Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Go to www.lrs.gov/Form99@or instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

A	For the	2017 calend	r year, or tax year beginning 7	/01,201	7, and ending	6/.			7019
В	Check if ap		C				D Employ	er identl	(leation number
		ss change	ALLAS AFTERSCHOOL					0838	
	-	change	900 WILLOW STREET #11	.0			E Telepho	ne numb	per
	\vdash		ALLAS, TX 75226				(21	4) 3	06-8400
	\vdash	return	,				\	-/ -	
	\vdash	turn/terminated					G Gross re	againte S	1,746,093.
	Amen	ded return				Max le this s	group return		
	Applic	ation pending	F Name and address of principal officer: CI	HRISTINA K. HANG					
	_		SAME AS C ABOVE		<u> </u>	If 'No,'	subordinates attach a list.	(see inst	ructions)
ī	Tax-exer	mpt status	X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527				
J	Websi	te: ► WW	.DALLASAFTERSCHOOL.OR	G	<u> </u>	(c) Group (exemption nu		
K	Form of	organization:	X Corporation Trust Association		Year of formation	n: 200°	7 Mis	tate of le	gal domicile: TX
8 - 8		Summar							
ección.	1 Br	iefly describ	the organization's mission or most	significant activities: s	EE SCHED	ULE O			
	. =								
20									
Activities & Governance	-								
ē	2 Ch	eck this bo	if the organization discontin	ued its operations or disp	oosed of more	than 25°	% of its ne	et asse	ts.
ŝ	a Ni	imber of vo	na members of the governing body ((Part VI, line 1a)				3	12
95	A Nu	imber of ind	pendent voting members of the gov	⁄erning body (Part VI, liле	: 1b)			4	15
ë	5 To	tal number	f individuals employed in calendar y	year 2017 (Part V, line 2a	1)	· · · · · · · · ·		5	28
Ĭ	6 To	tal number	f volunteers (estimate if necessary)			• • • • • • • •		6	50
닿	7a To	tal unrelate	business revenue from Part VIII, co	olumn (C), line 12				7a	0.
	b Ne	t unrelated	usiness taxable income from Form	990-T, line 34				7b	0.
							rior Year		Current Year
	8 Co	ntributions	nd grants (Part VIII, line 1h)				,473,2		1,667,166.
Revenue	9 Pr	ogram serv	e revenue (Part VIII, line 2g)				17,9		19,083.
Ver	10 Inv	estment in	ome (Part VIII, column (A), lines 3,	4, and 7d)			2,1		-8,254.
8	11 Ot	her revenue	(Part VIII, column (A), lines 5, 6d, 8	3c, 9c, 10c, and 11e)	*****		-25,7		-5,662.
	12 To	tal revenue	- add lines 8 through 11 (must equa	al Part VIII, column (A), li	ine 12)		,467,5	36.	1,672,333.
	13 Gr	ants and si	ilar amounts paid (Part IX, column	(A), lines 1-3)	=			\rightarrow	
	14 Be	nefits paid	or for members (Part IX, column ((A), line 4)					
	15 Sa	laries, othe	compensation, employee benefits (Part IX, column (A), lines	5-10)	1	,024,3	<u>53.</u>	<u>1,146,583.</u>
0	16a Pr	ofessional f	ndraising fees (Part IX, column (A),	, line 11e)					
Expenses	1		g expenses (Part IX, column (D), li	•	53,995.		1 4 4		en les les
X	b 10	tai jundrais	ig expenses (Fart IX, column (b), ii	116 20/ · <u>Z</u>		***************************************	364,4		466,734.
-	17 Ot	her expense	(Part IX, column (A), lines 11a-11	a, 117-24e)	,	-			1,613,317.
	18 To	tal expense	. Add lines 13-17 (must equal Part	IX, column (A), line 25)		├ ── <u></u>	,388,8		59,016.
		venue less	xpenses, Subtract line 18 from line	12	**********		78,7	_	End of Year
sets or						Beginnin	g of Current		627,915.
25	20 To	tal assets (art X, line 16)	* * * * * * * * * * * * * * * * * * * *			585,6		15,625.
Not Ass Fund By	21 To		(Part X, line 26)			<u> </u>	32,4		
22	22 Ne	t assets or	and balances. Subtract line 21 from	line 20		<u></u>	<u>553,2</u>	74.	612,290.
.	14.8	Signatur	Block						
Unde	r penalties o	f perjuty, I deci	e that I have examined this return, including acco (other than officer) is based on all information	mpanying schedules and statement	ts, and to the best o	of my knowle	dge and belie	f, It is tru	e, correct, and
com	pléte, Declai	ration of prepar	(other than officer) is based on all information	of which preparer has any knowle	ouge.		1-	-/	P/
			Wisten & Have	<u> </u>		Dat	1013	///	<u> </u>
Sic	ın	Signatur	of officer						
Sig He	re		STINA K. HANGER			CEO_			
		Type or	int name and title						Wild I
		Print/Type p	parer's name Preparer's s	ignature	Date	ا م	Check	J "	PTIN
Pa	al	AMY MI	HIE UM	3 Michie	10.18	.18	self-employe	d E	<u>200956657 </u>
	parer	Firm's name	SUTTON FROST CARY	LĹP					
Üs	e Only	Firm's addre		SUITE 600			Firm's EIN	75-	2593210
	13	1 11110 00000	ARLINGTON, TX 76011				Phone no.	(817) 649-8083
Mar	the IPS	discuss thi	return with the preparer shown abo	ve? (see instructions)			, , , , , , , , , ,		X Yes No
IVIA)	LIGITA	namuaris D	luction Act Notice, see the separate	e Instructions.	TEEA	0113L 08/0	8/17		Form 990 (2017)
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Form	n 990 (2017) DALLAS AFTERSCHOOL	76-0838983	Page 2
	Statement of Program Service Accomplishments		
*********	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	SEE SCHEDULE 0		
	in a during the year which were not listed on	the prior	
2	Did the organization undertake any significant program services during the year which were not listed on		s X No
	Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O.		A A INC
	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	rices?	s X No
3	If 'Yes,' describe these changes on Schedule O.		[1
4	Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by	expenses.
7	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported.	to others, the total	expenses,
4a	[(OOGE,)(Expenses + I,20I,000; monuments seement +	Revenue \$	19,083.)
	DALLAS AFTERSCHOOL ENSURES THAT LOW-INCOME STUDENTS HAVE ACCESS	TO SAFE AND	ENRICHING
	AFTERSCHOOL EXPERIENCES BY PROVIDING AFTERSCHOOL AND SUMMER PRO	GRAMS WITH S	TAFF
	TRAINING, PROGRAM RESOURCES AND SUPPORT. OUR GOAL IS TO HELP LO	CAL SITES AC	
	NATIONAL QUALITY STANDARDS. TODAY, DAS SUPPORTS 180 FREE AFTERS	CHOOL SITES	SERVING
		IENTS RANGE	
	NATIONAL ORGANIZATIONS LIKE THE YMCA TO SCHOOL BASED PROGRAMS L	IKE BIG THOU	GHT AND
	DALLAS ISD, TO LOCAL PROGRAMS SUCH AS TRINITY RIVER MISSION AND	TORITER LYK	<u>K.</u>
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	(Code: ) (Expenses \$ including grants of \$ ) (R	Revenue \$	1
4 b	(Code:) (Expenses \$ including grants of \$) (R	GVETING 4	
	<u> </u>		
	~		
		<u> </u>	
4 c	(Code:) (Expenses \$ including grants of \$) (R	evenue \$	,
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4 e	Total program service expenses ► 1,261,636.		000 (0017)

