Form	99	0
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For	m 9	90									Í	OMB No. 1545-0047
1 011			Re	eturn of	Organiza	tion Exe	mpt Fr	om Inco	ome T	ax		2023
			Under se	ection 501(c),	527, or 4947(a)(1) of the Interna	I Revenue Co	ode (except pr	rivate fou	ndations)		
Depa Inter	artment nal Rev	of the Treasury venue Service		Do not ent Go to www.i	er social security r <mark>s.gov/Form990 f</mark>	numbers on th	is form as it ns and the	may be made e latest info	public. rmation	ı.		Open to Public Inspection
A	For t	he 2023 calend						and ending				, 20 2024
В	Check	if applicable:	С							D Emplo	yer iden	tification number
	A	ddress change	DALLAS AF								0838	
	_	ame change	3900 WILL DALLAS, T	JOW STRE	ET #110					E Teleph		
		nitial return		.A 15220						(21	4) 3	06-8400
		nal return/terminated								C •		¢ 2.1.00.025
		mended return pplication pending	F Name and add	less of principa	officer:			н	(a) Is this	G Gross a group retu	· ·	0/200/0001
		pplication pending	SAME AS C		MARJ	ORIE MUR	A'I'		(b) Are al	l subordinate	s include	ed? Yes No
ī	Tax	-exempt status:	X 501(c)(3)	501(c) () (inse	rt no.) 4	947(a)(1) or	527	If "No,	" attach a lis	t. See in	structions.
J			W.DALLASA						(c) Group	exemption r	umber	
Κ	Forr	n of organization:	X Corporation	Trust	Association	Other	LY	ear of formatior				legal domicile: TX
Pa	art I	Summary	/									
	1											THE PLAYING
Se												G THE QUALITY
nan		DALLAS C		OF AFTER	KSCHOOL AI	ND SUMME	R PROGE	RAMS FUE	<u>COVE</u>	<u>R 19,0</u>	<u>00 S</u>	TUDENTS IN
Governance	2	Check this bo		organizatio	n discontinued	its operation	ns or dispo	sed of more	e than 2	25% of its	net as	
	3		ting members	of the gover	ning body (Pa	rt VI, line 1a)					13
ര്	4		lependent voti	-	-			•			4	13
vitie	5 6		of individuals of volunteers								5	<u>18</u> 155
Activities &	-	Total unrelate									0 7a	0.
		Net unrelated									7b	0.
										Prior Year		Current Year
e	8		and grants (Pa							1,834,		3,051,787.
Revenue	9	-	ice revenue (P come (Part VII		÷.					152,		62,925.
Rev	10 11		e (Part VIII, col							-16,	<u>831.</u> 379	4,861.
	12		 add lines 8 							1,979,		3,083,120.
	13	Grants and si	milar amounts	paid (Part I	X, column (A)	, lines 1-3)						170,000.
	14	•	to or for mem									
es	15		r compensatio						-	1,507,	112.	1,457,903.
nse	16a	Professional f	undraising fee	s (Part IX, d	olumn (A), lin	e 11e)						
Expense	b	Total fundrais	ing expenses ((Part IX, col	umn (D), line 2	25)	34	8,730.				
ш	17	•	es (Part IX, co			,				718,		728,078.
	18		es. Add lines 1						4	2,225,		2,355,981.
	19	Revenue less	expenses. Sul	btract line 1	8 from line 12					-246,		727,139.
Net Assets or Fund Balances	20	Total assots (Part X, line 16	5)						ng of Curre		End of Year
\ese! Bala	20		s (Part X, line 10							1,423, 324,		2,128,814. 302,075.
Vet /	22		fund balances							1,098,		1,826,739.
_	art II	Signatur				0 20			-	1,090,	412.	1,020,739.
Unde	er pena	Ities of perjury, I de	clare that I have ex	amined this retu	rn, including accon	npanying schedul	es and statem	ents, and to the	e best of r	ny knowleda	e and be	lief, it is true, correct, and
com	plete. D	Declaration of prepar	er (other than office	er) is based on	all information of w	hich preparer has	s any knowled	lge.		,		
		Oin 1 1	- (f :									
Sig	gn	Signature of							Date			
He	re		IE MURAT					CE	0			
			reparer's name		Preparer's signati	ure		Date		Check	if	PTIN

BAA For Paperwork Reduction Act Notice, see the separate instructions.			TEEA0101L 08/	23/23	Form	99 0	(2023)	
May the IRS discuss this return with the preparer shown above? See instructions X Yes No								
		ARLINGTON, TX 76	011		Phone no. 817	-649-8083		
Use Only	Firm's address	200 E FRONT ST,	SUITE 200		Firm's EIN 75	52593210		
Preparer Use Only	Firm's name	SUTTON FROST CAR	Y LLP					
Paid		ZABETH ARNOTT			self-employed	P01965628		

Form	n 990 (2023) D	ALLAS A	FTERSCHO	JL					76-0	83898	3	Pag	je 2
Par					nplishments								_
					ote to any line	in this Pa	rt III						Х
1	Briefly describe	-	zation's missio	on:									
	SEE SCHEDU	JLE O											
2	Did the organizat	tion undertal	ke anv significa	ant program se	ervices during th	ne vear whi	ch were not	listed on the	prior				
2	Form 990 or 99				-	-					Yes	Z N	lo
	If "Yes," describe									··· 🗀		1	Ū
3	Did the organiza				ficant changes	in how it	conducts, a	iny program	services?	🔲	Yes	K N	lo
	If "Yes," describe	e these chan	nges on Schedu	ule O.							L		
4	Describe the or	ganization's	s program ser	vice accompli	shments for ea	ach of its t	three larges	st program s	ervices, as i	neasure	d by exp	ense	s.
	Section 501(c)(and revenue, if	3) and 501((c)(4) organiza ch program se	ations are rec ervice reporte	uired to report	the amou	int of grants	s and alloca	tions to othe	rs, the t	otal exp	enses	,
		u.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ion program o										
4a	(Code:) (Expe	nses \$ 1	785 459	including g	rants of	5 1 [.]	70 000) (Revenue	\$	62	925)
	DALLAS AF												
	TO SAFE, H												
	CHANGE IS						`						
	CERTIFICA	TION FOR	R SAFETY	AND QUAL	ITY, ALON	G WITH	PROFES	SIONAL 1	DEVELOPM	ENT,	LEADS	TO	
	OVERALL IN												
	<u>180 FREE</u>												
	<u>OVER 19,00</u>												
	NATIONAL (
	DALLAS PAR	<u>RK & REC</u>	CREATION,	TO LOCA	L PROGRAM	S SUCH	<u>AS HEA</u>	RT HOUSI	<u>AND JU</u>	BITEE	PARK	·	
/h	(Code:) (Expe	nses \$		including g	rants of	5) (Revenue	Ś			<u> </u>
-10	(00000.) (Expe					r			т <u> </u>			_′
Ac	(Code:) (Expe	nses Ś		including g	rants of	\$) (Revenue	Ś			<u> </u>
	(00000.) (Expe						·		Υ			_'
∆d	Other program	services (D	escribe on Sc	hedule ())									
	(Expenses \$			including gra	ants of \$) (Revenue	\$)		
4e	Total program s		enses		5,459.								
R۸۸				, -	TEE 00102	00/02/02					Form 9	90 (20	123)

~ Forn

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

Form 990 (2023)

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 Form 990 (2023)
 DALLAS
 AFTERSCHOOL

 Part IV
 Checklist of Required Schedules (continued)

