

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0047

Open to Public Inspection

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Internal Revenue Service For calendar year 2019 or tax year beginning and ending A Employer identification number Name of foundation Apseed Early Childhood 81-3311675 Education, Inc. Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 704-647-9621 118-B South Main St City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here Salisbury NC 28144 Check all that apply. Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the X Address change Name change 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization If private foundation status was terminated under section 507(b)(1)(A), check here Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust X Cash Fair market value of all assets at J Accounting method If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col (c), 291,906 line 16) ▶ (Part I, column (d), must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal income purposes the amounts in column (a) (see instructions)) books 251,775 Contributions, gifts, grants, etc., received (attach schedule) 1 if the foundation is **not** required to attach Sch. H. 2 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line fia 0 Capital gain net income (from Part IV, line 2) 7 0 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances т_{ир., 'д}, ј ' ј ' е аниг' (ј b Less Cost of goods sold Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 251,775 0 ol 12 Total Add lines 1 through 11 Compensation of officers, directors, trustees, etc 13 32,000 14 Other employee salaries and wages 2,448 15 Pension plans, employee benefits Legal fees (attach schedule) See Stmt 1 1,350 16a Stmt 2 3,660 b Accounting fees (attach schedule) Stmt 3 2,262 Other professional fees (attach schedule) C 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 780 21 Travel, conferences, and meetings 22 Printing and publications 23 207,936 Other expenses (att. sch.) 24 Total operating and administrative expenses. 0 250,436 Add lines 13 through 23 0 Contributions, gifts, grants paid 250,436 0 0 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 1,339 Excess of revenue over expenses and disbursements 0 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

4	Part II	Balance Sheets Attached schedules and amounts in the description colu	mn	Beginning of year	End of	year
_		should be for end-of-year amounts only (See instruction	s)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		266,281	291,906	291,906
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶			•	
		Less allowance for doubtful accounts ▶		4,000		
- 1	4	Pledges receivable ▶			ŧ.	
-		Less allowance for doubtful accounts ▶				
-	5	Grants receivable				
-	6	Receivables due from officers, directors, trustees, and other				
-		disqualified persons (attach schedule) (see				
-		instructions)				
-	7	Other notes and loans receivable (att schedule)				
		Less allowance for doubtful accounts ▶	0		ĺ	
ß	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges		20,309		
Š	10a	Investments – U.S. and state government obligations (attach schedule)			1	
	b	Investments – corporate stock (attach schedule)				
	c	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	••	Less accumulated depreciation (attach sch.)			ĺ	
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)		Ì		
1	15	Other assets (describe)			
	16	Total assets (to be completed by all filers – see the	,			
		instructions Also, see page 1, item I)		290,590	291,906	291,906
ヿ	17	Accounts payable and accrued expenses				
	18	Grants payable				······
န္ဓ	19	Deferred revenue				
ĕI	20	Loans from officers, directors, trustees, and other disqualified persons				
abilities	21	Mortgages and other notes payable (attach schedule)				
إث	22	Other liabilities (describe)			······································
	23	Total liabilities (add lines 17 through 22)	,	0	0	
+		Foundations that follow FASB ASC 958, check here	▶ X			·
s		and complete lines 24, 25, 29, and 30.				
ces	24	Net assets without donor restrictions		290,590	291,906	
曺	25	Net assets with donor restrictions			,	
or Fund Balar		Foundations that do not follow FASB ASC 958, check here	▶ 🗀		ľ	
힑		and complete lines 26 through 30.	الــا			
괴	26	Capital stock, trust principal, or current funds				
히	27	Paid-in or capital surplus, or land, bldg , and equipment fund				
۲ ايد	28	Retained earnings, accumulated income, endowment, or other funds				
SS	29	Total net assets or fund balances (see instructions)		290,590	291,906	
Net Assets	30	Total liabilities and net assets/fund balances (see				***************************************
影	50	instructions)		290,590	291,906	
┪	Part II	****	ces			
		net assets or fund balances at beginning of year – Part II, column (a), line		oree with		
1		f-year figure reported on prior year's return)	Lo (must e	igroo with	1	290,590
2					2	1,339
		amount from Part I, line 27a			3	1,339
		increases not included in line 2 (itemize)			4	291,929
		nes 1, 2, and 3 ases not included in line 2 (itemize) ► See Statement 5			5	231,323
		ases not included in line 2 (itemize) $ ightharpoonup 366 3 Caccata 11 3 and 11 3 a$		line 29	6	291,906
0	rotal	iet assets or iunu palances at enu or year (line 4 minus line 5) – Part II, co	ימווווו (מ),	mic 23		231,300