			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	1 C L L C L L C C L L C C C L L C C C L C L C C C C C C C C C C C C C C C C C C C C	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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
1	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule  D, Part VI	11 a	X	
i	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	11 b		X
•	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.	11 c		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.	11 d		X
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	X	
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
	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	12 b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
142	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X_
k	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		<u> </u>
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	Х	
9	11 247 000 form from postiniting on Part VIII line 922 If 'Vas'	19		X
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	Checklist of Required Schedules (continued)		Yes	No
20	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a	Tes	Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	1		
	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		Х
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
	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
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		X
	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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):			
1	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
١	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete  Schedule L, Part IV	28b		X
(	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? 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
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	olf '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	n 4 50
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Form	990 (2017) DALLAS AFTERSCHOOL	76-0838983	Page 5
POIII	Statements Regarding Other IRS Filings and Tax Compliance		
Section 10	Check if Schedule O contains a response or note to any line in this Part V	· · · · · · · · · · · · · · · · · · ·	
			Yes No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 11	
Ŀ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable garning	X
2	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 28	
ŀ	If at least one is reported on line 2a, did the organization file all required federal employment	tax returns? 2b	X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst	tructions)	
38	Did the organization have unrelated business gross income of \$1,000 or more during the year?	? 3a	X
ь	of Yes,' has it filed a Form 990-T for this year?!f 'No' to line 3b, provide an explanation in Schedule 0	Зь	
4.	At any time during the calendar year, did the organization have an interest in, or a signature of	or other authority over, a	l x
-70	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.	nancial account)?	Λ
Ь	If 'Yes,' enter the name of the foreign country: ►	(5245)	
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Final	ancial Accounts (FBAR).	X
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year?5a	$\frac{\hat{x}}{x}$
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	er transaction?	^
	If Yes, to line 5a or 5b, did the organization file Form 8886-T?		
	Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible as charitable contributions?		x
Ь	If 'Yes,' did the organization include with every solicitation an express statement that such cornot tax deductible?	ntributions or gifts were 6 b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and pa services provided to the payor?	rtly for goods and 7a	X
ь	of 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Х
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for white Form 8282?	ch it was required to file	X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	fit contract?	_ A
g	If the organization received a contribution of qualified intellectual property, did the organization	n file Form 8899	
	as required?		
	Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining	ained by the sponsoring	Z
	organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
8	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person	on? 9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 Ь	
11	Section 501(c)(12) organizations. Enter:	11 e	
2	Gross income from members or shareholders		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	12b	
ь	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	120	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?		periodi de
а	Note. See the instructions for additional information the organization must report on Schedule	0.	
	Note. See the instructions for administration in required to maintain by the states in		
	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	X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	chedule O. 14a	- 15
	If Yes, has it filed a Form 720 to report these payments? If 'No,' provide an explanation in So	Form:	990 (2017)
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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 No Yes 1 a 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 in Schedule O. 15 **b** Enter the number of voting members included in line 1a, above, who are independent . . . . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee?..... Did the organization delegate control over management duties customarily performed by or under the direct supervision X 3 of officers, directors, or trustees, or key employees to a management company or other person? ..... Did the organization make any significant changes to its governing documents X X 5 Did the organization become aware during the year of a significant diversion of the organization's assets?...... 5 X 6 Did the organization have members or stockholders? ..... 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body? ..... 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7 b stockholders, or persons other than the governing body? ..... Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8 a X 86 **b** Each committee with authority to act on behalf of the governing body?..... Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No X 10 a 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 ..... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X 12 b 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 ... SEE SCHEDULE Q ..... X 12 c X 13 Did the organization have a written whistleblower policy?..... 13 14 X 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? X a The organization's CEO, Executive Director, or top management official... SEE. SCHEDULE .0...... 15 a 15 b 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 16a X taxable entity during the year?..... bilf '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 16b organization's exempt status with respect to such arrangements?..... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 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. Other (explain in Schedule O) Another's website X Upon request X Own website Describe in 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. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records: DALLAS TX 75226 (214) 306-8400 CHRISTINA K. HANGER 3900 WILLOW STREET #110 Form 990 (2017) TEEA0106L 08/08/17 BAA

Part VIII 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

- 1 a 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor a	ny related orga	ai iiza	HIOH	100	ipoi	100100		Ty Guilland Ginder,	,	
(A) Name and Title	(B) Average hours	ls	both dire	(C) (do no box, i an o ector/	ot che unles fficer truste			(D)  Reportable compensation from	(E)  Reportable  compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below cotted line)	ar director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) JERALD BALDRIDGE	11_								0.	0.
DIRECTOR	0	X			_	$\vdash$	_	0.	U.	0.
(2) TERRY CONNER	2	Į "						0.	0.	0.
EMERITUS	0	X		_	-	-	_	0.	- 0.	
(3) KRISTI ERICKSON	$-\frac{2}{0}$	X		X	ĺ			0.	0.	0.
CHAIRMAN	1	A	$\vdash$	A.	-		_			
(4) COLLEEN BOWLER DIRECTOR		X						0.	0.	0.
(5) MICHAEL GAGNE	1	-			_					
VICE CHAIRMAN		X		X				0.	0.	0.
(6) COLLEEN LILLIS	1									
TREASURER	0_	X		Х	_	$\sqcup$		0.	0.	0.
(7) MARISSA CASTRO MIKOY	1							_	0.	0.
DIRECTOR	0_	X	_			$\vdash$		0.	- 0.	
(8) AMY JUENGLING	11_	١						0.	0.	0
DIRECTOR	0	X		_	-	+		0.		
(9) JANET MOCKOVCIAK		X						0.	0.	0.
DIRECTOR	1	1^	-	_	-	+-+	_			
(10) ANNE WICKS		X						0.	0.	0
DIRECTOR	- 1	1	$\vdash$		-	-				
(11) KATHI CHILD DIRECTOR		X						0.	0.	0.
(12) SAGAR DESAI	1	1								
SECRETARY		X		X		<u> </u>		0.	Q.	0.
(13) BILL MORRISON	1									^
DIRECTOR	0	X		<u> </u>	_	$\downarrow \downarrow \downarrow$		0.	0.	0.
(14) MARIA CRAMER	1								ا م	0
DIRECTOR	0	X						0.	0.	0 . Form <b>990</b> (2017
BAA	TEEAC	107L	08/0	8/17						FUIII \$50 (2017