76-0838983	

Page 4

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	163	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
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? <i>If "Yes," complete Schedule L, Part I</i> .	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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		Х
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? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	-		
	Check if Schedule O contains a response or note to any line in this Part V			· 🗌
-			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	-		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	

Form	990 (2023) DALLAS AFTERSCHOOL 76-08389	83	I	Page 5
Par	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a	8		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		-	Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		──
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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 partly for goods and services provided to the payor?	7a	X	
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
Ь	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	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.).			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		-
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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	_		
	Enter the amount of reserves on hand	14		X
	Did the organization receive any payments for indoor tanning services during the tax year?		-	^
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		Х
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b b a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	elow nges	, and on	d for
	Check if Schedule O contains a response or note to any line in this Part VI.			. Х
Sec	tion A. Governing Body and Management		Vee	
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		Yes	No
b	Enter the number of voting members included on line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents	4		v
_	since the prior Form 990 was filed?	4		X X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	5 6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	0		
7 a	members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	<u> </u>
	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	ode.)
			Yes	-
	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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?	1 0 b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O	10	37	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	<u> </u>
с	to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on</i>	12b	<u>Х</u>	
13	Schedule O how this was done SEE . SCHEDULE . Q. Did the organization have a written whistleblower policy?	12c 13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	<u> </u>
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?			
а	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. 0.	15a	Х	
	Other officers or key employees of the organizationSEE . SCHEDULE. O.	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			L
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.)1(c)(3	s on	ly)
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year.	ble to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
BAA	ANDREA KERCH 3900 WILLOW STREET #110 DALLAS TX 75226 (214) 306-8400 TEEA0106L 08/23/23	Form	990 ((2023)

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest C Independent Contractors	Compensated Employe	es, and
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 Compensate	ed Employees	
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending w organization's tax year.		
 List all of the organization's current officers, directors, trustees (whether individuals or organizatio 	ns), regardless of amount of	

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

			(C)							
(A)	(B)	(do	Position (do not check more than one			ne	(D)	(E)	(F)	
Name and title	Average hours	offic	unless er and	a dir	rootor	(trunto	2	Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week (list any	Individual trustee or director	Institutional trustee	Officer	Key employee	High	Fon	the organization (W-2/1099-	related organizations (W-2/1099-	compensation from the organization
	hours for related	irec	ituti	Cer	em	nest	ner	MISC/1099-NEC)	MISC/1099-NEC)	and related organizations
	organiza- tions	tor tor	onal		ploy	e con				
	below dotted	uste	trus		ee	pen				
	line)	õ	itee			Highest compensated				
(1) MARJORIE MURAT	40					<u>م</u>				
CEO	0			х				140,690.	0.	15,004.
(2) SARAH ELLIOTT	40									
VP DEVELOPMENT	0	1				Х		131,838.	0.	4,765.
(3) OLGA GONZALEZ	40									,
VP OF PROGRAM SERV	0	1				Х		121,683.	0.	1,579.
(4) JANET MOCKOVCIAK	1									<u>.</u>
DIRECTOR	0	Х						0.	0.	0.
(5) MARCIA BARNES	1									
DIRECTOR	0	Х						0.	0.	0.
(6) ELLEN MILLER	1									
DIRECTOR	0	Х						0.	0.	0.
(7) ANNE WICKS - THRU 1/24	1									
DIRECTOR	0	Х						0.	0.	0.
(8) EVA HEVRON	2									
TREASURER	0	Х		Х				0.	0.	0.
(9) KRISTI ERICKSON	1									
DIRECTOR	0	Х						0.	0.	0.
(10) SHANE WOODS	1							_		_
DIRECTOR	0	Х						0.	0.	0.
(11) TRILLION SMALL	1									
DIRECTOR	0	Х						0.	0.	0.
(12) JOHN HILL	2									0
SECRETARY	0	Х		Х				0.	0.	0.
(13) BILL MORRISON	2		.	.,				<u> </u>		^
CHAIRMAN (14) NURDEN COLEMAN	0	Х		Х				0.	0.	0.
(14) AUBREY COLEMAN	1	.,,						~	~	^
DIRECTOR	0	Х						0.	0.	0.
BAA	TEEA0	107L	08/23/	23						Form 990 (2023)

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Par	t VII Section A. Officers, Directors, Tru	stees, I	Key	Em	-	oye C)	es, a	and	d Highest Com	pensated Emp	loyees	; (conti	inued)
	(A) Name and title	(B) Average hours per week (list any hours for related organiza- tions below dotted line)	box,	unles er an	Posi heck ss pe	ition more rson i irecto	than other than both the Highest compensated employee	an ee)	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	compe the o an	(F) ated am of other nsation rganizat d related anization	from tion d
(15)	NICOLE JOLLY DIRECTOR	$-\frac{1}{0}$	X						0.	0.			0.
(16)	DR. OLGA HICKMAN DIRECTOR	1	Х						0.	0.			0.
(17)	DAVID RUSSELL	<u>1</u>	X						0.	0.			0.
(18)									0.	0.			0.
(19)													
(20)													
(21)													
(22)													
(23)													
(24)			•										
(25)													
1b	Subtotal								394,211.	0.). 21,348.		
С	Total from continuation sheets to Part VII, Section	on A							0.	0.			
	Total (add lines 1b and 1c) Total number of individuals (including but not limited								394,211.	0.			348.
	from the organization 3	to those i	Istea	abo	ve) \	who	recen	vea	more than \$100,00	o of reportable comp	ensatio	1	
												Yes	No
3	Did the organization list any former officer, direct on line 1a? If "Yes, "complete Schedule J for such	or, truste <i>n individu</i>	e, ke al	ey ei	mplo	oyee	e, or	high	nest compensated	employee	. 3		X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab r than \$1	le co 50,0	тре 00?	ensa If "	ition Yes,	and " con	oth nple	er compensation tetre schedule J for	from	4	X	
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e compen	satio	n fr	om	anv	unre	late	d organization or	individual			X
	ion B. Independent Contractors											<u> </u>	
1	Complete this table for your five highest compensation from the organization. Report compensation	sated inde sation for	epen the c	dent alen	t coi dar '	ntra year	ctors endii	tha ng v	t received more the with or within the or	nan \$100,000 of ganization's tax year			
(A) Name and business address									(B) Description of	of services	(Compe	C) ensatio	on
STRA	TEGIC FOCUS EDUCATIONAL SERVICES 1800	S. GOOD	LAT	IME	RΕ	XPY	DAI	LA	EDUCATIONAL S	UPPORT	2	21,9	944.
2	Total number of independent contractors (including b	ut not limi	ited t	o tha	ose l	isteo	d abo	ve)	who received more	than			
	\$100,000 of compensation from the organization	1											