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Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income			· •
	ee the kind(s) of property sold (for example, real estate warehouse, or common stock, 200 shs MLC Co)	g, 	(b) How acquired P – Purchase D – Donation	(c) Date acquir (mo , day, yr	, ,,
1a N/A					
b					
С					
d					
е		,			
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		other basis ense of sale		n) Gain or (loss) plus (f) minus (g))
_a					
b			···		
С					
<u>d</u>					
Complete and for constant about	b and award by the form	 			
Complete only for assets showing	g gain in column (h) and owned by the four				s (Col. (h) gain minus out not less than -0-)or
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		ses (from col. (h))
a					
b					<u> </u>
			-	<u> </u>	<u> </u>
	-				
Capital gain net income or (net ca	If gain, also enter in If (loss), enter -0- in	Part I, line 7		2	
	s) as defined in sections 1222(5) and (6) column (c) See instructions. If (loss), enter	er -0- ın		3	
	nder Section 4940(e) for Reduc	ed Tay on Net In	vestment Incon	 	
	foundations subject to the section 4940(a)				
If section 4940(d)(2) applies, leave thi	•	tax of flet investine	Killome)		N/A
			_		
	on 4942 tax on the distributable amount or under section 4940(e). Do not complete t	• •	e period?		∐ Yes ∐ No
1 Enter the appropriate amount in e	each column for each year, see the instruc	tions before making a	any entries		
(a) Base penod years Calendar year (or tax year beginning i	(b) Adjusted qualifying distribution	s Net value	(c) e of nonchantable-use asse	ets (c	(d) Distribution ratio of (b) divided by cot (c))
2018					
2017					
2016					
2015			<u> </u>		
2014					
2 Total of line 1, column (d)				2	
-	5-year base period – divide the total on line on has been in existence if less than 5 yea			3	
A. Enter the net value of noncharitals	ole-use assets for 2019 from Part X, line 5			4	
				5	
5 Multiply line 4 by line 3					
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	<u></u>
8 Enter qualifying distributions from If line 8 is equal to or greater than	Part XII, line 4 line 7, check the box in Part VI, line 1b, a	nd complete that part	t using a 1% tax rate	8 See the	
Part VI instructions		F			

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	see ins	truction	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	I			
	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	1			
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	-			
	Part I, line 12, col (b)	ĺ			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			<u> </u>
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0
6	Credits/Payments				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a	1			
b	Exempt foreign organizations – tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c	1			
d	Backup withholding erroneously withheld 6d	-			
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax ▶ Refunded ▶	11			
Pa	rt 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			Yes	No
	participate or intervene in any political campaign?		1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition		1b	ļ	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1		
	published or distributed by the foundation in connection with the activities		ŀ		
C	Did the foundation file Form 1120-POL for this year?		1c	ļ	X
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 ▶ \$	-			
е	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?		2	ļ	X
	If "Yes," attach a detailed description of the activities				
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? If "Yes," attach a conformed copy of the changes		3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4-	4a	ļ	X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A		Ļ	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	ļ	X
	If "Yes," attach the statement required by General Instruction T				
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		1		
	conflict with the state law remain in the governing instrument?		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions None				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
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 tax year beginning in 2019? See instructions for Part XIV. If "Yes,"				
	complete Part XIV		9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10	X	