Jection A. Officers, Directors, 110	2210001	,				,		3		
(A) Name and title	Average hours per	(do	, unie	check ess pe	sition more	than is both or/trust	1 (2)	(D)  Reportable compensation from	Reportable compensation from	Estimated amount of other compensation
	week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(15) NIKKI JOLLY	10	х						0.	0.	0.
DIRECTOR (16) JJ PONCE	1							0.	0.	
DIRECTOR (17) CHRISTINA K. HANGER	<u> 40</u>	X		-					0.	
CEO (18)		-		Х				103,756.		0,333.
(19)		-								
(20)										
(21)										,
(22)										
(23)										
(24)										
(25)										
1 b Sub-total.  c Total from continuation sheets to Part VII, Sectio							<b>▶</b>	103,756.	0.	8,393.
d Total (add lines 1b and 1c)			114				<b></b>	103,756.	0.	8,393.
Total number of individuals (including but not limit from the organization       1	ted to thos	se lis	ted a	abov	ve) ı	who r	ece	eived more than \$1	00,000 of reportab	
3 Did the organization list any former officer, directed on line 1a? If 'Yes,' complete Schedule J for such	or, or trus individua	tee, I	кеу (	emp	loye	e, or	hig	phest compensated	i employee	Yes No
4 For any individual listed on line 1a, is the sum of the organization and related organizations greater such individual.	man pro									. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compens	ation e <i>Sci</i>	fror nedu	m ai ile J	ny u <i>for</i>	nrela such	ted <i>per</i>	organization or in	dividual	Sec. 38-35 8 800
Section B. Independent Contractors	ated inde	onde	ent c	onti	racto	ore th	nat i	received more that	\$100.000 of	
compensation from the organization. Report comp	ensation	for th	ne ca	alen	dar	year	end	ling with or within	the organization's	tax year. (C)
Name and business address	ess						_	Description o	f services	Compensation
				-			-			
				_						
Total number of independent contractors (including \$100,000 of compensation from the organization	g but not	limite	ed to	tho	se I	isted	abo	ove) who received	more than	
\$100,000 of compensation from the organization		TEEA0	108	08/0	8/17		_		100000	Form <b>990</b> (2017)

		Check if Schedule O	contains a resp	onse or note to any	y line in this Part VI	IIL		
					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	k c	Federated campaigns.  Membership dues  Fundraising events  Related organizations  Government grants (contributions)	1 b	118,540.				
ontributions, nd Other Sin	f	All other contributions, gifts, similar amounts not included Noncash contributions include Total. Add lines 1a-1f	grants, and above 1 f	1,532,626.				
	- 1	Fotal, Add lines ra-11		Business Code	1,007,100.			
Ę		A*************************************			12 200	13,308.	\$30. a.d333389.aaaa	10- :
ce Reve		CLIENT FEES TRAINING REV		900099	13,308. 5,775.			
Program Service Revenue	e							
5	f	All other program service			40.000			
<u>E</u>	3	Total. Add lines 2a-2f  Investment income (includer similar amounts).  Income from investment	luding dividends	s, interest and	347.			347.
	5	Royalties						
	_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(i) Real	(II) Personal	6577		A 324 M	100
	6a	Gross rents			16-			40.0
	b	Less: rental expenses.						
	C	Rental income or (loss)						
	d	Net rental income or (lo						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis		0 601				
		and sales expenses		8,601. -8,601.				
		Gain or (loss)			-8,601.	22 220	W., A., R., D., 80000. 90	-8,601.
enne		Gross income from fund (not including . \$ of contributions reported	raising events		8,001.			
Other Rev		See Part IV, line 18 Less: direct expenses		12,120. b 48,570.				
5	C	Net income or (loss) from	m fundraising e	vents	-36,450.			-36, <u>450.</u>
		Gross income from gam See Part IV, line 19						
		Less: direct expenses Net income or (loss) from			10. 30. 50. 5. S.	8.38.38.38.38.38.38.38.38.38.38.38.38.38		1919. 1914 (1918. 1918. 1918. 1918. 
	10 a	Gross sales of inventory and allowances	, less returns	45,028.		14.5		
		Less: cost of goods sold				00 400	K (M &c)	a san Carin a San 1881
	С	Net income or (loss) from		Business Code	28,439.	28,439.		
	11 -	Miscellaneous Revenu		900099	2,349.	2,349.	7. A A S. OSAA	a. Sallandlika kada Kadala 198
	b	WI2CETTYNEOO2		300033	2,347.	2,5101		
	d	All other revenue						
		Total. Add lines 11a-11d			2,349.	Tree 1 Tree 1		13.5
ŀ	2	Total revenue. See instr			1,672,333.	49,871.	0.	-44,704.
RAA		<del></del>			.0109L 08/08/17			Form 990 (2017)

Form 990 (2017)

Par X 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..... (D) Fundraising (A) Total expenses (C) **(B)** Do not include amounts reported on lines Management and Program service 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ..... Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . . . . 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 ..... Compensation of current officers, directors, 24,645. 12,322 86,257 trustees, and key employees ...... 123,224 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).... n 0 147,090. 23,306. 683,441 853,837. Other salaries and wages . . . . . . . Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)...... 1,397. 9,640 11,037 7,947. 2,983. 78,527 67.597. 14,023. 2,897. 79,958. 63,038. 10 Payroll taxes ..... 11 Fees for services (non-employees): 4,711. 1,724. 28,044 34,479 c Accounting..... 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 0.). . . . . 17,196. 40,566. 39,411. 97,173 4,332. 3,208. 2. 7,542. 1,288. 5,382. 19,576. 26.246. 13 Office expenses..... 3,453. 1,730. 23,210. 28,393. Information technology..... Royalties..... 1,106. 1,008 9,090. 11,204. Occupancy..... 357. 129 26,007. 26,493. 17 Payments of travel or entertainment expenses for any federal, state, or local public officials ..... 622. 4,895. 19,664 14,147. Conferences, conventions, and meetings . . . . 9,936. 3,312 22 Depreciation, depletion, and amortization.... 66,242. 52,994. 8,202. 938 954. 5,310. 1. Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) × 93,316 93,316 ■ DIRECT PROGRAM EXPENSE 1,029. 948 18,540 b PROFESSIONAL DEVELOPMENT 21,517. 1,320. 550 11,014 9,144. c EQUIPMENT 239 <u>3,575.</u> 8,932 5.118. PRINTING AND PUBLICATIONS 1,771. 1,122 3.424. 6,317. 253,995. 97,686. 1,261,636. 1,613,317. Total functional expenses. Add lines 1 through 24e. . . . Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following Check here ► SOP 98-2 (ASC 958-720).....

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X...... (A) Beginning of year (B) End of year 203,295. 154,878 1 Cash — non-interest-bearing..... 65,068 2 77,357. Savings and temporary cash investments..... 2 216,000. Pledges and grants receivable, net ..... 3 224,365 4 4,489 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L...... 6 7 Notes and loans receivable, net..... 8 Inventories for sale or use..... 57,362 9 Prepaid expenses and deferred charges ..... 1,859 10a Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D...... 10 a 274,012. 10 c 69,412. 204,600. 139,505 11 12 Investments - other securities. See Part IV, line 11..... 12 Investments - program-related. See Part IV, line 11 ..... 13 13 14 Intangible assets..... 14 15 Other assets. See Part IV, line 11..... 15 627,915. 585,675. 16 Total assets. Add lines 1 through 15 (must equal line 34) ..... 16 32,401. 17 15,625. 17 18 Grants payable..... 18 19 Deferred revenue..... 19 20 Tax-exempt bond liabilities ..... 20 Escrow or custodial account liability. Complete Part IV of Schedule D . . . . . . . . . 21 Liabilitie Loans and other payables to current and former officers, directors, trustees, 22 ×. key employees, highest compensated employees, and disqualified persons.