BAA

Form 990 (2023) DALLAS AFTERSCHOOL

Part VIII Statement of Revenue

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Par	t VI	Statement of Revenue	a roc	nonco or noto to on	v line in this Part VI	11		
		Check if Schedule O contains	<u>a res</u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ম ম	1a	Federated campaigns	1a	7,937.				
Ter The	b	Membership dues	1b	,				
ŪĔ	с	Fundraising events	1c	76,101.				
ar /	d	Related organizations	1d					
s, s	e	Government grants (contributions)	1e	582,123.				
Contributions, Gifts, Grants, and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,385,626.				
ΪŎ	g	Noncash contributions included in lines 1a-1f.	1g					
	h	Total. Add lines 1a-1f			3,051,787.			
Program Service Revenue	_			Business Code				
wer		<u>CLIENT FEES</u>		900099	62,925.	62,925.		
å	b	'						
žič	C							
Sei	d	·						
am	e							
bo	T	f All other program service revenue g Total. Add lines 2a-2f		60,005				
đ.					62,925.			
	3	Investment income (including divide other similar amounts)	ends,	interest, and	4,861.			4,861.
	4	Income from investment of tax-e			4,001.			4,001.
	5	Royalties						
		(i) R		(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	с	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	a Gross amount from (i) Securities (ii) (
		sales of assets other than inventory 7a						
	b	Less: cost or other basis						
		and sales expenses 7b						
		Gain or (loss) 7c						
		Net gain or (loss)	· · · · ·					
en	8a	Gross income from fundraising events						
ēD		(not including \$ 76,101 of contributions reported on line 1c).	<u> </u>					
ě		See Part IV, line 18	c	a 21.869				
P-	h	Less: direct expenses		a <u>21,869.</u> b 69,318.	-			
Other Revenue		Net income or (loss) from fundra		00,010.	-47,449.			-47,449.
9		Gross income from gaming activities.	Γ					
		See Part IV, line 19	9	a 8,150.				
	b	Less: direct expenses	9	b 5,152.				
	С	Net income or (loss) from gamin	g acti	vities	2,998.			2,998.
	1 0 a	Gross sales of inventory, less returns and allowances						
				Ja <u>3,300.</u>				
		Less: cost of goods sold		b 3,345.				
	С	Net income or (loss) from sales	UT INV	Business Code	-45.	-45.		
SUC	11-	MICOULINDOUS			0.040	0.042		
scellaneo Revenue	11а ь	MISCELLANEOUS		900099	8,043.	8,043.		
ven Ven	0 2							
Miscellaneous Revenue	л Ч	All other revenue						
Σ		Total. Add lines 11a-11d		L	8,043.			
		Total revenue. See instructions.			3,083,120.	70,923.	0.	-39,590.
					5,005,120.	10,343.	υ.	-39,390.

Form 990 (2023) DALLAS AFTERSCHOOL			76-0838	983 Page 1
Part IX Statement of Functional Expense		or propriations much	molata adume (A)	
Section 501(c)(3) and 501(c)(4) organizations must com	•			Γ
Check if Schedule O contains a r	esponse or note to any (A)	(B)	(C)	(D)
<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	170,000.	170,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	,	,		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	160,328.	115,147.	11,611.	33,570
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described	100, 520.	113,147.		
in section 4958(c)(3)(B)	0.	0.	0.	0
7 Other salaries and wages	1,077,618.	764,918.	78,518.	234,182
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	22,808.	14,516.	2,334.	5,958
9 Other employee benefits	81,176.	67,137.	5,445.	8,594
10 Payroll taxes	115,973.	85,341.	7,672.	22,960
11 Fees for services (nonemployees):	-,			
a Management				
b Legal				
c Accounting	61,957.	1,650.	60,307.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	119,850.	84,352.	21,324.	14,174
12 Advertising and promotion.	5,592.	1,608.	2,916.	1,068
13 Office expenses	16,622.	12,727.	1,288.	2,607
14 Information technology	29,363.	21,570.	3,479.	4,314
15 Royalties	102 (02	00.000	7 004	12 410
16 Occupancy	103,602.	82,900.	7,284.	13,418
 Payments of travel or entertainment expenses for any federal, state, or local public officials. 	8,180.	6,520.	1,660.	
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization	15,407.	12,326.	616.	2,465
 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.). 	12,852.	8,178.	2,858.	1,816
a CLIENT SERVICES	265,513.	265,064.	449.	
b STUDENT SUPPORT	25,960.	25,960.		
c <u>COMMUNICATIONS</u>	20,803.	16,837.	1,577.	2,389
d PROFESSIONAL DEVELOPMENT	18,281.	7,037.	10,329.	915
e All other expenses	24,096.	21,671.	2,125.	300
25 Total functional expenses. Add lines 1 through 24e	2,355,981.	1,785,459.	221,792.	348,730
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
SOP 98-2 (ASC 958-720)				Form 990 (2023

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Form 990 (2023) DALLAS AFTERSCHOOL

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Part X Balance Sheet

					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			79,011.	1	75,627
	2	Savings and temporary cash investments			679,652.	2	304,959
		Pledges and grants receivable, net			192,865.	3	290,162
	4	Accounts receivable, net			95,618.	4	,
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	cer, director, butor, or 35%		5		
		Loans and other receivables from other disqualified p				6	
		section 4958(f)(1)), and persons described in section				6	
	-	Notes and loans receivable, net		-		7	
	8	Inventories for sale or use				8	
		Prepaid expenses and deferred charges		-	37,792.	9	40,718
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		395,091.			
	b	Less: accumulated depreciation	1 0 b	363,354.	24,660.	10c	31,73
	11	Investments - publicly traded securities				11	1,103,02
	12	Investments - other securities. See Part IV, line 11				12	
•	13	Investments - program-related. See Part IV, line 11.			13		
•	14	Intangible assets				14	
•	15	Other assets. See Part IV, line 11			313,753.	15	282,58
	16	Total assets. Add lines 1 through 15 (must equal line	33)		1,423,351.	16	2,128,81
		Accounts payable and accrued expenses			31,324.	17	37,44
		Grants payable				18	
		Deferred revenue		19			
		Tax-exempt bond liabilities				20	
		Escrow or custodial account liability. Complete Part I				21	
	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	ricer, c utor, oi rsons	r 35%		22	
		Secured mortgages and notes payable to unrelated th		E		23	
		Unsecured notes and loans payable to unrelated third				24	
		Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•		293,615.	25	264,62
		Total liabilities. Add lines 17 through 25			324,939.	26	302,07
		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		X			,
		Net assets without donor restrictions			702,854.	27	1,313,68
i :	28	Net assets with donor restrictions			395,558.	28	513,05
		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck her	re 🗌			
		Capital stock or trust principal, or current funds			29		
		Paid-in or capital surplus, or land, building, or equipm				30	
	31	Retained earnings, endowment, accumulated income,				31	
		Total net assets or fund balances			1,098,412.	32	1,826,73
11		Total liabilities and net assets/fund balances	1,423,351.	33	2,128,81		

		083898	3	Pa	age 12	
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,0	83,1	L20.	
2	Total expenses (must equal Part IX, column (A), line 25).	2			981.	
3	Revenue less expenses. Subtract line 2 from line 1	3			L39.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			412.	
5	Net unrealized gains (losses) on investments.	5			L88.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1 8	1,826,739.		
Par	t XII Financial Statements and Reporting	10	1,0	20,1	55.	
1 01	Check if Schedule O contains a response or note to any line in this Part XII				. П	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both.	ed on a				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	ate				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?	Uniform	. 3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b			
BAA	TEEA0112L 08/23/23		Form	99 0	(2023)	

SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ

OMB No. 1545-0047 2023

Depart Interna	ment al Rev	of the Treasury venue Service	G	o to www.irs.gov/For	Open to Public Inspection								
Name	of the	e organization							Employer identific	ation number			
DAI	ιLA	S AFTERSC	HOOL		76-08389								
Par	tl	Reason fo	r Public Cha	rity Status. (All o	organizations must	compl	ete thi	s part	.) See instru	ctions.			
					For lines 1 through 12,								
1		A church, conv	vention of church	nes, or association of c	hurches described in sec	tion 170	(b)(1)(A)	(i).					
2		A school des	cribed in sectio	n 170(b)(1)(A)(ii). (Att	tach Schedule E (Form	990).)							
3		A hospital or	a cooperative h	nospital service organ	ization described in se	ction 17	0(b)(1)(A	A)(iii).					
4		A medical res	search organiza	tion operated in conj	unction with a hospital	describe	d in sec	tion 17	/0(b)(1)(A)(iii) . E	Enter the hospital's			
		name, city, a	-										
5		An organizati section 170(b	 on operated for (((iv). (Co		ege or university owned				rnmental unit d	escribed in			
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	Х	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8		A community	trust described	in section 170(b)(1)((A)(vi). (Complete Part	II.)							
9		An agricultura	research organi	zation described in sec	ction 170(b)(1)(A)(ix) ope	rated in c	onjuncti	on with	a land-grant coll	ege			
		or university o	r a non-land-gra	nt college of agriculture	e (see instructions). Ente	er the nan	ne, city,	and sta	te of the college	or			
		university:											
10		An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
11		1			ely to test for public sat	fety. See	section	1 509(a)(4).				
12		An organizati	on organized a	nd operated exclusive	ely for the benefit of, to	nerform	n the fur	octions	of or to carry o	ut the nurnoses of or	าค		
		or more publi lines 12a thro	cly supported o ough 12d that de	rganizations describe escribes the type of s	ed in section 509(a)(1) supporting organization	or section and con	on 509(a nplete li)(2). S∉ nes 12¢	e section 509(a) e, 12f, and 12g.	a)(3). Check the box o	'n		
а		Type I. A supp organization(s complete Par	orting organizati) the power to re t IV, Sections /	on operated, supervise gularly appoint or elec A and B.	d, or controlled by its su t a majority of the directo	pported o ors or trus	stees of	ion(s), the sup	typically by giving porting organizat	g the supported ion. You must			
b		management	oporting organiz of the supporting te Part IV, Sect	organization vested in	controlled in connection the same persons that o	n with its control or	suppor manage	ted org the su	anization(s), by oported organiza	having control or tion(s). You			
с					tion operated in connection plete Part IV, Sections	on with, a A. D. an	nd functi d E.	onally ir	itegrated with, its	supported			
d		Type III non-fu	inctionally integ	rated. A supporting org	panization operated in co y must satisfy a distribution of a distribution of a construction of a construction of a construction of a const A construction of a construction of	nnection							
е				-	en determination from		that it is	a Tvn	e I Type II Typ	e III functionally			
•		integrated, or	Type III non-fu	inctionally integrated	supporting organizatio	n.		51					
f	Er	nter the numbe	er of supported	organizations									
g	Pr	ovide the follo	wing informatio	n about the supporte	d organization(s).								
	(i) Na	ame of supported of	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organiza in your o	ls the tion listed governing ment?		mount of monetary rt (see instructions)	(vi) Amount of other support (see instructions	s)		
						Yes	No						
(A)													
(B)													
(5)							ł – –						
(C)													
(D)													
(D)													
(E)	_												
Tota													

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	tion A. Fublic Support						
Cale begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,066,335.	2,143,890.	2,032,624.	1,834,455.	3,051,787.	11,129,091.
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	2,066,335.	2,143,890.	2,032,624.	1,834,455.	3,051,787.	11,129,091.
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)						1,400,380.
6	Public support. Subtract line 5 from line 4						9,728,711.
Sec	tion B. Total Support	1			1		
Cale begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	2,066,335.	2,143,890.	2,032,624.	1,834,455.	3,051,787.	11,129,091.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	278.	602.	2,655.	8,831.	4,861.	17,227.
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 TART VI	4,979.	2,379.	33.	10,855.	8,043.	26,289.
	Total support. Add lines 7 through 10						11,172,607.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	620,847.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization for the organization for the organization for the second sec	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
	tion C. Computation of Pu						
	Public support percentage for 20						87.08%
	Public support percentage from						92.33%
16a	33-1/3% support test—2023. If t and stop here. The organization	he organization di qualifies as a pul	id not check the b plicly supported o	oox on line 13, and rganization	d line 14 is 33-1/3	3% or more, check	k this box
b	33-1/3% support test–2022. If the and stop here. The organization						
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test. check this I	box and stop here	. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	test, check this l tion qualifies as a	box and stop here publicly supporte	e. Explain in Part d organization	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include						
2	any "unusual grants.") Gross receipts from admissions,						
2	merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose						
3	Gross receipts from activities						
	that are not an unrelated trade						
	or business under section 513.						
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on						
_	its behalf						
5	The value of services or facilities furnished by a						
	governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1,						
	2, and 3 received from disqualified persons.						
h	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
		(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2019	(b) 2020	(0) 2021	(u) 2022	(e) 2023	(1) 10(a)
-							
Tua	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from						
h	similar sources						
D	income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of						
	capital assets (Explain in						
10	Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is	for the organization	on's first, second.	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
	organization, check this box and	•					
	tion C. Computation of Pul					r	
	Public support percentage for 20	-			-		
-	Public support percentage from 2					16	010
Sec	tion D. Computation of Inv						
17	Investment income percentage f	or 2023 (line 10c,	column (f), divid	ed by line 13, col	umn (f))	17	olo
18	Investment income percentage f	rom 2022 Schedu	lle A, Part III, line	17			010
19a	33-1/3% support tests-2023. If t	the organization d	lid not check the	box on line 14, ar	nd line 15 is more	than 33-1/3%, and	d line 17
	is not more than 33-1/3%, check						
b	33-1/3% support tests – 2022. If t line 18 is not more than 33-1/3%	ne organization d	iia not check a bo	ox on line 14 or line or an	ne 19a, and line 1	b is more than 33-	nization
20	Private foundation. If the organiz		-				
20				·, · 20, 01 · 20, 0	Shook this box all	- 500 m 30 uction 15	· · · · · · · · · · · · · · · · · · ·

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Page 4

 Part IV
 Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
			Tes	NO
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.	1		
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).	2		
38	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
1	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.	3b		
	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.	3c		
4	a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
I	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.	4b		
(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.	4c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the			
	supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
I	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?	5b		
0	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor $(a, defined in contributor, area 25\%)$			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	a 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.	9a		
I	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the			
	supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
0	c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9с		
10		90		
108	a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"			
	answer line 10b below.	1 0 a		
I	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.)	10b		

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A pers	son who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
	the g	overning body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		

Section B. Type I Supporting Organizations

Schedule A (Form 990) 2023

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

DALLAS AFTERSCHOOL

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

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

Section 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 instructions).
 - a 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 governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

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

2a

2b

3a

76-0838983

Page 5

Yes

Yes

No

No

Yes

1

2

1

No

Part V

Page 6

1 Check here if the organization satisfied the Integral Part Test as a quinter transmission. All other Type III non-functionally integrated supporting	alifying trust on Nov. 20, 1970 (explain in Part VI). See organizations must complete Sections A through E.
Section A – Adjusted Net Income	(A) Prior Year (B) Current Year (optional)
1 Net short-term capital gain	1
2 Recoveries of prior-year distributions	2
3 Other gross income (see instructions)	3
4 Add lines 1 through 3.	4
5 Depreciation and depletion	5
6 Portion of operating expenses paid or incurred for production or collection income or for management, conservation, or maintenance of property her production of income (see instructions)	5
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 instruction tax year or assets held for part of year):	ns for short
a Average monthly value of securities	1a
b Average monthly cash balances	1b
c Fair market value of other non-exempt-use assets	1c
d Total (add lines 1a, 1b, and 1c)	1d
e Discount claimed for blockage or other factors (explain in detail in Part VI):	
2 Acquisition indebtedness applicable to non-exempt-use assets	2
3 Subtract line 2 from line 1d.	3
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater am see instructions).	punt, 4
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5
6 Multiply line 5 by 0.035.	6
7 Recoveries of prior-year distributions	7
8 Minimum Asset Amount (add line 7 to line 6)	8
Section C – Distributable Amount	Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1
2 Enter 0.85 of line 1.	2
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3
4 Enter greater of line 2 or line 3.	4
5 Income tax imposed in prior year	5
6 Distributable Amount. Subtract line 5 from line 4, unless subject to eme temporary reduction (see instructions).	rgency 6

