

Return of Organization Exempt From Income Tax

2020

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter social security numbers on this form as it may be made public.

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

A For the 2020 calendar year, or tax year beginning

, 2020, and ending

20

B Check if applicable:	C Name of organization: American Eagle Foundation	D Employer identification number: 50-1652023
<input type="checkbox"/> Address change	E Doing business as:	E Telephone number:
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address): P O Box 333	F Room/Suite:
<input type="checkbox"/> Initial return	G City or town, state or province, country, and ZIP or foreign postal code: Pigeon Forge, TN 37868	H Gross receipts:
<input type="checkbox"/> First return/amended	I	\$ 1,635,341
<input type="checkbox"/> Amended return	J	H(a) Is this a going concern foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Application pending	K	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
	L	* Note: Check a box. See instructions.
	M	H(c) Group exemption number:
	N	O State of legal domicile: TN

I Tax-exempt status: 501(c)(3) 501(c)(4) (need no.) 4947(a)(1) or 927

J Website: ► www.eagles.org

K Form of organization: Corporation Trust Association Other ►

L Year of formation: **1985**

Part I Summary

1 Briefly describe the organization's mission or most significant activities: **To continue the caring, protection & restoration of the bald eagle & other endangered bird species and to educate the public about these birds.**

- 2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets
- 3 Number of voting members of the governing body (Part VI, line 1a) **3**
- 4 Number of independent voting members of the governing body (Part VI, line 1b) **3**
- 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) **27**
- 6 Total number of volunteers (estimate if necessary)
- 7a Total unrelated business revenue from Part VIII, column (C), line 12 **0**
- b Net unrelated business taxable income from Form 990-T, Part I, line 11 **0**

Activities & Governance

Revenue

Expenses

Net Assets/
Fund Balances

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,130,728	1,106,109
9 Program service revenue (Part VIII, line 2g)	1,601,247	29,650
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		473,347
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10c, and 11e)	18,441	(3,485)
12 Total revenue - add lines 8 through 11 (must equal Part VII, column (A), line 12)	2,750,416	1,605,621
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	193,882	194,336
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	883,231	951,251
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ►	55,422	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	626,509	470,369
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,703,622	1,615,956
19 Revenue less expenses. Subtract line 18 from line 12	1,046,794	(10,335)

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	10,078,212	10,023,219
21 Total liabilities (Part X, line 28)	53,934	9,276
22 Net assets or fund balances. Subtract line 21 from line 20	10,024,278	10,013,943

Part II Signature Block

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

Sign
Here

James Rogers

Signature of officer

Date

James Rogers, Treasurer

Type or print name and title

Paid
Preparer
Use Only

Print/Type preparer's name bill Gosnell CPA	Preparer's signature 	Date 07-22-2021	Check <input type="checkbox"/> + PTIN self-employed #00951332
Preparer's name ► Hughes & Gosnell, CPA's	Firm's EIN ►		
Firm's address ► 3814 Powers Street Ste C Knoxville TN 37917	Phone no. 865-688-0351		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III

- 1 Briefly describe the organization's mission:

To continue the caring, protection & restoration of the bald eagle & other endangered bird species and to educate the public about these birds.

- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 1,347,960 including grants of \$ 194,336) (Revenue \$ _____)
To continue the caring, protection and restoration of the bald eagle and other endangered bird species and to educate the public about these birds.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

- 4d Other program services (Describe on Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► 1,347,960

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	19
1b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	27	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8888-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7a		X
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c		X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	9a		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9b		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note:	See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c	Enter the amount of reserves on hand	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI **Section A. Governing Body and Management**

		1a	1b	2	3	4	5	6	7a	7b	8	9	X	X
		Yes	No											
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O													
1b	Enter the number of voting members included in line 1a, above, who are independent													
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?													
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?													
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?													
5	Did the organization become aware during the year of a significant diversion of the organization's assets?													
6	Did the organization have members or stockholders?													
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?													
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?													
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:													
a	The governing body?													
b	Each committee with authority to act on behalf of the governing body?													
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O													

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?														
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?														
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?														
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.														
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13														
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?														
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done														
13	Did the organization have a written whistleblower policy?														
14	Did the organization have a written document retention and destruction policy?														
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?														
a	The organization's CEO, Executive Director, or top management official														
b	Other officers or key employees of the organization														
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).														
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?														
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?														