Complete Part II of Schedule L. 22 23 Secured mortgages and notes payable to unrelated third parties..... 23 24 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 26 15,625 32,401 26 Total liabilities. Add lines 17 through 25..... Organizations that follow SFAS 117 (ASC 958), check here ► X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 343,248. 277,247. 27 Unrestricted net assets..... Temporarily restricted net assets..... 28 269,042 276,027. 29 Permanently restricted net assets..... 29 Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds..... 30 Paid-in or capital surplus, or land, building, or equipment fund ..... 31 31 Retained earnings, endowment, accumulated income, or other funds..... 32 32 33 612,290. 553,274 Total net assets or fund balances ..... 33 627,915. 34 585,675. 34 Form 990 (2017) BAA

Form	990 (2017) DALLAS AFTERSCHOOL	0000			
	Reconciliation of Net Assets				_
**********	Check if Schedule O contains a response or note to any line in this Part XI				<u>L</u>
1	Total revenue (must equal Part VIII, column (A), line 12)		<u> </u>	72,3	333.
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u> 13,3</u>	
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>59,</u> (	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5	<u>53,2</u>	<u> 274.</u>
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 in Schedule 0)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	10	6	12,2	290.
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	Financial Statements and Reporting				
nii kaisel	Check if Schedule O contains a response or note to any line in this Part XII				[
	Check if Scriedule O contains a response of fold to any line in this party with			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- 1		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				,
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	,	2a	***************************************	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis	on a			
	Coparate Dates		2b	x l	
Ь	Were the organization's financial statements audited by an independent accountant?				3.737
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ingle	За		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ed audit	. 3b		
	or audits, explain why in schedule of and describe any steps taken to dilectige scan addition		Form	990 (	2017)
BAA				•	

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990for instructions and the latest information.

2017

Open to Public Inspection

Employer Identification number Name of the organization 76-0838983 DALLAS AFTERSCHOOL 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) A community trust described in section 170(b)(1)(A)(vI). (Complete Part II.) 8 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 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 12 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. 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, 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). (iii) Type of organization (described on lines 1-10 above (see Instructions)) (v) Amount of monetary (vi) Amount of other (II) FIN (I) Name of supported organization (iv) is the organization listed in your governing document? support (see instructions) support (see instructions) Yes (A) **(B)** (C) (D) (E)

Total

	Support Schedule for (Complete only if you checked organization fails to qualify a	ed the box on line	5. 7. or 8 of Part	I or if the organization	ation failed to qua	nd I/U(b)(I)(A) ilify under Part III.	(VI) If the
Sec	tion A. Public Support						
Cale begi	endar year (or fiscal year inning in) >	(a) 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	713,633.	1,288,774.	854,129.	1,473,207.	1,667,166.	5,996,909.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	713,633.	1,288,774.	854,129.	1,473,207.	1,667,166.	5,996,909.
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)			54.			666,985.
6	Public support, Subtract line 5 from line 4	-3-3273			7,45	, ê	5,329,924.
Sec	tion B. Total Support						
Calendar year (or fiscal year beginning in) ►		<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	713,633.	1,288,774.	854,129.	1,473,207.	1,667,166.	5,996,909.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	497.	451.	2,147.	2,132.	347.	5,574.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). SEE, FART, VI.	22,469.	3,487.	3,353.	259.	2,349.	31,917.
	Total support. Add lines 7 through 10	3.17		19776	RESERVE		6,034,400.
	Gross receipts from related activi						361,225.
	First five years. If the Form 990 is organization, check this box and	stop nere	**********	, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ 🔲
Sec	tion C. Computation of Pu	blic Support P	ercentage			- 1-01	20 22 %
14	Public support percentage for 201	17 (line 6, column	(f) divided by line	11, column (f))		14	88.33 % 90.09 %
	Public support percentage from 2 33-1/3% support test—2017. If the	o organization did	not chack the ho	on line 13 and l	line 14 is 33-1/3%	or more, check th	nis box
	and stop here. The organization of	qualifies as a publ	iciy supported org	a)    Zatioi			
	33-1/3% support test—2016. If the and stop here. The organization	qualities as a pub	licty supported org	aj lization			
17a	10%-facts-and-circumstances tes or more, and if the organization of the organization meets the 'facts-						

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 . . . . Schedule A (Form 990 or 990-EZ) 2017

76-0838983 Page 3 Schedule A (Form 990 or 990-EZ) 2017 DALLAS AFTERSCHOOL Part II. 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 (f) Total (e) 2017 **(b)** 2014 (c) 2015 (d) 2016 Calendar year (or fiscal year beginning in) ► (a) 2013 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')..... 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 . . . . Gross receipts from activities that are not an unrelated trade or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.... The value of services or facilities furnished by a governmental unit to the organization without charge . . 6 Total. Add lines 1 through 5... 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..... Public support. (Subtract line Section B. Total Support (f) Total (d) 2016 (e) 2017 (c) 2015 **(b)** 2014 (a) 2013 Calendar year (or fiscal year beginning in) ► 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...... Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . . . . Other income. Do not include gain or loss from the sale of capital assets (Explain in Total support. (Add lines 9, 10c, 11, and 12.).... 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 ..... Section C. Computation of Public Support Percentage 15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))..... 15 16 16 Public support percentage from 2016 Schedule A, Part III, line 15 ...... Section D. Computation of Investment Income Percentage 17

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))..... 18 Investment income percentage from 2016 Schedule A, Part III, line 17..... 19a 33-1/3% support tests-2017. 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 , . . . b 33-1/3% support tests-2016. 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.  Part IV Supporting Organizations

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

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7	M Supporting Organizations (continued)	Yes No
44	Has the organization accepted a gift or contribution from any of the following persons?	Yes No
11	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a
		11b
	<ul> <li>b A family member of a person described in (a) above?</li> <li>c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.</li> </ul>	11c
	ction B. Type I Supporting Organizations	
<b>5</b> e		Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
	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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2
Se	ction C. Type II Supporting Organizations	Yes No
		165 NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1
Se	ction D. All Type III Supporting Organizations	
1	to the fifth month of the	Yes No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2
3	By reason of the relationship described in (2), 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3
Se	ction E. Type III Functionally Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions).
	The organization satisfied the Activities Test. Complete line 2 below.	
	b The organization is the parent of each of its supported organizations. Complete line 3 below.	
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structions).
	The digatination supported a general supported as	
2	<ul> <li>Activities Test. Answer (a) and (b) below.</li> <li>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 explaintow 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</li> </ul>	Yes No
	substantially all of its activities.  b Did the activities described in (a) 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 inPart 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.	2b
3	Parent of Supported Organizations. Answer (a) and (b) below.	
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b

	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	izatio	ns	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in f t complete Sections A th	Part VI) <b>. See</b> rough E.
Sec	tion 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		
	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		
	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		_
	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount		0.6	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	MATERIAL I	
2	Enter 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.			
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated (see instructions).	grated ———		
544			Schedule A (Fo	rm 990 or 990-EZ) 2017