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

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Schedule A (Form 990) 2023

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organiza	tions (continued	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ons	(iii) Distributable Amount for 2023
	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2023				
	From 2018				
Ł	P From 2019				
	From 2020				
-	From 2021				
	Prom 2022				
	f Total of lines 3a through 3e				
Ç	Applied to underdistributions of prior years				
ł	Applied to 2023 distributable amount				
	Carryover from 2018 not applied (see instructions)				
_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
ē	Applied to underdistributions of prior years				
-	Applied to 2023 distributable amount				
0	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
2	Excess from 2019				
t	Excess from 2020				
C	Excess from 2021				
	Excess from 2022				
(Excess from 2023				

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Schedule A (Form 990) 2023

Part VI

Page 8

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part II, 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	2023	2022	2021	2020	2019
MISCELLANEOUS INCOME	\$ 8,043.	<u>\$ 10,855.</u>	<u>\$ </u>	<u>\$2,379.</u>	\$ <u>4,979.</u>
TOTAL	\$ 8,043.	<u>\$ 10,855.</u>		<u>\$2,379.</u>	\$ <u>4,979.</u>

Schedule B (Form 990)

Department of the Treasury

Internal	Revenue	Service	

PUBLIC DISCLOSURE COPY Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.



2023

Name of the organization		Employer identification number		
DALLAS AFTERSCHOO	76-0838983			
Organization type (check o	ne):			
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			

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

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
 - For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
 - For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year.

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

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

Schedule B (Form 990) (2023)	1	2	Page 2
Name of organization	Employer identification numb	er	
DALLAS AFTERSCHOOL	76-0838983		

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		 \$140,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$75,000. \$	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>90,000.</u> 	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$75,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$75,000. \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		 \$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
ВАА	TEEA0702L 08/09/23		Schedule B (Form 990) (2023

Schedule B (Form 990) (2023)	2	2	Page 2
Name of organization	Employer identification number	er	
DALLAS AFTERSCHOOL	76-0838983		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>187,500.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$65,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>9</u>		\$ <u>321,021</u> .	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>10</u> _		\$1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>11</u> _		\$261,101.	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)	1	1	Page 3
Name of organization		dentification n	umber
DALLAS AFTERSCHOOL	76-08	38983	

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additiona	al space is needed.	
(a) 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
BAA	TEEA0703L 08/09/23	Schodula	 B (Form 990) (2023

	B (Form 990) (2023)		<u>1 1 Page</u>				
Name of orga			Employer identification number $76 - 0838983$				
Part III	AFTERSCHOOL	o contributions to oversi-	$\frac{76-0838983}{2}$				
Fartin			ations described in section 501(c)(7), (8), ontributor. Complete columns (a) through (e) and				
	the following line entry. For organizations co	ompleting Part III, enter the total of	f exclusively religious, charitable, etc.,				
	contributions of \$1,000 or less for the year.	Enter this information once. See i					
<	Use duplicate copies of Part III if additional	space is needed.					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
	N/A						
			+				
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
from Part I	(b) r urbose or give		(u) Description of now girt is new				
			l				
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
	L						
	L						
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Parti							
			+				
			+				
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
			·				
(-) N							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
	F						
			+				
	(e) Transfer of gift						
	Transferee's name, addres		Palationship of transforms to transforms				
		5, anu zir + 4	Relationship of transferor to transferee				
	 						
	 						
BVV		TEEA0704L 08/09/23	Schedule B (Form 990) (2023)				

SCHEDULE	С
(Form 990)	

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

Open to Public Inspection

> 0. 0. No

No

	Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not c	omplete Part I-B.
	Section 527 organizations: Complete Part I-A only.	•
If the	e organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying	g Activities), then:
• 5	Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A.	Do not complete Part II-B.
	Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Comple Part II-A.	ete Part II-B. Do not complete
lf the (Pro	e organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or xy Tax) (see separate instructions), then:	Form 990-EZ, Part V, line 35c
• 5	Section 501(c)(4), (5), or (6) organizations: Complete Part III.	
Name	of organization	Employer identification number
DAI	LLAS AFTERSCHOOL	76-0838983
Pai	t I-A Complete if the organization is exempt under section 501(c) or is a section	527 organization.
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions.	\$
3	Volunteer hours for political campaign activities. See instructions	
Pai	t I-B Complete if the organization is exempt under section 501(c)(3).	
1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes

4a Was a correction made?	Yes	No
b If "Yes," describe in Part IV.		

Par	t I-C	Comp	olete if	the	organiza	tion	is e	exempt	unc	ler	sectio	n 501	l(c) , exc	:ept	section 5	501(c)(3).	
	-		1 12				C 11								11. 11.	~	

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section
527 exempt function activities

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.

4	Did the filing	organization	file Form	1120-POL	for this	vear?
-	Did the ming	organization			101 1113	ycar

5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing 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)				
(5)				
(6)				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

Yes

Schedule C (Form 990) 2023 DALLAS AFTE		ERSCHOOL	76-08389	983 Page 2
Pa	rt II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (eleo	ction under
A B	address, EIN, expenses, a	ngs to an affiliated group (and list in Part IV each affiliat nd share of excess lobbying expenditures). ked box A and "limited control" provisions apply.	ed group member's name,	
	Limits on Lobb (The term "expenditures" me	ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence p	ublic opinion (grassroots lobbying)		
b	Total lobbying expenditures to influence a	legislative body (direct lobbying)	533.	
С	Total lobbying expenditures (add lines 1a	and 1b)	533.	0.
d	Other exempt purpose expenditures		1,784,926.	
е	Total exempt purpose expenditures (add I	ines 1c and 1d)	1,785,459.	0.
f	Lobbying nontaxable amount. Enter the an columns.	mount from the following table in both	239,273.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	not over \$500,000,	20% of the amount on line 1e.		
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
	over \$17,000,000,	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25%	of line 1f)	59,818.	0.
h	Subtract line 1g from line 1a. If zero or les	ss, enter -0	0.	0.
i	Subtract line 1f from line 1c. If zero or les	s, enter -0	0.	0.
j		er line 1h or line 1i, did the organization file Form 4720 r		Yes No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total			
2a Lobbying nontaxable amount	219,785.	231,658.	234,385.	239,273.	925,101.			
 b Lobbying ceiling amount (150% of line 2a, column (e)) 					1,387,652.			
c Total lobbying expenditures	3,058.		710.	533.	4,301.			
d Grassroots nontaxable amount	54,946.	57,915.	58,596.	59,818.	231,275.			
e Grassroots ceiling amount (150% of line 2d, column (e))					346,913.			
f Grassroots lobbying expenditures					0.			

