514		PUBLIC	STORY COTTAGE	5,000
WATERFRONT RESCUE MISS 380 HERMAN ST PENSACOLA, FL 32505		PUBLIC	OPERATING FUND	5,000
COVENANT HOSPICE 5041 NORTH 9TH AVE PENSACOLA, FL 32504		PUBLIC	OPERATING FUND	4,000
<b>Total . . . . .</b>			► 3a	74,200

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
IMPACT 100P O BOX 13304 PENSACOLA, FL 32591		PUBLIC	OPERATING FUND	4,000
<b>Total . . . . .</b>			► 3a	74,200

## TY 2019 Accounting Fees Schedule

**Name:** APPLE CORPS INC

**EIN:** 59-3075454

**Software ID:** 19010080

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING	1,200	719		481

## TY 2019 Investments Corporate Stock Schedule

**Name:** APPLE CORPS INC

**EIN:** 59-3075454

**Software ID:** 19010080

### Investments Corporation Stock Schedule

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
TROWE PRICE EMERG MK STK FD	17,951	19,754
DELAWARE SM CAP CORE FD	18,393	19,370
NEUBERGER BERMAN INTL EQ FD	14,511	15,774
EDGEWOOD GRWTH FUND CL INS	11,839	14,021
PIMCO INVESTMENT GRD CR BD	30,930	31,744
CLEARBRIDGE LRG CAP GRW FD	17,197	18,840
BLACKROCK EQTY DIVIDEND FD	20,129	20,337

## TY 2019 Other Assets Schedule

**Name:** APPLE CORPS INC

**EIN:** 59-3075454

**Software ID:** 19010080

### Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
REMAINDER INTEREST	48,800	48,800	48,800

## TY 2019 Other Expenses Schedule

**Name:** APPLE CORPS INC**EIN:** 59-3075454**Software ID:** 19010080**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	5,711	5,561		150

## TY 2019 Other Increases Schedule

**Name:** APPLE CORPS INC

**EIN:** 59-3075454

**Software ID:** 19010080

Description	Amount
CAPITAL GAINS PER BOOKS	139,160

## TY 2019 Taxes Schedule

**Name:** APPLE CORPS INC

**EIN:** 59-3075454

**Software ID:** 19010080

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FEDERAL TAXES	550	550		

## TY 2019 Taxes Schedule

**Name:** APPLE CORPS INC

**EIN:** 59-3075454

**Software ID:** 19010080

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
STATE ANNUAL CORP FEE	61			61

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

► Attach to Form 990, 990-EZ, or 990-PF.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2019**Name of the organization  
APPLE CORPS INCEmployer identification number  
59-3075454**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

501(c)( ) (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**

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 other 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<sup>1</sup>/<sub>3</sub> support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), 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, 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. . . . . ► \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
APPLE CORPS INCEmployer identification number  
59-3075454

<b>Part I</b>		<b>Contributors</b> (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	RICHARD L APPLEYARD 765 TANGLEWOOD  PENSACOLA, FL 32503	\$ 30,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
2	JOHN AND ELEANOR APPLEYARD 741 GERHARDT DRIVE  PENSACOLA, FL 32503	\$ 1,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II for noncash contributions.)

Name of organization  
APPLE CORP INC

Employer identification number

59-3075454

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