1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2017 from Section C, line 6 10 Line 8 amount divided by line 9 amount	Part V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organization	is (continued)	110			
Administrative expenses paid to perform activity furthers exempt purposes of supported organizations, in excess of income from activity  Administrative expenses paid to accomplish exempt purposes of supported organizations  Amounts paid to acquire exempt-use assets  Capilified set-aside amounts (prior IRS approval required)  Cherristributions (describe in Part VI), See instructions.  7 Total annual distributions. Add fines 1 through 5.  B Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributions amount divided by line 9 amount  Control of the 8 amount divided by line 9 amount  Control of Distribution Allocations (see instructions)  Distributions  Distr	Section D – Distributions		<u></u>	Current Year			
in excess of income from activity  A Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required)  Other distributions (describe in Part VI). See instructions.  Total annual distributions. Add lines 1 through 6.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions  Distributions amount for 2017 from Section C, line 6  Underdistributions (responsible amount for 2017 from Section C, line 6  Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.  Excess distributions carryover, if any, to 2017  Error 2013.  From 2013.  From 2016.  Froat 2014.  From 2015.  From 2016.  Froat 2017 distributable amount  I Carryover from 2012 not applied (see instructions)  Remainder, Subtract lines 3g, sh, and 3l from 3f.  Applied to 2017 distributable amount  Remainder, Subtract lines 3g, sh, and 3l from 3f.  Applied to 2017 distributions of prior years  Applied to 2017 distributions or prior years  Applied to 2017 distributions or prior years  Applied to 2017 distributions or years prior to 2017, if any, Subtract lines 3g and 4e from line 2, for result greater than zero, explain in Part VI. See instructions.  Remaining underdistributions for years prior to 2017, if any, Subtract lines 3g and 4e from line 1. For result greater than zero, explain in Part VI. See instructions.  Excess flora 2016.  Remaining underdistributions for years prior to 2017, if any, Subtract lines 3g and 4e, see instructions.	1 Amounts paid to supported organizations to accomplish exempt	purposes					
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in Part VI). See instructions.  9 Distributable amount for 2017 from Section C, line 6  10 Line 8 amount divided by line 9 amount  Section E — Distribution Allocations (see instructions)  10 Distributable amount for 2017 from Section C, line 6  2 Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.  3 Excess distributions carryover, if any, to 2017  a	7 Total annual distributions. Add lines 1 through 6.						
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From 2016.  f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) J Remainder. Subtract lines 3g, 3h, and 3l from 3f.  Distributions for 2017 from Section D, line 7:  a Applied to underdistributions of prior years  Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4.  Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.  Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  Excess distributions carryover to 2018. Add lines 3j and 4c.  B Breakdown of line 7: a Excess from 2013 b Excess from 2014 c Excess from 2015			© .000.0.5000m/2000X0.06X6.00000				
f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount I Carryover from 2012 not applied (see instructions) J Remainder. Subtract lines 3g, 3h, and 3l from 3f.  4 Distributions for 2017 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4.  5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  7 Excess distributions carryover to 2018. Add lines 3j and 4c.  8 Breakdown of line 7: a Excess from 2013 b Excess from 2014 c Excess from 2015  4 Excess from 2016	d From 2015						
g Applied to underdistributions of prior years  h Applied to 2017 distributable amount  I Carryover from 2012 not applied (see instructions)  J Remainder. Subtract lines 3g, 3h, and 3l from 3f.  4 Distributions for 2017 from Section D, line 7:  a Applied to underdistributions of prior years  b Applied to 2017 distributable amount  c Remainder. Subtract lines 4a and 4b from 4.  5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  7 Excess distributions carryover to 2018. Add lines 3j and 4c.  8 Breakdown of line 7:  a Excess from 2013  b Excess from 2014  c Excess from 2015	e From 2016						
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c Remainder. Subtract lines 4a and 4b from 4.  5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  7 Excess distributions carryover to 2018. Add lines 3j and 4c.  8 Breakdown of line 7:  a Excess from 2013  b Excess from 2014  c Excess from 2015	a Applied to underdistributions of prior years						
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8 Breakdown of line 7:  a Excess from 2013  b Excess from 2014  c Excess from 2015	7 Excess distributions carryover to 2018. Add lines 3j and 4c.			1011			
a Excess from 2013 b Excess from 2014 c Excess from 2015			1 432				
b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017			T 1000	T			
© Excess from 2015  d Excess from 2016  e Excess from 2017							
d Excess from 2016 e Excess from 2017			20.00				
e Excess from 2017							

Schedule A (Form 990 or 990-EZ) 2017

Page 8

Schedule A (Form 990 or 990-EZ) 2017 DALLAS AFTERSCHOOL

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.)

### PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		7 2016	2015	2014	2013
OTHER	TOTAL \$ 2	,349. \$ 2 ,349. \$ 2	59. \$ 3,353 59. \$ 3,353	\$ 3,487. \$ 3,487.	\$ <u>22,469.</u> \$ <u>22,469.</u>

# Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

PUBLIC DISCLOSURE COPY

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
► Go to www.irs.gov/Form990for the latest information.

OMB No. 1545-0047

2017

Name of the organization		Employer identification number		
DALLAS AFTERSCHOOL		76-0838983		
Organization type (check one):	-			
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not tre	ated as a private foundation		
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated	d as a private foundation		
	501(c)(3) taxable private foundation			
Check if your organization is covered by the Ger	neral Rule or a Special Rule.			
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Rule				
For an organization filing Form 990, 990-EZ,	or 990-PF that received, during the year, contribu	tions totaling \$5,000 or more (in money or		
property) from any one contributor. Complete	e Parts I and II. See instructions for determining a	CONTINUED S TOTAL CONTINUED S.		
Special Rules				
X For an organization described in section 501	(c)(3) filing Form 990 or 990-EZ that met the 33-1, that checked Schedule A (Form 990 or 990-EZ),	/3% support test of the regulations . Part II, line 13, 16a, or 16b, and that		
received from any one contributor, during the	e vear, total contributions of the greater of (1) 40,	000 or (2) 2% of the amount on (i)		
Form 990, Part VIII, line 1h; or (ii) Form 990	-EZ, line 1. Complete Parts I and II.			
For an organization described in section 501	(c)(7), (8), or (10) filing Form 990 or 990-EZ that i	received from any one contributor,		
during the year, total contributions of more the	(c)(7), (8), or (10) filing Form 990 or 990-EZ that in the standard standar	ientific, literary, or educational		
purposes, or for the prevention of cruenty to	complete rate i, ii, and iii			
True continue described in continue E01	(c)(7), (8), or (10) filing Form 990 or 990-EZ that r	received from any one contributor.		
during the year contributions exclusively for	religious, charitable, etc., purposes, but no such o	contributions totaled more than		
\$1,000. If this box is checked, enter here the	total contributions that were received during the y	ear for an exclusively religious,		
charitable, etc., purpose. Don't complete any	of the parts unless the <b>General Rule</b> applies to t e, etc., contributions totaling \$5,000 or more durin	nis organization because		
it received nonexclusively religious, chantable	e, etc., contributions totaling 40,000 or more during			
Caution. An organization that isn't covered by th	e General Rule and/or the Special Rules doesn't fi	le Schedule B (Form 990, 990-EZ, or		
990-PF), but it must answer 'No' on Part IV, line	2, of its Form 990; or check the box on line H of illing requirements of Schedule B (Form 990, 990-E	its Form 990-EZ or on its Form 990-PF, 77. or 990-PF).		
		Schedule B (Form 990, 990-EZ, or 990-PF) (2017)		
BAA For Paperwork Reduction Act Notice, see the instruc	tions for Form 990, 990-£Z, or 990-PF.	scriedule D (Form 330, 330-E2, or 330-FF) (2017)		