Schedule C (Form 990) 2023

`	on under section 501(h)).	(a)	(b)	
For each "Yes" respo description of the lob	nse on lines 1a through 1i below, provide in Part IV a detailed bying activity.	(es	No		ount	
·						_
1 During the year,	lid the filing organization attempt to influence foreign, national, state, or local					
legislation, inclu through the use	did the filing organization attempt to influence foreign, national, state, or local ding any attempt to influence public opinion on a legislative matter or referendum, of					
	nagement (include compensation in expenses reported on lines 1c through 1i)?					
	nents?					
-	bers, legislators, or the public?					
e Publications, or	published or broadcast statements?					
	organizations for lobbying purposes?					
•	ith legislators, their staffs, government officials, or a legislative body?					
	trations, seminars, conventions, speeches, lectures, or any similar means?					
	·····					
•	1c through 1i		_			
	in line 1 cause the organization to not be described in section 501(c)(3)?		_			
- /	ne amount of any tax incurred under section 4912.		_			
	ne amount of any tax incurred by organization managers under section 4912		_			
	nization incurred a section 4912 tax, did it file Form 4720 for this year?					
	lete if the organization is exempt under section 501(c)(4), section 501(c n 501(c)(6).)(5),	, or			
Sectio	11 JU1(C)(O).				Yes	No
1 Were substantia	Ily all (90% or more) dues received nondeductible by members?			1	165	NO
	tion make only in-house lobbying expenditures of \$2,000 or less?					
-	tion agree to carry over lobbying and political campaign activity expenditures from the pri					
•	lete if the organization is exempt under section 501(c)(4), section 501(c	,			01(උ)	
(6) an	l if either (a) BOTH Part III-A. lines 1 and 2. are answered "No" OR (b) Pa	art I	I-A. lir	1e 3. is		
answe	red "Yes."		,	, -		
1 Dues, assessme	nts and similar amounts from members		1			
	nondeductible lobbying and political expenditures (do not include amounts of political nich the section 527(f) tax was paid).					
	··· · · ·		2a			
b Carryover from	ast year		2b			
c Total			2c			
3 Aggregate amou	int reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were se does the organize expenditures ne	nt and the amount on line 2c exceeds the amount on line 3, what portion of the excess tion agree to carryover to the reasonable estimate of nondeductible lobbying and political xt year?		4			
	of lobbying and political expenditures. See instructions.		5			
	nental Information		-			

DALLAS AFTERSCHOOL

Schedule C (Form 990) 2023

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 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

76-0838983

Page 3

SCHEDULE D	SCHEDULE D Supplemental Financial Statements					7
(Form 990)	Complet	e if the organization answered "Yes" on Form 5, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a,	99 0 ,		2023	
Department of the Treasury Internal Revenue Service	Go to www.irs.	Attach to Form 990. gov/Form990 for instructions and the latest in	nformation.		Open to Public Inspection	с
Name of the organization				Employer id	entification number	
	1001			76 000		
DALLAS AFTERSC		nor Advised Funds or Other Similar	Funds or A	76-083	8983	
Comple	te if the organization a	nswered "Yes" on Form 990, Part IV,	line 6.	coounts		
		(a) Donor advised funds	(b) F	unds and o	other accounts	
	end of year					
	ants from (during year)					
	at end of year					
5 Did the organizat are the organizat	ion inform all donors and do ion's property, subject to the	nor advisors in writing that the assets held in organization's exclusive legal control?	donor advised	funds	Yes No)
for charitable pur	poses and not for the benefi	ors, and donor advisors in writing that grant fu t of the donor or donor advisor, or for any othe	er purpose con	nferring		
	vate benefit?				Yes No	,
		nswered "Yes" on Form 990, Part IV,	line 7.			
		y the organization (check all that apply).				
	of land for public use (for exam	· ·		, ,	ortant land area	
	natural habitat	Preserva	ation of a certif	fied historio	structure	
	of open space	held a qualified conservation contribution in the fo	orm of a conserv	vation pase	ment on the	
last day of the ta					hent on the	
Tatal association of a				leld at the	End of the Tax Ye	ear
		ments				
-	-	fied historic structure included on line 2a				
d Number of conse	rvation easements included of	on line 2c acquired after July 25, 2006, and no	ot on			
a historic structur	e listed in the National Regis	ster nsferred, released, extinguished, or terminated by	2d	n duning th		
 Number of conserv tax year 	allon easements mounieu, trai	isterred, released, extinguished, or terminated by	line organizatio	in during the	÷	
4 Number of states	where property subject to co	onservation easement is located				
		garding the periodic monitoring, inspection, h	andling of viola	ations,		
	of the conservation easeme r hours devoted to monitoring,	nts it holds? inspecting, handling of violations, and enforcing of	conservation eas	sements du	Yes No	,
7 Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and enforcing conse	ervation easeme	ents during	the year	
8 Does each conse and section 170(h	rvation easement reported o	n line 2d above satisfy the requirements of se	ction 170(h)(4))(B)(i)	Yes 🗌 No)
9 In Part XIII. desc	ribe how the organization rep able, the text of the footnote	ports conservation easements in its revenue a to the organization's financial statements that	nd expense sta	atement ar	d balance sheet, on's accounting fo	and or
Part III Organiz	zations Maintaining Co	Ilections of Art, Historical Treasures nswered "Yes" on Form 990, Part IV,	, or Other S	imilar A	ssets	
1a If the organization historical treasure	n elected, as permitted unde	r FASB ASC 958, not to report in its revenue Id for public exhibition, education, or research al statements that describes these items.	statement and	balance s e of public	neet works of art, service, provide i	n
b If the organization historical treasures		r FASB ASC 958, to report in its revenue state or public exhibition, education, or research in furt	ement and bala herance of publ	ance sheet ic service, p	works of art, provide the	
		line 1		\$		
2 If the organization amounts required	received or held works of art, I I to be reported under FASB	nistorical treasures, or other similar assets for fina ASC 958 relating to these items.	ancial gain, prov	vide the foll	owing	
 a Revenue included b Assets included in 	ı on ⊢orm 990, Part VIII, line n Form 990, Part X	1		\$ \$		
				.		

b	Assets included in Form 990, Part X			
BAA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L	07/20/23	Sch

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 DALLAS AFTER			76-083		Page 2
Part III Organizations Maintaining Co	llections of Art, His	torical Treasures, o	or Other Similar As	ssets (co	ontinued)
3 Using the organization's acquisition, accession, a items (check all that apply).	and other records, check ar	ny of the following that ma	ake significant use of its	collection	
a Public exhibition	d Loan d	or exchange program			
b Scholarly research	e Other				
c Preservation for future generations					
4 Provide a description of the organization's collect Part XIII.	tions and explain how they	further the organization's	exempt purpose in		
5 During the year, did the organization solicit of to be sold to raise funds rather than to be ma	r receive donations of an intained as part of the o	t, historical treasures, or rganization's collection?	other similar assets	Yes	No
Part IV Escrow and Custodial Arrang Complete if the organization a Form 990, Part X, line 21.	ements nswered "Yes" on F	orm 990, Part IV, liı	ne 9, or reported a	n amoun	nt on
1a Is the organization an agent, trustee, custodia on Form 990, Part X?	an, or other intermediary	for contributions or othe	er assets not included	Yes	No
b If "Yes," explain the arrangement in Part XIII and			l		
				Amount	
c Beginning balance			1c		
d Additions during the year			1d		
e Distributions during the year			1e		
f Ending balance			1f		
2a Did the organization include an amount on Fo	orm 990, Part X, line 21,	for escrow or custodial	account liability?	Yes	No
b If "Yes," explain the arrangement in Part XIII.	Check here if the explanation	nation has been provide	d in Part XIII		
Part V Endowment Funds					
Complete if the organization a	nswered "Yes" on F	orm 990, Part IV, lii	ne 10.		
(a) Curren	t year (b) Prior year	(c) Two years back	(d) Three years back	(e) Four	years back
1a Beginning of year balance			(u) miles joure such	(0) 1 001	Jouro Suon
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities					
and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curre	ent year end balance (lin	e 1g, column (a)) held a	IS:		
a Board designated or guasi-endowment	8				
b Permanent endowment	5				
c Term endowment					
The percentages on lines 2a, 2b, and 2c should	egual 100%.				
			с н		
3a Are there endowment funds not in the possession organization by:	n of the organization that a	re held and administered	for the	Ye	es No
(i) Unrelated organizations?				3a(i)	
(ii) Related organizations?				3a(ii)	
b If "Yes" on line 3a(ii), are the related organize				3b	
4 Describe in Part XIII the intended uses of the	•				
Part VI Land, Buildings, and Equipme					
Complete if the organization answered		IV, line 11a. See Form 99	0, Part X, line 10.		
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Boo	k value
1a Land					
b Buildings					
c Leasehold improvements		32,268.	32,268.		0.
d Equipment		360,640.	328,903.		31,737.
e Other		2,183.	2,183.		0.
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X. I	1	/ /		31,737.
ВАА	,	· //			1 990) 2023