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Pź	rt VII-A Statements Regarding Activities (continued)					
	•				Yes	No
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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applicatio	u,		13	X	
	Website address ▶ apseed.org					
14	The books are in care of Seg Alcorn Tele	phone no	704-6	47-	962	1
	118-B South Main St.					
	Located at ▶ Salisbury NC	ZIP+4 ▶	28144			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here				1	▶ 📋
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 1	5			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country					
Pa	rt 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?	Yes	X No		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		_		1	
	disqualified person?	Yes	X No		I	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		1	
	(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)?	Yes	X No		I	
	(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)	Yes	X No		I	
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in				1	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		▶ 🗌			
С	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?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				1	
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines				I	
	6d and 6e) for tax year(s) beginning before 2019?	Yes	X No		1	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		i		I	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		/		#	
	all years listed, answer "No" and attach statement – see instructions.)		N/A	2b	<u> </u>	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				I	
	▶ 20 , 20 , 20 , 20				1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				1	
	at any time during the year?	Yes	X No		Ī	
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or				I	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				I	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of				I	
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the		37 / 5		ŧ	
	foundation had excess business holdings in 2019)		N/A	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	_			ŧ	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201	9?	<u></u>	4b		<u>X</u>
			· F	om 99	U-PF	(2019)

Form 990-PF (2019)

Total number of other employees paid over \$50,000

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Part VIII	Information About Officers, Directors, Trustees, Fo	oundation Managers, Highly Paid E	mployees,
3 Five him	and Contractors (continued) hest-paid independent contractors for professional services. See in	astructions. If none, enter "NONE."	
<u> </u>	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			_
Total number	of others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		<u> </u>
	on's four largest direct chantable activities during the tax year. Include relevant statistical info	mation such as the number of	
organizations ar	d other beneficianes served, conferences convened, research papers produced, etc		Expenses
1 Part	nered with WIC to distribute Seedli	ings.	
			53,773
2 Part	nered with York County SC School Sy	stem to distribute	
	lings via NC Pre-K programs.		
			43,939
	nered with Rowan County NC HEadstar	rt to distribute	
seed	lings and monitor progress.		42,321
4 Part	nered with Chester County SC School	. System to	
	ribute Seedlings via NC Pre-K progr		
			27,758
Part IX-B	Summary of Program-Related Investments (see in		
1 N/A	largest program-related investments made by the foundation during the tax year on lines 1 a	nd 2	Amount
1 N/A			
2			
All other program	-related investments. See instructions		

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Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

Pi	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposès		
а	Average monthly fair market value of securities	_1a_	0
b	Average of monthly cash balances	1b	230,125
С	Fair market value of all other assets (see instructions)	_1c	0
d	Total (add lines 1a, b, and c)	_1d	230,125
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0]	
2	Acquisition indebtedness applicable to line 1 assets	_ 2	0
3	Subtract line 2 from line 1d	3	230,125
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	3,452
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	226,673
6	Minimum investment return. Enter 5% of line 5	6	11,334
Pi	rt Xi Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	unda	ations
	and certain foreign organizations, check here ▶ X and do not complete this part)		
	Minimum investment return from Part X, line 6	1	
2a	Tax on investment-income-for-2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI*) 2b		
С	Add lines 2a and 2b	_2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
P ₂	rt XII Qualifying Distributions (see instructions)		<u> </u>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	_1a	0
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	204,884
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	_3a	
þ	Cash distribution test (attach the required schedule)	_3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	_4_	204,884
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	204,884
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n	

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Excess from 2015 Excess from 2016 Excess from 2017 Excess from 2018 Excess from 2019