	Contributors (see instructions). Use duplicate copies of Part I if additional sp	ace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$80,425.	Person X Payroli  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$235,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>125,000.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$350,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>50,000.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of org		'	loyer Identification number
DALLAS	AFTERSCHOOL	76	-0838983
:2568	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$100,00 _	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$90,00 _	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		_ _\$76,18	Person X Payroli  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_		\$ <b>47,</b> 37	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
- <b></b>		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
RAA	TEEA0702L 08/09/17	Schedule B (Form	1 990, 990-EZ, or 990-PF) (2017)

TEEA0702L 08/09/17

2 of 2 of Part I

Page

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

BAA

Page

1 to

1 of Part II

Name of organization

DALLAS AFTERSCHOOL

Employer Identification number

76-0838<u>983</u>

	Noncash Property (see instructions). Use duplicate copies of Part II if additional	space is needed.	
(2) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-   ^{\$}	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u> </u>			
<b>-</b>			
		-   ^{\$}	
RAA	S	chedule B (Form 990, 990-E	Z, or 990-PF) (201

1 of Part III Employer identification number 76-0838983 Name of organization
DALLAS AFTERSCHOOL

DUTTUD	HI IEROCHOOL		70 0000300				
Baralla	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)						
	Use duplicate copies of Part III if additional	space is needed.					
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	N/A						
	M/A						
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
	<del>_</del>						
(a) No, from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
			2-1-11				
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
			-+				
			<u> </u>				
		(e)					
	Transfarada nama addres	Transfer of gift	Relationship of transferor to transferee				
	Transferee's name, addres	5, and 211 + 7					
			4.8				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				

(e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

#### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to at www.irs.gov/Form990 or instructions and the latest information

Open to Public Inspection

UTUSPITE	II NOVEMBE DEIVICE								
if the	organization answered Yes	s,' on Form 990, Part IV, line 3, or Form 990	-EZ, Part V, line 46 (I	Political Campaign Activ	ities), then				
•8	• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.								
• S	<ul> <li>Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.</li> <li>Section 527 organizations: Complete Part I-A only.</li> </ul>								
- 5	ection 52/ organizations: Col	mplete Part 1-A only. s,' on Form 990, Part IV, line 4, or Form 990	LF7 Part VI line 47 (	Lobbying Activities), the	en				
If the	organization answered ites	s that have filed Form 5768 (election under	r section 501/h\\: Con	nlete Part II-A. Do not o	complete Part II-B.				
• 5	section 501(c)(3) organization	is that have NOT filed Form 5768 (election	under section 501(h))	: Complete Part II-B. Do	not complete				
	Port II.Δ	, on Form 990, Part IV, line 5 (Proxy Tax)							
(Prox	ry Tax) (see separate instruct	tions), then		•					
		organizations: Complete Part III.		Employer Identific	ation number				
	י מאדדועס ז	AFTERSCHOOL		76-083898					
	A Complete if the or	ganization is exempt under section	501(c) or is a sec	tion 527 organization	on				
1	Provide a description of the (see instructions for definition	organization's direct and indirect political c on of 'political campaign activities')	ampaign activities in	Part IV.					
2	2 Political campaign activity expenditures (see instructions)								
3	3 Volunteer hours for political campaign activities (see instructions)								
	B Complete if the o	rganization is exempt under sect	ion 501(c)(3).						
1	1 Enter the amount of any excise tax incurred by the organization under section 4955								
2									
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No				
h	If 'Yes ' describe in Part IV.				_				
	Complete if the o	rganization is exempt under sect	ion 501(c), exce	pt section 501(c)(3)					
1	Enter the amount directly ext	pended by the filing organization for section	527 exempt function	activities					
2	Enter the amount of the filing	o organization's funds contributed to other	organizations for secti	on 527 exempt					
		9		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$					
4	Did the filing organization file	e Form 1120-POL for this year?			, Yes No				
5	Enter the names, addresses	and employer identification number (EIN) of s. For each organization listed, enter the an ons received that were promptly and direct I action committee (PAC). If additional spa	of all section 527 polit	ical organizations to whi	ch the filing Also enter the				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filling organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0				
(1)									
(2)									
(3)									
(4)									
<b>(5)</b>									
(6)									
BAA	For Paperwork Reduction Ad	ct Notice, see the Instructions for Form 99	3 or 990-E <b>Z.</b>	Schedule C (Fon	m 990 or 990-EZ) 2017				

Part I A Complete if section 501	the organization (h)).	n is exempt under sec	tion 501(c)(3) and f	led Form 5768 (elect	ion under
		ongs to an affiliated group	(and list in Part IV eac	h affiliated group membe	's name,
		nd share of excess lobbying			
B Check ▶ ☐ if the fil	ing organization che	ecked box A and 'limited co	ontrol' provisions apply.		
(The terr	Limits on Lobb n 'expenditures' me	oying Expenditures eans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pu	blic opinion (grass roots lo	bbying)		
<b>b</b> Total lobbying expendit	ures to influence a l	legislative body (direct lobb	ying)		
	•	and 1b)			0.
	•				
e Total exempt purpose e	xpenditures (add lir	nes 1c and 1d)		0.	0.
f Lobbying nontaxable an	nount. Enter the am	ount from the following tab	ole in		
		The falls for manharable			
Not over \$500,000	lumn (a) or (b) is	The lobbying nontaxable 20% of the amount on line 1e.	amount is	10 20	
Over \$500,000 but not over \$1	000 000	\$100,000 plus 15% of the exces	s over \$500 000	10 11 11	
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess		4.5	
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	amount (enter 25%	of line 1f)	*******	0.	0.
h Subtract line 1g from line 1a. If zero or less, enter -0					0.
i Subtract line 1f from lin	e 1c. If zero or less	, enter -0		0.	0.
j If there is an amount ot section 4911 tax for this	her than zero on eit year?	her line 1h or line 1i, did th	ne organization file Form	n 4720 reporting	Yes No
(So)	me organizations th	4-Year Averaging Period nat made a section 501(h)	Under section 501(h)	complete all of the five	
	columns b	elow. See the separate ins	tructions for lines 2a tl	nrough 2f.) 	
	Lobb	ying Expenditures During	4-Year Averaging Peri	oq	
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					0.
b Lobbying ceiling amount (150% of line 2a, column (e))					. 0.
c Total lobbying expenditures					0.
d Grassroots nontaxable amount					0.
e Grassroots ceiling amount (150% of line 2d, column (e))			Part Co.		0.
f Grassroots lobbying expenditures					0.
BAA				Schedule C (Form	990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 DALLAS AFTERSCHOOL Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description No Amount of the lobbying activity. Yes 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? ..... b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?...... c Media advertisements? d Mailings to members, legislators, or the public? ..... e Publications, or published or broadcast statements?..... f Grants to other organizations for lobbying purposes?..... g Direct contact with legislators, their staffs, government officials, or a legislative body?..... h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?..... | Other activities?.... j Total, Add lines 1c through 1i..... 2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?...... b If 'Yes,' enter the amount of any tax incurred under section 4912..... c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912..... d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?..... Part IIIA Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? ..... Part IEB Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered Yes. 1 Dues, assessments and similar amounts from members..... 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a a Current year..... 2 b 2 c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ...... 3

Part IV Supplemental Information

expenditure next year? .....