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► Tennessee
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- Own website Another's website Upon request Other (explain on Schedule O)
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ► Jessica Hall (865)429-0157, P O Box 333, Pigeon Forge, TN 37868

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (salary hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Officer	President Principal Officer	Director Trustee	Key Employee	Other Employee	Former Officer Director Trustee			
(1) Frank Bass III Director	2.00	X						0	0	0
(2) Mike Jones Director	2.00	X						0	0	0
(3) Courtney Lewis Director	2.00	X						0	0	0
(4) John Stokes Director	2.00	X						0	0	0
(5) Jason Booth Director	2.00	X						0	0	0
(6) James Marietta President	40.00	X	X	X				0	0	0
(7) Sally Moore Secretary	40.00	X	X					0	0	0
(8) James Rogers Treasurer	40.00	X	X					0	0	0
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (not any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trusted)	(D) Reportable compensation from the organization (W-2/H-990-MISC)		(E) Reportable compensation from related organizations (W-2/H-990-MISC)		(F) Estimated amount of other compensation from the organization and related organizations
			Officer	Director	Other	Key employee	
(15)							
(16)							
(17)							
(18)							
(19)							
(20)							
(21)							
(22)							
(23)							
(24)							
(25)							
1b Subtotal							
c Total from continuation sheets to Part VII, Section A							
d Total (add lines 1b and 1c)							0
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization							0
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual							
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual							
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person							

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		

Part VIII**Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII Contributions, Gifts, Grants
and Other Similar Amounts

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from test under sections 512-514
1a	Federated campaigns	1a			
b	Membership dues	1b			
c	Fundraising events	1c			
d	Related organizations	1d			
e	Government grants (contributions)	1e			
f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,106,109		
g	Noncash contributions included in lines 1a-1f	1g	\$ 46,500		
h	Total. Add lines 1a-1f		1,106,109		

Program Service
Revenue

		Business Code		
2a	Bird Shows	713990	24,845	24,845
b	Show Travel Reimb.	713990	4,805	4,805
c				
d				
e				
f	All other program service revenue			
g	Total. Add lines 2a-2f		29,650	

Other Revenue

3	Investment income (including dividends, interest, and other similar amounts)		473,347	473,347	
4	Income from investment of tax-exempt bond proceeds				
5	Royalties				
6a	Gross rents	(i) Real	(j) Personal		
b	Less: rental expenses	6b			
c	Rental income or (loss)	6c			
d	Net rental income or (loss)				
7a	Gross amount from sales of assets other than inventory	(i) Securities	(j) Other		
b	Loss: cost or other basis and sales expenses	7b			
c	Gain or (loss)	7c			
d	Net gain or (loss)				
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
b	Less: direct expenses	8b			
c	Net income or (loss) from fundraising events				
9a	Gross income from gaming activities. See Part IV, line 19				
b	Less: direct expenses	9b			
c	Net income or (loss) from gaming activities				
10a	Gross sales of inventory, less returns and allowances	10a	26,235		
b	Less: cost of goods sold	10b	29,720		
c	Net income or (loss) from sales of inventory			(3,485)	(3,485)

Miscellaneous
Revenue

		Business Code		
11a				
b				
c				
d	All other revenue			
e	Total. Add lines 11a-11d			
12	Total revenue. See instructions		1,605,621	499,512
			0	0

Part VIII**Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts					
1a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c				
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	1,106,109			
g Noncash contributions included in lines 1a-1f	1g	\$ 46,500			
h Total. Add lines 1a-1f		► 1,106,109			
Program Service Revenue		Business Code			
2a Bird Shows	713990	24,845	24,845		
b Show Travel Reimb	713990	4,805	4,805		
c Investment Income/Loss	523000	473,347	473,347		
d					
e					
f All other program service revenue					
g Total. Add lines 2a-2f		► 502,997			
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts)					
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	6a				
b Less: rental expenses	6b				
c Rental income or (loss)	6c				
d Net rental income or (loss)		►			
7a Gross amount from sales of assets other than inventory	7a				
b Less: cost or other basis and sales expenses	7b				
c Gain or (loss)	7c				
d Net gain or (loss)		►			
8a Gross income from fundraising events (not including 5 of contributions reported on line 1c). See Part IV, line 18	8a				
b Less: direct expenses	8b				
c Net income or (loss) from fundraising events		►			
9a Gross income from gaming activities. See Part IV, line 19	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities		►			
10a Gross sales of inventory, less returns and allowances	10a	26,235			
b Less: cost of goods sold	10b	29,720			
c Net income or (loss) from sales of inventory		► (3,485)	(3,485)		
Miscellaneous Revenue		Business Code			
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		►			
12 Total revenue. See instructions		► 1,605,621	499,512	0	0

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX.