Schedule D	O (Form 990) 2023 DALLAS AFTERSCHOO	L		76-0838983	Page 3
Part VII	Investments – Other Securities		N/A		
	Complete if the organization answered "Yes" or				
	iption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Co	ost or end-of-year market va	llue
	al derivatives				
	held equity interests				
(3) Other					
(A) (B)					
(B) (C)					
(C)					
<u>(D)</u> (E)					
<u>(F)</u>					
(G)					
(H)					
(l)					
	mn (b) must equal Form 990, Part X, line 12, column (B))				
Part VIII			N/A		
	Investments – Program Related Complete if the organization answered "Yes" or	<u>1 Form 990, Part IV, line</u>	11c. See Form 990, Part X, lin	e 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Co	st or end-of-year mark	ket value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10) Total (Colum	mn (b) must equal Form 990, Part X, line 13, column (B))				
Part IX	Other Assets				
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11d. See Form 990, Part X, lin	ie 15.	
	17	scription		(b) Book	
	HT-OF-USE ASSET - OPERATING LE	ASE		28	32,584.
(2)					
(3) (4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	lumn (b) must equal Form 990, Part X, line 15, o	column (B))			32,584.
Part X	Other Liabilities Complete if the organization answered "Yes" or	Earm 000 Part IV line	110 or 11f Son Form 000 Par	t Vilino 25	
1.		ription of liability	110 01 111. See 1 01111 330, Fai	(b) Book	value
	ral income taxes				Value
(2) RIG	HT-OF-USE LIABILITY - OPERATIN	G LEASE		26	54,626.
(3)					
(4)					
(5)					
(6)					
(7)					
(8) (9)					
(10)					
(11)					
, ,	umn (b) must equal Form 990, Part X, line 25, c	olumn (B))		26	64,626.
	r uncertain tax positions. In Part XIII, provide the text of the fo				

eh tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2023 DALLAS AFTERSCHOOL	76-08389	83 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	3,084,308.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	38.	
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	1,188.
3 Subtract line 2e from line 1.	3	3,083,120.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,083,120.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	per Return	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	2,355,981.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		, ,
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	2,355,981.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		2/000/0011
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,355,981.
Part XIII Supplemental Information		

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

PART X - FASB ASC 740 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, 2024. ACCORDINGLY, NO

PROVISION HAS BEEN MADE FOR FEDERAL INCOME TAX.

BAA

Schedule D (Form 990) 2023

Part XIII Supplemental Information (continued)

PART X - FASB ASC 740 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, 2024, 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.

	Suppleme	ental Informa	tion Reg	jarding F	undraising or Gami	ng Activ	ities	OMB No. 1545-0047
SCHEDULE G (Form 990)	Comple	te if the organizati	on answere	d "Yes" on Fo ore than \$15	orm 990, Part IV, line 17, 18, ,000 on Form 990-EZ, line 6a	, or 19, or if a	the	2023
Department of the Treasury Internal Revenue Service	Go	Open to Public Inspection						
Name of the organization							mployer identific	
DALLAS AFTERSC		to if the exercise	tion onou		an Farm 000 Dart N/ lin		6-083898	3
Part I Form 990-E2	Z filers are not re	quired to comp	lete this p	art.	on Form 990, Part IV, lin	le 17.		
_	•	raised funds thr	ough any		owing activities. Check			
a Mail solicitatio				e		-	•	
b Internet and c Phone solicita	email solicitations	5		f	Solicitation of gove	•	rants	
d In-person soli				y		gevents		
2 a Did the organizatio	n have a written o				including officers, director			
	highest paid indiv	iduals or entities	(fundraise		rofessional fundraising nt to agreements under v			
		le organization.				(v) Amo	ount paid to	
(i) Name and addres or entity (fund		(ii) Activity	have custoo	fundraiser ly or control ibutions?	(iv) Gross receipts from activity	(or ref	tained by) ser listed in umn (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
1								
2								
3								
3								
4								
5								
6								
0								
7								
8								
9								
5								
10								
Total								0.
3 List all states in whor licensing.	nich the organization	on is registered o	or licensed	to solicit c	ontributions or has been	notified it i	is exempt from	registration
or noonding.								

Schedule (G (Form	990)	2023
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76-0838983 Page **2**

Part II	Fundraising Events. Complete if	the organization ar	nswered "Yes" o	on Form 990,	Part IV, I	line 18, or
	reported more than \$15,000 of fur and 6b. List events with gross rec			gross income	on Form	990-EZ, lines 1
	· · · · · · · · · · · · · · · · · · ·	· [· · · · · · · · · · · · · · · · · ·	1 - 7			

			(a) Event #1 RECESS	(b) Event #2	(c) Other events NONE	(d) Total events (add column (a) through column (c))
he			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	97,970.			97,970.
Я	2	Less: Contributions	76,101.			76,101.
	3	Gross income (line 1 minus line 2)	21,869.			21,869.
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs	7,645.			7,645.
Direct Expenses	7	Food and beverages	21,869.			21,869.
rect	8	Entertainment	6,000.			6,000.
D	9	Other direct expenses	33,804.			33,804.
	10	Direct expense summary. Add lines 4 thr	• · ·			
	11	Net income summary. Subtract line 10 fr				
Par	t III	Gaming. Complete if the organiza than \$15,000 on Form 990-EZ, lin	ition answered "Ye e 6a.	s" on Form 990, Pa	art IV, line 19, or re	ported more
venue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))

Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(add column (a) through column (c))
	1	Gross revenue				
ses	2	Cash prizes				
zpen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)			
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colur	ın (d)		
	ls th	er the state(s) in which the organization co ne organization licensed to conduct gaming lo," explain:	g activities in each of th	nese states?		
		e any of the organization's gaming license 'es," explain:				

Schedule G (Form 990) 2023

Schedule G (Form 990) 2023	DALLAS AFTERSCHOOL	7	6-0838	983	Page 3
11 Does the organization conduct	gaming activities with nonmembers?			Yes	No
	neficiary or trustee of a trust, or a member o			Yes	No
13 Indicate the percentage of gamin	g activity conducted in:				
a The organization's facility			13a		80
					olo
14 Enter the name and address of the name address of the name and address of the name address of the	ne person who prepares the organization's g	aming/special events books and records	:		
Name					
Address					
			ie? ne amoun		No
Name					
Address					;
16 Gaming manager information:					
Name					
Gaming manager compensatio	n \$				
Description of services provide	d				
Director/officer		dependent contractor			
17 Mandatory distributions:					
	r state law to make charitable distributions f			Yes	No
b Enter the amount of distributions organization's own exempt act	required under state law to be distributed to ivities during the tax year \$	other exempt organizations or spent in	the		—
Part IV Supplemental Infor and Part III, lines 9, information. See ins	mation. Provide the explanations 9b, 10b, 15b, 15c, 16, and 17b, structions.	required by Part I, line 2b, co as applicable. Also provide an	lumns (i y additio	iii) and (v onal	/);