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines I and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Taxable amount of lobbying and political expenditures (see instructions) ......

4

5

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	DALLAS AFTERSCHOOL				38983	
	Organizations Maintaining Dono Complete if the organization ans	or Advised Funds or Ot wered 'Yes' on Form 99	ner Similar Fun 0, Part IV, line	ids or Accounts. 6.		
		(a) Donor advised	funds	(b) Funds and	other acco	unts
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 donors are the organization's property, subject to the organization's	organization's exclusive legal o	ontrol?,	[	Yes	No
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing the donor or donor advisor,	g that grant funds of or for any other pu	can be used only rpose conferring	Yes	No
	Conservation Easements. Complete if the organization answ	wered 'Yes' on Form 990	), Part IV, line	7.		
1	Purpose(s) of conservation easements held by	the organization (check all tha	t apply).			
	Preservation of land for public use (e.g., re	creation or education)	Preservation of	a historically importa	nt land are	а
	Protection of natural habitat		Preservation of	a certified historic str	ructure	
	Preservation of open space		<u> </u>			
2	Complete lines 2a through 2d if the organization last day of the tax year.	n held a qualified conservation	contribution in the			
				(0.000.0000)	End of the	Tax Year
	Total number of conservation easements					
	Total acreage restricted by conservation easem					
•	: Number of conservation easements on a certific	ed historic structure included in	1 (a)	2c		
	Number of conservation easements included in structure listed in the National Register Number of conservation easements modified, to			2 d	uring the	
3	tax year	aristerred, released, extiliguisi	led, or terminated t	by the organization di	ang ne	
4	Number of states where property subject to con-	servation easement is located	<b>-</b>			
5	Does the organization have a written policy regard and enforcement of the conservation easements	s it holds?			Yes	No
	Staff and volunteer hours devoted to monitoring					
7	Amount of expenses incurred in monitoring, ins ▶\$	pecting, handling of violations,	and enforcing con	servation easements	during the	year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, describe how the organization repor include, if applicable, the text of the footnote to conservation easements.	ts conservation easements in the organization's financial st	its revenue and ex atements that desc	pense statement, and ribes the organization	d balance s n's account	heet, and ing for
<u> </u>	Organizations Maintaining Collecti Complete if the organization answ	ons of Art, Historical Tre vered 'Yes' on Form 990	asures, or Othe , Part IV, line 8	r Similar Assets. 3.		
1 a	If the organization elected, as permitted under S art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its financial	FAS 116 (ASC 958), not to re held for public exhibition, educ al statements that describes t	port in its revenue ation, or research i hese items.	statement and baland in furtherance of publ	ce sheet wo ic service, i	orks of provide,
b	If the organization elected, as permitted under S historical treasures, or other similar assets held following amounts relating to these items:	for public exhibition, education	n, or research in ful	rtherance of public se	heet works rvice, prov	of art, ide the
	(i) Revenue included on Form 990, Part VIII, lin	e 1				
	(ii) Assets included in Form 990, Part X			▶\$		
	If the organization received or held works of art, amounts required to be reported under SFAS 110	6 (ASC 958) relating to these I	tems:		the following	ng
	Revenue included on Form 990, Part VIII, line 1					
L.	Accete included in Form 990, Part X					

	Temporarily restricted endowment			
	The percentages on lines 2a, 2b, and 2c should equal 100%.			
	Are there endowment funds not in the possession of the organization that are held and administered for the organization by:		Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3 <b>a</b> (ii)		
Ь	If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		
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
1 a Land.,,			GARAGE PROPERTY.	
<b>b</b> Buildings				
c Leasehold improvements				1
d Equipment		240,818.	171,406.	69,412.
e Other		33,194.	33,194.	0.
Total, Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part X, co	olumn (B), line 10c.)		69,412.

BAA

items (check all that apply): Public exhibition

Scholarly research

1 a Beginning of year balance..... 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.....

**b** Permanent endowment ▶

Part XIII.

Schedule D (Form 990) 2017

(a) Description of security or category (including name of security)	(b) Book value	O, Part IV, line 11b. See Form 990, Part X, line 12.  (c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	(4)	
(2) Closely-held equity interests.		
/2\ Other		
(A) (B)		
(C)		
(D)		
(E)		
<u>(P</u>		
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		
Ran VIII Investments - Program Related.	Ves' 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
	(b) Book value	(a) morned of various for the second
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)	<u> </u>	
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A	
Part X Other Assets.	s' on Form 990. P	art IV, line 11d. See Form 990, Part X, line 15.
(a) Descr	iption	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) li	ne 15.)	
Part X Other Liabilities.	0 for the Par 11 and 1	14 Con Form 000 Part V line 25
		IT See Form 990 Part & line 75
Complete if the organization answered 'Yes' on Form 99	U, Part IV, line Tie or I	TI, COC TOTAL OC, TURE No THE CO
(a) Description of liability	(b) Book value	The coordinates of the coordinat
(a) Description of liability (1) Federal income taxes	(b) Book value	
(a) Description of liability (1) Federal income taxes (2)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	(b) Book value	
(a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	(b) Book value	ancial statements that reports the organization's liability for uncertain

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a	1.	
1 Total revenue, gains, and other support per audited financial statements	1	1,743,466.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	2,532.	
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2е	62,532.
3 Subtract line 2e from line 1	3	1,680,934.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	8.0	
a Investment expenses not included on Form 990, Part VIII, line 7b	2.3	
b Other (Describe in Part XIII.)	8,601.	
c Add lines 4a and 4b	4с	-8, <u>601.</u>
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,672,333.
Part XIII 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	1,684,450.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	7.3	
a Donated services and use of facilities	2,532.	
b Prior year adjustments		
c Other losses	8,601.	
d Other (Describe in Part XIII.)	34.	
e Add lines 2a through 2d	2e	71,133.
3 Subtract line 2e from line 1,	3	1,613,317.
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		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		444
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	, 5	1,613,317.
Par 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.

#### **PART X - FIN 48 FOOTNOTE**

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND HAS NOT BEEN CLASSIFIED AS A PRIVATE FOUNDATION AS DEFINED IN THE IRC. INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE ORGANIZATION'S EXEMPT PURPOSES IS SUBJECT TO TAX UNDER IRC SECTION 511. THE ORGANIZATION HAD NO UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2018. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR FEDERAL INCOME TAX.