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	194,336	194,336		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	812,832	690,908	81,283	40,641
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	72,732	72,732		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,076	1,766	207	103
9 Other employee benefits	63,611	54,069	6,361	3,181
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal	7,906		7,906	
c Accounting	19,640		19,640	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	6,547			6,547
13 Office expenses	17,483	12,115	4,904	564
14 Information technology	25,935	22,045	2,593	1,297
15 Royalties				
16 Occupancy	36,001	36,001		
17 Travel	29,528	29,528		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	171	171		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	39,961		39,961	
23 Insurance	79,516	68,475	7,952	3,089
24 Other expenses. Itemize expenses not covered above (list miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Bird Food & Veterinary Care	70,418	70,418		
b Special Miscellaneous Expenses	9,831	9,831		
c Video Equip/Busn Development	2,375	1,188	1,187	
d				
e All other expenses	125,057	84,377	40,680	
25 Total functional expenses. Add lines 1 through 24e	1,615,956	1,347,960	212,574	55,422
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule D contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
	1 Cash - non-interest-bearing	745,949	1	540,012
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(l)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	104,953	8	104,953
	9 Prepaid expenses and deferred charges		9	
Assets	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,152,487		
	b Less: accumulated depreciation	295,703	10c	855,784
	11 Investments - publicly traded securities	8,918,100	11	8,468,326
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	54,144	15	54,144
	Total assets. Add lines 1 through 15 (must equal line 33)	10,078,212	16	10,023,219
	17 Accounts payable and accrued expenses	46,144	17	9,276
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
Liabilities	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	7,790	23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	Total liabilities. Add lines 17 through 25	53,934	26	9,276
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ► <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	10,024,278	27	222,058
	28 Net assets with donor restrictions		28	9,791,985
	Organizations that do not follow FASB ASC 958, check here ► <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	Total net assets or fund balances	10,024,278	32	10,013,943
	Total liabilities and net assets/fund balances	10,078,212	33	10,023,219

Part XI**Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12)	1	1,605,621
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,615,956
3 Revenue less expenses. Subtract line 2 from line 1	3	(10,335)
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,024,278
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain on Schedule O)	9	0
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	10,013,943

Part XII **Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

Yes No

- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

2a X

Separate basis Consolidated basis Both consolidated and separate basis

- b Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

2b X

Separate basis Consolidated basis Both consolidated and separate basis

- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of

the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

2c X

- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

3a X

- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

3b X

Department of the Treasury
Internal Revenue Service

Name of the organization

American Eagle Foundation

Employer identification number

58-1652023

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is. (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
- d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above [see instructions])	(iv) Is the organization listed in your governing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No	
(A)					
(B)					
(C)					
(D)					
(E)					
Total					

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►

	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,219,779	1,022,098	1,034,901	1,130,728	1,043,147	5,450,653
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,219,779	1,022,098	1,034,901	1,130,728	1,043,147	5,450,653
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						1,708,095
						3,742,558

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	1,219,779	1,022,098	1,034,901	1,130,728	1,043,147	5,450,653
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on	603,930	905,796	(419,487)	1,482,284	473,347	3,045,870
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						8,496,523
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	44.05 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	45.67 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support**Calendar year (or fiscal year beginning in) ►**

	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support**Calendar year (or fiscal year beginning in) ►**

	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
 - A family member of a person described in line 11a above?
 - A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below.
 - The organization is the parent of each of its supported organizations. Complete line 3 below.
 - The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- Activities Test. Answer lines 2a and 2b below.
 - Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
 - Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
 - Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
 - Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		

	Yes	No
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3.	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI).		
2 Acquisition indebtedness applicable to non-exempt-use assets	2	
3 Subtract line 2 from line 1d.	3	
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by 0.035	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1
2 Enter 0.85 of line 1.	2
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3
4 Enter greater of line 2 or line 3.	4
5 Income tax imposed in prior year	5
6 Distributable Amount . Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D - Distributions**

	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required) - provide details in Part VI	5
6 Other distributions (describe in Part VI). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9 Distributable amount for 2020 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7. \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Part VI

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

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statement**

OMB No. 1545-0047

2020**Open to Public
Inspection**

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

► Attach to Form 990.