<u> </u>	ert XIV Private Operating Fou	indations (see ins	tructions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling or d			_	0.	9/07/16
	foundation, and the ruling is effective for 2			I in section X 49		
b	Check box to indicate whether the foundat		g foundation described		942(j)(3) or 4942	(1)(2)
2a	Enter the lesser of the adjusted net	Tax year	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(e) Total
	income from Part I or the minimum	(a) 2019	(b) 2016	(6) 2011	(4) 2010	
	investment return from Part X for	1 x o	101			101
_	each year listed	1 7 0	101 86		-	86
b	85% of line 2a					
С	Qualifying distributions from Part XII,	204,884	217,442	46,898	28,880	498,104
	line 4, for each year listed	204,884	211,442	40,030	20,000	450,104
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c	204,884	217,442	46,898	28,880	498,104
3	Complete 3a, b, or c for the	204,004	227,412		20,000	
3	alternative test relied upon					
а	"Assets" alternative test – enter					
a	(1) Value of all assets	291,906	290,590	147,538	5,106	735,140
	(2) Value of assets qualifying under			•		
	section 4942(j)(3)(B)(i)	291,906	290,590	147,538	5,106	735,140
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed					
С	"Support" alternative test – enter	, ,				
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties) N/A					
	(2) Support from general public	_				
	and 5 or more exempt					
	organizations as provided in					
	section 4942(J)(3)(B)(III) N/A					
	(3) Largest amount of support from an exempt organization N/A	İ				
De	(4) Gross investment income N/A set XV Supplementary Inform	nation (Complete	this part only if th	ne foundation had	1 \$5 000 or more i	n assets at
F.ø	any time during the ye	•	-	ic roundation nat	2 4 0,000 01 111010 11	400010 41
1	Information Regarding Foundation Mar		10110.7			
a	List any managers of the foundation who h	-	han 2% of the total con	tributions received by t	he foundation	
_	before the close of any tax year (but only r					
	Greg & Missie Alcorn					\$25,000
b	List any managers of the foundation who co	own 10% or more of the	stock of a corporation	or an equally large po	rtion of the	
	ownership of a partnership or other entity)	of which the foundation	has a 10% or greater	ınterest		
	N/A					
2	Information Regarding Contribution, G					
	Check here ▶ X if the foundation only					
	unsolicited requests for funds. If the found	ation makes gifts, grant	s, etc , to individuals or	organizations under of	ther conditions,	
	complete items 2a, b, c, and d See instruc					
а	The name, address, and telephone number	er or email address of th	ne person to whom app	lications should be add	ressed.	
	See Statement 7					
	<u> </u>				<u> </u>	
b	The form in which applications should be s N/A	submitted and information	on and materials they s	nould include.		•
	······································					
С	Any submission deadlines N/A					
	Any restrictions or limitations on awards, s	uch as by geographical	areas, chantable fields	s, kinds of institutions of	or other	
u	factors	aan ac ay goograpinoa		.,		
	N/A					

Part XV Supplementary Information (co	ntinued)			
Part XV Supplementary Information (cc 3 Grants and Contributions Paid During t	he Year or Approved for	Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor		 	
a Paid during the year				
N/A				
			'	
	•			
			ĺ	
Total			▶ 3a	
b Approved for future payment			Ja	
N/A				
			1	
·			.	~
				-
Total			▶ 3b	
				

Part XVIA	Analysis of income-Producing Activ	AIFIE2				
	nunts unless otherwise indicated		ed business income (b) Amount	(c) Exclusion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program sei	rvice revenue	Business code	Amount	code	Amount	(See instructions)
a		<u> </u>				
b				ļ		
С						
						
f						
g Fees an	d contracts from government agencies					
	dues and assessments					
	avings and temporary cash investments		,			
	nd interest from securities					
	come or (loss) from real estate					
	anced property					
	t-financed property					
	come or (loss) from personal property			<u> </u>		
7 Other invest			_ ••	<u> </u>		
	s) from sales of assets other than inventory					
=	or (loss) from special events					
	or (loss) from sales of inventory			<u> </u>		
				 		