#### PART X - FIN 48 FOOTNOTE (CONTINUED)

GAAP REQUIRES THE EVALUATION OF TAX POSITIONS TAKEN IN THE COURE OF PREPARING THE ORGANIZATION'S TAX RETURN AND RECOGNITON OF A TAX LIABILITY (OR ASSET) IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE ORGANIZATION AND HAS CONCLUDED THAT AS OF JUNE 30, 2018 THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

#### SCHEDULE D, PART XI, LINE 4B OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

LOSS ON DISPOSAL OF	ASSETSTOTAL	\$ -	-8,601. -8,601 <u>.</u>
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# SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization enswered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form99@or the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization						Employer Identific	
DALLAS AFTERSCHOOL						76-083898	3
Fundraising Activities. Comp Form 990-EZ filers are not re	lete if the organ	nization ar ete this pa	nswered 'Y art.	es' on Form 990, Part l	V, line 17	7.	
1 Indicate whether the organization r	aised funds thr	ough any	of the follo	wing activities. Check a	all that ap	ply.	
a Mail solicitations				Solicitation of non-			
b Internet and email solicitations	•		f	Solicitation of gove	ernment g	yrants	
c Phone solicitations			g	H			
d In-person solicitations							
2a Did the organization have a writter	er erel egreen	ant with a	on cindivid	hal (including officers of	directors	trustees or ke	v
employees listed in Form 990, Parl	: VII) or entity i	n connecti	ion with pr	ofessional fundraising s	ervices?		Yes X No
b If 'Yes,' list the 10 highest paid ind compensated at least \$5,000 by the	ividuals or entit e organization.	ies (fundra	aisers) pur	rsuant to agreements ur	nder whic	h the fundraise	r is to be
		Allio Did	fundacione		(v) Am	ount paid to	(vi) Amount paid to
(I) Name and address of individual or entity (fundraiser)	(ii) Activity	have custo	fundraiser dy or control ributions?	(iv) Gross receipts from activity	fundra	etained by) iser listed in olumn (i)	(or retained by) organization
		Yes	No			Martin (1)	
1							
-							
2					1		
					<del>                                     </del>		
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10							
		· · _					
Total							0.
Total				cit contributions or has l	been noti	fied it is exemp	
or licensing.	io giotalo						

76-0838983 Page 2 Schedule G (Form 990 or 990-EZ) 2017 DALLAS AFTERSCHOOL Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (add column (a) through column (c)) **(b)** Event #2 (c) Other events (a) Event #1 NONE RECESS (event type) (total number) (event type) REVENUE 130,660. 130,660. T Gross receipts . .... 118,540. 118,540 12,120. 3 Gross income (line 1 minus line 2) . . . . 12,120. 4 Cash prizes...... 4,450. 5 Noncash prizes....... 4,450. DIRECT 7,235. 7,235. 27,129. 27,129. 7 Food and beverages ..... EXPENSES 3,000. 8 Entertainment..... 3,000. 6,756. 6,756. 9 Other direct expenses..... 48,570. 10 Direct expense summary. Add lines 4 through 9 in column (d)...... 11 Net income summary. Subtract line 10 from line 3, column (d)...... -36,450.Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (a) Bingo bingo/progressive bingo (c) Other gaming (add column (a) REVENUE through column (c)) 2 Cash prizes..... DIRECT 3 Noncash prizes..... 5 Other direct expenses..... Yes Yes Yes No 6 Volunteer labor..... No No 7 Direct expense summary. Add lines 2 through 5 in column (d)...... 9 Enter the state(s) in which the organization conducts gaming activities: a is the organization licensed to conduct gaming activities in each of these states?..... No b if 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? .....

b If 'Yes,' explain:

Sche	dule G (Form 990 or 990-EZ) 2017 DALLAS AFTERSCHOOL	76-0838983	Page
11	Does the organization conduct garning activities with nonmembers?	Yes	No
12	ls the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity tadminister charitable gaming?	formed to Yes	□ Ne
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	
b	An outside facility	13b	
14	Enter the name and address of the person who prepares the organization's gaming/special events books an	d records:	
	Name •		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming reven	ue?Yes	
b	If 'Yes,' enter the amount of gaming revenue received by the organization 🕨 💲 and	the amount	
	of gaming revenue retained by the third party > \$		
C	If 'Yes,' enter name and address of the third party:		
	Name •		
	Address •		
16	Gaming manager information:		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided 🔭		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
	s the organization required under state law to make charitable distributions from the gaming proceeds to ret state gaming license?		No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or	spent in the	
	organization's own exempt activities during the tax year 🕨 \$		/. A .
	Supplemental Information. Provide the explanations required by Part I, line 2b, and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide	anv additional	(v),
	information. See instructions.		

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Attach to Form 950 or 950-E2.

► Go to www.irs.gov/Form99@or the latest information.

2017 Open to Public impection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

DALLAS AFTERSCHOOL

Employer identification number

76-0838983

### FORM 990, PART VIII INCOME FROM FUNDRAISING EVENTS

THE NET ECONOMIC BENEFIT FROM OUR FUNDRAISING EVENT IS CALCULATED AS FOLLOWS:

CONTRIBUTIONS FROM FUNDRAISING EVENT REPORTED ON PART VIII, LINE 1C \$ 118,540

GROSS INCOME FROM FUNDRAISING EVENT REPORTED ON PART VIII, LINE 8A 12,120

LESS: DIRECT COSTS OF EVENT REPORTED ON PART VIII, LINE 8B (48,570)

NET ECONOMIC BENEFIT OF FUNDRAISING EVENT \$ 82,090

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

DALLAS AFTERSCHOOL IMPROVES THE QUALITY AND AVAILABILITY OF OUT OF SCHOOL TIME IN OUR COMMUNITY. WE PROVIDE RESOURCES AND SUPPORT SUCH AS PROFESSIONAL TRAINING, BEST PRACTICES AND STANDARDS, NETWORKING OPPORTUNITIES, ADVOCACY SUPPORT AND PROGRAM RESOURCES TO AFTERSCHOOL AND SUMMER PROVIDERS.

## FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

DALLAS AFTERSCHOOL IMPROVES THE QUALITY AND AVAILABILITY OF OUT OF SCHOOL TIME IN OUR COMMUNITY. WE PROVIDE RESOURCES AND SUPPORT SUCH AS PROFESSIONAL TRAINING, BEST PRACTICES AND STANDARDS, NETWORKING OPPORTUNITIES, ADVOCACY SUPPORT AND PROGRAM RESOURCES TO AFTERSCHOOL AND SUMMER PROVIDERS.

# FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR, EXTERNAL ACCOUNTANT, THE TREASURER, AND THE CHAIRMAN OF THE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

IF A POTENTIAL VIOLATION OF THE CONFLICT OF INTEREST POLICY OCCURS, THE ORGANIZATION HAS A FORMAL REPORTING PROCESS TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT
THE BOARD REVIEWS THE AGENCY'S GOALS FOR THE COMING YEAR, PAST YEAR'S PERFORMANCE
AND BENCHMARK COMPENSATION FOR SIMILAR SIZED ORGANIZATIONS BEFORE MAKING

76-0838983

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT (CONTINUE COMPENSATION DECISIONS.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

THE BOARD REVIEWS THE AGENCY'S GOALS FOR THE COMING YEAR, PAST YEAR'S PERFORMANCE

AND BENCHMARK COMPENSATION FOR SIMILAR SIZED ORGANIZATIONS BEFORE MAKING

COMPENSATION DECISIONS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE
ALL DOCUMENTS ARE AVAILABLE UPON REQUEST AND THE FINANCIAL STATEMENTS AND 990 ARE
AVAILABLE ON THE ORGANIZATION'S WEBSITE AND THIRD PARTY WEBSITES SUCH AS CHARITY
NAVIGATOR, DONOR BRIDGE AND GUIDESTAR.