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

Employer identification number

American Eagle Foundation

58-1652023

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►		
4 Number of states where property subject to conservation easement is located ►		
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►		
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$		
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

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

Schedule D (Form 990) 2020

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply)
- | | |
|--|--|
| a <input type="checkbox"/> Public exhibition | d <input type="checkbox"/> Loan or exchange programs |
| b <input type="checkbox"/> Scholarly research | e <input type="checkbox"/> Other |
| c <input type="checkbox"/> Preservation for future generations | |
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | Description | Amount |
|----------------------------------|--------|
| 1c Beginning balance | 1c |
| 1d Additions during the year | 1d |
| 1e Distributions during the year | 1e |
| 1f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► %
 b Permanent endowment ► %
 c Term endowment ► %

The percentages on lines 2a, 2b, and 2c should equal 100%

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
3a(i) Unrelated organizations	3a(i)	
3a(ii) Related organizations	3a(ii)	

- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		615,000		615,000
b Buildings		271,951	93,496	178,455
c Leasehold improvements				
d Equipment		265,536	203,207	62,329
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10.)				855,784

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) Audio/Video Masters	37,930
(2) Trademarks	1,819
(3) Educational Birds	6,825
(4) Deposits	2,370
(5) Donated Land	5,200
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► 54,144

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains (losses) on investments	2a
b Donated services and use of facilities	2b
c Recoveries of prior year grants	2c
d Other (Describe in Part XIII.)	2d
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a
b Other (Describe in Part XIII.)	4b
c Add lines 4a and 4b	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	2a
b Prior year adjustments	2b
c Other losses	2c
d Other (Describe in Part XIII.)	2d
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a
b Other (Describe in Part XIII.)	4b
c Add lines 4a and 4b	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE I
(Form 990)

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

Department of the Treasury
Internal Revenue Service

Name of the organization

**American Eagle Foundation
Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of true grants or assistance, the grants' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments Complete if the organization answered "Yes" on Form 990.

Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of non-cash assistance		(f) Description of grant or assistance	(g) Purpose of grant or assistance
				(e) Method of valuation (books, FMV, appraisal, other)	(d) Amount of cash grant		
1	(1) Audubon Center for Birds 1101 Audubon Way Maitland FL 32751				10,000		
2	(2) Winona State University 175 W Mark St Winona MN 55987				9,975		
3	(3) Bird Conservancy of the Rockies 230 Cherry Street Ste 150 Port Collins CO 80521				6,484		
4	(4) Conserve Wildlife Foundation 501 East State St PO Box 42 Trenton NJ 08625-0420				9,770		
5	(5) Audubon Center for Birds of 1101 Audubon Way Maitland FL 32751				5,000		
6	(6) Conservation Science Global 303 West Drive Cape May NJ 08204				9,999		
7	(7) Keep TN River Beautiful PO Box 22342 Knoxville TN 37933				3,665		
8	(8) Bird Conservancy of the Rockies 14500 Lark Bunting Lane Brighton CO 80603				1,692		
9	(9) Conserve Wildlife Foundation PO Box 420 Trenton NJ 08625				4,830		
10	(10) Conservation Science Global Inc 303 West Drive Cape May NJ 08204				4,837		

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

SCHEDULE I
(Form 990)Department of the Treasury
Internal Revenue Service
Name of the organization

American Eagle Foundation

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

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

► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.Over 145-0047
2020
**Open to Public
Inspection**

Employer identification number

58-1652023

Part I General Information on Grants and Assistance1 Does the organization maintain records to substantiate the amount of the grants or assistance the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Purpose of grant or assistance	
					(g) Method of valuation (book, FMV, appraisal, etc.)	(h) Description of noncash assistance
(1) Conservé Science Global Inc 303 West Drive Cape May NJ 08204			4,969			
(2) Conservé Science Global Inc 303 West Drive Cape May NJ 08204			4,999			
(3) Conserve Wildlife Foundation PO Box 420 Trenton NJ 08625			4,885			
(4) Audubon Center for Birds of Maitland FL 32751			5,000			
(5) Bird Conservancy of the Rockies 14500 Lark Bunting Ln Brighton CO 80603			3,242			
(6) Winona State University 175 W Mark St Winona MN 55967			4,987			
(7) American Eagle Foundation PO Box 333 Pigeon Forge TN 37868			100,000			
(8)						
(9)						
(10)						