	ue a			 		
				_		
				<u> </u>		
				<u> </u>		
	d columns (b), (d), and (e)		0		0	0
IZ Sublotal Ad	d columns (b), (d), and (e)	1		I	•	•
	no 12 polymon (h) (d) and (a)				13	0
13 Total. Add l	ine 12, columns (b), (d), and (e)				13	0
13 Total. Add li See worksheet	in line 13 instructions to verify calculations)	complishme	ent of Exempt Pu	rnnses		0
13 Total. Add le See worksheet Part XVI-B	n line 13 instructions to verify calculations) Relationship of Activities to the Acc					0
13 Total. Add li See worksheet	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	n line 13 instructions to verify calculations) Relationship of Activities to the Acc	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
13 Total. Add le See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
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Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
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Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	
Total. Add li See worksheet Part XVI-B Line No.	Relationship of Activities to the Acc Explain below how each activity for which income is	reported in colu	ımn (e) of Part XVI-A	contribute	d importantly to the	

Part 7	XVII	Information Regardance Organizations	arding Tra	insfers To an	d Transaction	ns and Relationships Wit	h Noncharitable Exe	mpt	
1 Did	the ora		rectly engage	in any of the follo	wana wath any oth	er organization described		Yes	No
		01(c) (other than section		-	•	•		1.00	
	ganızatıo		1 50 1(0)(5) 61	gariizadoris) or iri	3000011 027, 1612	ang to pontour			ŧ
		om the reporting founda	ation to a non	charitable exemp	t organization of				Ī
	Cash	on the reporting location		onamable exemp	t organization of		1a(1)		x
	Other a	ecate					1a(2)		X
	her trans						1-1-1-2		<u> </u>
		of assets to a noncharita	hle evemnt o	roanization			1b(1)		x
		ses of assets from a no	•	-	n		1b(2)		X
		of facilities, equipment,			11		1b(3)		X
		ursement arrangements	or other asse				1b(4)		X
		or loan guarantees					1b(5)		X
		nance of services or me	mbership or f	undraising solicita	ations		1b(6)		X
		acılıtıes, equipment, ma	•	•			1c		X
	•	• •	•	•		(b) should always show the fair r		<u>. </u>	
				_		e foundation received less than fail			
		•	-	• •	_	e goods, other assets, or services			
(a) Lı		(b) Amount involved		e of nonchantable exe		1 "'	transactions, and sharing arrangen	nents	
I/A									
•									
	-								
•									
	_								
	_								
		<u></u>							
2a Is t	he found	ation directly or indirectl	y affiliated wi	th, or related to, o	ne or more tax-ex	cempt organizations	_		
des	cribed in	section 501(c) (other th	nan section 50	01(c)(3)) or in sec	tion 527?		Y	es X	No
b If "\	Yes," con	nplete the following scho	edule						
1-		(a) Name of organization		(b) Type of	organization	(c) Descri	ption of relationship		
N/2	<u> </u>			<u>_</u>					
				_ _					
									
						ules and statements, and to the best of my iich preparer has any knowledge			
. 1		1	_				May the IRS discuss this r with the preparer shown be		[
ign			111					Yes	No No
lere		h/ ///			ı 1.	12/2000 -			
	_	/h/ "1" C	w				ident		
	Sign	alure of officer or trustee			D≱te	Title	· 		
	Print/	pe preparer's name			Preparer's signatur	re 1 = 1 =	Date	Check	ıf
aid	_				1 / A/a	in Rolling CPA		self-emp	ployed
reparer		an Rutherford			<u> </u>		10/28/20		
se Only	Firm's r			herford,		<u>. </u>	PTIN P00206		
	Firm's a			St Ste 30			Firm's EIN ▶ 20-184		
	1	Salis	purv.	NC 28144	4		Phone no 704-63	3-4 (ubU

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2019

Name of the organization

Apseed Early Childhood Education, Inc.