2 Enter total "number" of section 501(c)(3) and government organizations listed in the line 1 table

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

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

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

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

SCHEDULE M
(Form 990)**Noncash Contributions**

OMB No. 1545-0047

2020**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

Name of the organization

American Eagle Foundation

Employer identification number

58-1652023

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other	X	1	36,000	FMV
18 Collectibles				
19 Food inventory	X	1	10,500	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ►()				
26 Other ►()				
27 Other ►()				
28 Other ►()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgment			29	

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization:

American Eagle Foundation

2020

**Open to Public
Inspection**

Employer identification number:
58-1652023

01. Governing body decisions (Part VI, line 7b)

All decisions are made and approved at the board level.

02. Form 990 governing body review (Part VI, line 11)

The Federal Form 990 is reviewed by the president prior to its filing. The treasurer also reviews the form 990.

03. Conflict of interest policy compliance (Part VI, line 12c)

All board members are aware of the conflict of interest policy and are aware to report any potential conflict of interest of themselves and to report any conflict that they may suspect of other board members to the board.

04. CEO, executive director, top management comp (Part VI, line 15a)

All salaries of key personnel are approved at the board level.

05. Other officer or key employee compensation (Part VI, line 15b)

All salaries of key personnel are approved at the board level.

06. Governing documents, etc, available to public (Part VI, line 19)

All financial statements, conflict of interest policy and governing documents are available on site and are maintained by the president, Albert L Cern.

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2020

Attachment
Sequence No. 179Department of the Treasury
Internal Revenue Service (90)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return:

Business or activity to which this form relates:

Identifying number:

American Eagle Foundation

FORM 990 - 1

58-1652023

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions) - - - - -	1	
2 Total cost of section 179 property placed in service (see instructions) - - - - -	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions) - - - - -	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- - - - -	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter 0. If married filing separately, see instructions - - - - -	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Selected cost
7 Listed property. Enter the amount from line 29 - - - - -	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 - - - - -	8	
9 Tentative deduction. Enter the smaller of line 5 or line 6 - - - - -	9	
10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562 - - - - -	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions - - - - -	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 - - - - -	12	
13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 - - - - -	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions - - - - -	14
15 Property subject to section 168(f)(1) election - - - - -	15
16 Other depreciation (including ACRS) - - - - -	16 37,393

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2020 - - - - -	17
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>	

Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property	Statement #567					2,068
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28 - - - - -	21
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions - - - - -	22 39,961
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs - - - - -	23

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2020)

Federal Supporting Statements**2020 PG01**

Name(s) as shown on return

American Eagle Foundation

Tax ID Number

58-1652023

Form 4562 - Line 19b

Statement #567

<u>Basis</u>	<u>RP</u>	<u>CV</u>	<u>Method</u>	<u>Deduction</u>
1,761	5	HY	SL	176
2,328	5	HY	SL	233
11,244	5	HY	SL	1,124
1,052	5	HY	SL	105
1,145	5	HY	SL	115
1,450	5	HY	SL	145
320	5	HY	SL	32
210	5	HY	SL	21
828	5	HY	SL	93
2,349	5	HY	SL	239
719	5	HY	SL	72
773	5	IHY	SL	77
1,000	5	HY	SL	100
500	5	HY	SL	50
Total				2,568

990

Overflow Statement

2020

Page 1

Name(s) as shown on return:

American Eagle Foundation

FEIN

58-1652023

Other Expenses Program Services

Description	Amount
Miscellaneous	\$ 966
Equipment Expense	14,543
Repairs	18,524
Supplies	27,826
Other Tax	2,781
Uniforms	2,676
Website/Webcam	17,061
Total:	\$ 84,377

Other Expenses Management and General

Description	Amount
Bank Charges and Fees	\$ 7,727
Dues and Memberships	2,898
License and Fees	4,300
Gifts	25,755
Total:	\$ 40,680

Form 990
Worksheet

Schedule A, Line 5 - Excess 2% Limitation Contributors

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(Keep for your records)

Schedule A - Line 5 - Excess 2% Limitation Contributors

2020 (Keep for your records)
Name as shown on file:
American Eagle Foundation
Tax ID Number:
52-1652023

Name	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	(g) Excess contributions (col. (f) minus the 2% limitation)
Dollywood	354,593	362,612	373,963	386,857	400,000	1,678,025	1,708,091
D G Yuengling & Son Inc	10,000	5,000	6,672	20,000	15,000	56,672	
Duke Energy Foundation	10,000	10,000	9,774	25,000	25,000	79,774	
Lee Danner Bass Inc	7,304	7,940	8,380	8,338	8,040	40,002	
United Northern Mortgage Brokers	10,809	10,000	8,596	7,500	6,540	43,445	
Lubrizol Foundation					5,000	5,000	
US Fish & Wildlife					10,176	10,176	
City of Eastlake					12,000	12,000	
True Value Hardware					9,981	9,981	
PepsiCo					10,000	10,000	

Total

1,709,095

* Item is included in UBLA
for Section 199A calculations
See 'UBLA' in lower right corner
Record as known or 0.00

Depreciation Detail Listing

Management & General

For your records only

2020

PAGE 1

American Eagle Foundation
Record as known or 0.00

Social Security number/EN
58-1652023

No	Description	Cost	Less Accumulated Depreciation	Balance Depreciation	Interest Basis	Method	Rate	Plus Depreciation	Cumulative Depreciation	AMT Depreciation
1	Additions 2011	06302011	3,677	100.00				0	3,677	3,677
2	Cameras	02212013	6,849	100.00				6,745	6,849	84
3	Wildlife Tools	05202013	1,618	100.00				1,447	1,516	71
4	Lenses	03282013	623	100.00				519	606	69
5	Camera	07172014	11,798	100.00				9,268	10,953	1,600
6	Web Cam DC	08072015	958	100.00				1,286	746	1
7	Web Cam DC	08102015	3,874	100.00				1,286	2,595	51
8	Web Cam DC	08282015	1,800	100.00				1,286	1,392	257
9	Web Cam DC	08282015	1,298	100.00				1,286	1,002	105
10	Web Cam DC	08282015	112	100.00				1,286	102	102
11	Web Cam Sevierville	032112015	6,325	100.00				1,286	4,444	904
12	Web Cam Sevierville	05112015	3,613	100.00				1,286	3,613	516
13	Web Cam Sevierville	07062015	8,812	100.00				1,286	1,259	1,259
14	Web Cam Sevierville	07242015	1,550	100.00				1,286	977	221
15	Web Cam Florida	08102015	3,872	100.00				1,286	553	553
16	2015 Equipment Addit.	06302015	3,975	100.00				1,286	3,124	566
17	Fully Depreciated Equ	01012011	8,201	100.00				0	8,201	8,201
18	Building	07252000	63,792	100.00				63,792	63,792	
19	Building Improvements	01011998	16,436	100.00				16,436	16,436	
20	Building Improvements	02142001	1,500	100.00				1,500	1,500	
21	Building Improvements	06012302	1,178	100.00				1,178	1,178	
22	Wall Panel & Molding	122622001	5,631	100.00				5,631	375	375
23	Building Improvements	02012015	11,683	100.00				11,683	1,168	1,168
24	Fully Depreciated Eq	01012011	14,969	100.00				14,969	14,969	
25	Additions 2011	05302011	710	100.00				0	710	710
26	J Desks	06042013	1,550	100.00				0	1,550	1,550
27	Computer-Amazon	03042014	1,519	100.00				0	1,519	1,619
28	Desk	09102015	301	100.00				0	255	46
29	Heat Unit	10142015	3,800	100.00				3,166	634	3,800
30	Fully Depreciated off	01012011	21,885	100.00				0	21,885	21,885

* Item is included in UBA
for Section 198A calculations
See "UBA" in lower right corner
Notable since or when