Employer identification number

81-3311675

Organization type (check one) Section: Filers of: 501(c)(Form 990 or 990-EZ) (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 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 331/3% 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 ! (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

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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

\$

Apseed Early Childhood

Name of organization

Employer identification number 81-3311675

Part I . Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

, ,			-
(a) No.	(b) (c) Name, address, and ZIP + 4 Total contributions		(d) Type of contribution
1	FTC Fred Stanback 220 N Tryon St Charlotte NC 28202	\$ 50,000	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	FTC Springsteen Foundation 220 N Tryon St Charlotte NC 28202	\$ 50,000	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	Prim Family Foundation 101 N Cherry St, Ste 501 Winston Salem NC 27101	\$ 50,000	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
4	Foundation for the Carolinas 220 N Tryon St Charlotte NC 28202	\$ 28,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	FTC Greg and Missie Alcorn 220 N Tryon St Charlotte NC 28202	\$ 25,000	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	Margaret C Woodson Foundation 220 N Tryon St Charlotte NC 28202	\$ 15,000	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Apseed Early Childhood

Employer identification number

81-3311675

Part I	. Contributors (see instructions). Use duplicate copies of	Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Fidelity - John and Laura Spencer 220 N Tryon St Charlotte NC 28202	\$ 10,000	Person X Payroll Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No. 8	FTC Salisbury Rowan Comm Fdn 220 N Tryon St Charlotte NC 28202	Total contributions \$ 10,000	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
100.		\$	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
1,50		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	ivanie, audiess, and Eif 7 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

115PF Apseed Early Childhood 81-3311675 FYE: 12/31/2019	Federal Statements	ents		10/28/2020 2:07 PM
	Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees	Line 16a - Lega	al Fees	
Description Indirect Legal Fees Total	Total Inve	Net Investment	Adjusted Net	Charitable Purpose
15	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	e 16b - Accour	nting Fees	
Description Indirect Accounting Fees Total	Total Inve	Net Investment	Adjusted Net	Charitable Purpose
State	Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees	c - Other Profe	essional Fees	:
Description Contracted services Total	**	Net Investment	Adjusted Net	Charitable Purpose
-				
endi				
				1-3

81-3311675 FYE: 12/31/2019	Federal	Federal Statements		10/28/2020 2:07 PM
-	Statement 4 - Form 990-PF,	990-PF, Part I, Line 23 - Other Expenses	Expenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses Apseed purchases Advertising and Marketing Bank Service Charges Dues & Subscriptions Supplies Telephone Org Resgistration fees Total	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	y	S S	
و سود ^{در} نه دودن د شب الاستثمارية.				. 4

115PF Apseed Early Childhood 81-3311675

Federal Statements

10/28/2020 2:07 PM

FYE: 12/31/2019

Statement 5 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	AI	mount
Misc PY adjust	\$	_23
Total	\$	23

Name and Address Address Address Address Title Address Title Hours Address Title Hours Address Title Hours Compensation Benefits 18-B Scuth Main St. President 10.00 0 118-B Scuth Main St. President 10.00 0 10-B Alboury NC 28144 Nice Preside 10.00 0 10-B Alboury NC 28144 Director 10.00 0 10-B Alboury NC 28144 Director 10.00 0 10-B Alboury NC 29144 Director 10.00 0 10-B Alboury NC 29144 Director 10.00 0 10-B Alboury NC 29144 Director 10.00 0 10-B Alboury NB 28144 Director 10.00 0 10-B Alboury NB	Federal Statements	10/28/2020 2:07 PM
Title President Vice Preside Director Director Director	-, Part VIII, Line 1 - List of Officers, Directors, Trus	stees, Etc.
Vice Preside Vice Preside Director Director Director		Benefits Expenses
Vice Preside rive Director Director '	10.00	 °
Drive Director Director	Preside	0 0
Jr Director 44 birector 7.		0 0
28144		0 0
		0
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		9

115PF Apseed Early Childhood

Federal Statements

10/28/2020 2:07 PM

81-3311675 FYE: 12/31/2019

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount	
Greg & Missie Alcorn	\$ 25,000	
Total	\$ 25,000	

Statement 7 - Form 990-PF, Part XV, Line 2a - Name, Address and Email for Applications

Description

Greg Alcorn 704-647-9621 118-B South Main Street Salisbury NC 28144 greg.alcorn@apseed.org