Depreciation Detail Listing

Management 6 General
For your records only

2020
PAGE 2

American Eagle Foundation

Social security number/EN

58-1652023

No	Description	Cost	Best Adjusted	Business percentage	Section 179	Bonus depreciation	Depreciation base	Rate	Method	Prior Depreciation	Current Depreciation	MT Current
31	Additions	06302011	4,468	100.00			4,468.5	0	6,468		4,468	
32	Time Clock	03272013	669	100.00			669.5	0	669		669	
33	Staples	12242014	650	100.00			650.5	0	650		650	
34	Staples	03162015	221	100.00			221.5	SL	HT	20	12	221
35	Apple Store - Computer	05052015	1,463	100.00			1,463.5	SL	HT	20	1,367	96
36	Staples	11012015	725	100.00			725.5	SL	HT	20	604	121
37	Staples	12282015	914	100.00			914.5	SL	HT	20	732	102
38	Dodge Van	081222006	4,000	100.00			4,000.5	0	4,000		4,000	
39	Ford Van	052622009	13,600	100.00			13,600.5	0	13,600		13,600	
40	Poynt 4 Reader	07252011	4,069	100.00			4,069.5	0	4,000		4,000	
41	Backup Operator	05012016	808	100.00			808.5	SL	HT	20	567	162
42	HP Computer	05132016	1,179	100.00			1,179.5	SL	HT	20	826	236
43	HP 811n Desktop	06152016	520	100.00			520.5	SL	HT	20	364	104
44	Lenovo Laptop	06302016	571	100.00			571.5	SL	HT	20	399	114
45	2014 Ford Econoline	06302016	22,701	100.00			22,702.5	SL	HT	20	18,900	4,540
46	(2) Dell Inspiron Desktop	063152016	1,019	100.00			1,019.5	SL	HT	20	714	204
47	Camera	07042017	1,704	100.00			1,704.5	SL	HT	20	652	341
48	Building	06232017	16,108	100.00			16,108.20	SL	HT	5	2,013	606
49	Computer Equipment	06122017	999	100.00			999.5	SL	HT	20	500	200
50	4 Banner 2005	02162018	11,198	100.00			11,198.5	SL	HT	20	3,360	2,240
51	Laptop	01102018	804	100.00			804.5	SL	HT	20	241	161
52	Cameras	03082018	649	100.00			649.5	SL	HT	20	195	130
53	Camera	07092018	799	100.00			799.5	SL	HT	20	240	160
54	Computer	12312018	1,939	100.00			1,939.5	SL	HT	20	582	388
55	(3) Cameras	08162018	7,346	100.00			7,346.5	SL	HT	20	2,204	1,469
56	Furniture & Pictures	12312018	1,221	100.00			1,221.5	SL	HT	20	244	486
57	Furniture & Pictures	39182019	3,787	100.00			3,787.5	SL	30Q	20	284	757
58	Scary Camera	09042019	913	100.00			913.5	SL	30Q	20	66	183
59	Computer Equipment	09142019	7,275	100.00			7,275.5	SL	30Q	20	546	1,455
60	Software	104122019	3,000	100.00			3,000.5	SL	30Q	20	375	600

* Item is included in UBA
for Section 199A calculations.
See 'UBA' in lower right corner.

Depreciation Detail Listing

Management & General

For your records only

2020
PAGE 3

Number of items on return

Social security number/EN

No	Description	Date	Cost	Business percentage	Section 179	Bonus deposition	Depreciation basis	Life	Method	Rate	Pre- Deposition	Current Deposition	Accumulated Deposition	AMT Current
American Eagle Foundation														
61	2013 Dodge Ram 1500	01232019	26,500	100.00			26,500	5	SL	80	20	4,638	5,300	9,938
62	Barn Renovations	10072019	155,623	100.00			155,623	20	SL	80	8	973	7,181	6,754
63	Medical Equipment	02042020	1,761	100.00			1,761	5	SL	30	10		176	176
64	Medical Equipment	02072020	2,328	100.00			2,328	5	SL	30	10		233	233
65	Medical Equipment	02262020	11,244	100.00			11,244	5	SL	30	10		1,124	1,124
66	Frigidaire Freezer	03252020	1,052	100.00			1,052	5	SL	30	10		105	105
67	Medical Equipment	10092020	1,145	100.00			1,145	5	SL	30	10		115	115
68	Master	06222020	1,460	100.00			1,460	5	SL	30	10		145	145
69	Chair	08312020	320	100.00			320	5	SL	30	10		32	32
70	Chair	09042020	210	100.00			210	5	SL	30	10		21	21
71	Cassette	01162020	828	100.00			828	5	SL	30	10		83	83
72	Computer	02282020	2,349	100.00			2,349	5	SL	30	10		235	235
73	Laptop	09042020	719	100.00			719	5	SL	30	10		72	72
74	Photo Equipment	09072020	773	100.00			773	5	SL	30	10		77	77
75	Software Program	09242020	1,000	100.00			1,000	5	SL	30	10		100	100
75	Software Program	12012020	500	100.00			500	5	SL	30	10		50	50
77	510 Kodak Road	07062020	615,000	100.00			615,000	0	SL	0	0			
Total:													537,491	59,961
Total Amount:													255,742	296,703
ST ADJ:													39,961	39,961