SCHEDULE I (Form 990)			her Assistance			ŀ	OMB No. 1545-0047		
(r orm 990)		,	nd Individuals i				2023		
Department of the Treasury Internal Revenue Service	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for the latest information.								
Name of the organization						Employer identifie	cation number		
DALLAS AFTERSCHOOL						76-083898	33		
Part I General Information	on Grants and Assist	ance							
1 Does the organization maintain re the selection criteria used to av	vard the grants or assistan	ce?		eligibility for the grants			X Yes No		
2 Describe in Part IV the organization		<u> </u>				PART IV			
Part II Grants and Other Ass Form 990, Part IV, lin									
1 (a) Name and address of organization or government	n (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) FRAZIER REVITALIZATION PO BOX 152926 DALLAS, TX 75315	 20-3395474	501 (C) (3)	10,000.	0.			GENERAL SUPPORT		
(2) PROJECT TRANSFORMATION N. 4024 CARUTH HAVEN BLVD		301(0)(3)	10,000.						
DALLAS, TX 75225	75-2930405	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
(3) AFTER SCHOOL ALL STARS									
2902_SWISS_AVE									
DALLAS, TX 75204	95-4441208	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
(4) AMERICAN CARE - MASTERS 530 S. RL THORNTON FREEWAY	 26-0051206	E01(C)(2)	10,000	0.			GENERAL SUPPORT		
DALLAS, TX 75203 (5) AMERICAN CARE - RL THORTON	<u>1</u>	501 (C) (3)	10,000.	0.			GENERAL SUPPORT		
530 S. RL THORNTON FREEWAY		F 01 (C) (C)	10,000	0			CENEDAL CUDDODE		
DALLAS, TX 75203	26-0051206	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
(6) BIG THOUGHT 1409 BOTHAM JEAN BLVD DALLAS, TX 75215	- - 75-2140035	501 (C) (3)	10,000.	0.			GENERAL SUPPORT		
(7) BOYS AND GIRLS CLUB PO BOX 140189			10,000.						
DALLAS, TX 75214	75-1152657	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
(8) C5 YOUTH FOUNDATION OF TX							1		
PO_BOX_191129									
DALLAS, TX 75219	26-2495318	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
2 Enter total number of section 5							17		
3 Enter total number of other org	anizations listed in the line	1 table					(

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

TEEA3901L 06/12/23

Schedule I (Form 990) 2023

BAA

76-0838983

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

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

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

VOX INVICTUS WAS SELECTED ON A COMPETITIVE RFP PROCESS USING MEMBERS OF THE PLEASANT GROVE COMMUNITY TO DEFINE KEY NEEDS AND SELECT THE PROVIDER. THEY WERE THE RUNNER UP IN THIS PROCESS AND ANOTHER ORGANIZATION DID THE PROGRAM THE YEAR BEFORE AND WHEN THEY CLOSED, VOX TOOK OVER. WE HAVE A SIGNED MOU AND PAYMENTS ARE MADE OF \$12,500 QUARTERLY AFTER VOX PROVIDES A REPORT ON THE STATUS OF THE PROGRAM, KEY MEASURES AND IMPACTS.

THE OTHER GRANTS (FRAZIER REVITALIZATION, PROJECT TRANSFORMATION NORTH TEXAS AND FOUNDATION COMMUNITIES) WERE GIVEN ASSISTANCE AFTER THE FEBRUARY WINTER STORM HIT. THESE PROGRAMS SUSTAINED SIGNIFICANT DAMAGE TO THEIR FACILITIES, EQUIPMENT AND TEEA3902L 06/12/23

SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION PAGE 3

CLIENT DAL45

DALLAS AFTERSCHOOL

05:22PM

10/29/24

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. (CONTINUED)

SUPPLIES. WE POLLED ALL OF THE AFTERSCHOOL PROGRAMS WE WORKED WITH FOR WHAT DAMAGE THEY SUSTAINED AND WHAT THEY NEEDED TO REPLACE OR REPAIR. WE REQUESTED PICTURES AND A REPORT AFTER THE MONEY WAS SPENT DOCUMENTING HOW IT WAS SPENT.

2023

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 1

Name of the organization						Employer identific	ation number			
DALLAS AFTERSCHOOL 76-0838983										
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
<u> 10228 EAST NORTHWEST HWY </u>										
DALLAS, TX 75238	27-1615273	501(C)(3)	10,000.				GENERAL SUPPORT			
<u>GIRL SCOUTS OF AMERICA</u> 6001 SUMMERSIDE DRIVE, STE 10										
DALLAS, TX 75252	75-1101571	501(C)(3)	10,000.				GENERAL SUPPORT			
_ JUBILEE PARK AND COMMUNITY PO BOX_40679										
DALLAS, TX 75214	75-2726296	501(C)(3)	10,000.				GENERAL SUPPORT			
<u>JUNIORS PLAYERS GUILD</u> <u>12225 GREENVILLE AVE</u>										
DALLAS, TX 75252	75-6061062	501(C)(3)	10,000.				GENERAL SUPPORT			
<u>NV KIDS ACADEMY</u> 610 N. CEDAR RIDGE DR										
DUNCANVILLE, TX 75116	86-1968892	501(C)(3)	10,000.				GENERAL SUPPORT			
<u>PACE AND ROSS</u> <u>3922 S. MARSALIS AVE</u> DALLAS, TX 75216	75-2513689	501(C)(3)	10,000.				GENERAL SUPPORT			
	75 2515005	501(0)(3)	10,000.				GENERAL SOLLONI			
DALLAS, TX 75212	90-0641325	501(C)(3)	10,000.				GENERAL SUPPORT			
<u>UNION CHRISTIAN ACADEMY</u> <u>3312 S. POLK STREET</u>										
DALLAS, TX 75224	33-1081311	501(C)(3)	10,000.				GENERAL SUPPORT			
VICKERY MEADOWS 7110 HOLLY HILL DR										
DALLAS, TX 75231	26-1199982	501(C)(3)	10,000.				GENERAL SUPPORT			

TEEA4001L 06/12/23

2023

SCHEDULE J (Form 990)		Compensation Information	OME	OMB No. 1545-0047			
		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employee	s	2023			
		Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		LULJ			
Department of the Treasury Internal Revenue Service		Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.		Open to Public Inspection			
	of the organization	er identification number					
DAL	LAS AFTERS	CHOOL 76-083	8983				
Part	I Question	s Regarding Compensation					
1a	Check the approp	riate box(es) if the organization provided any of the following to or for a person listed on Form 990, Pa ne 1a. Complete Part III to provide any relevant information regarding these items.	art		Yes	No	
		r charter travel Housing allowance or residence for personal	use				
	Travel for co						
		fication and gross-up payments					
		y spending account	chef)				
	If any of the boxe	s on line 1a are checked, did the organization follow a written policy regarding payment or or provision of all of the expenses described above? If "No," complete Part III to explain		1b			
		tion require substantiation prior to reimbursing or allowing expenses incurred by all directors, icers, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
	Executive Direct	any, of the following the organization used to establish the compensation of the organization's CEO/ or. Check all that apply. Do not check any boxes for methods used by a related organization to nsation of the CEO/Executive Director, but explain in Part III.)				
	Compensatio	on committee Written employment contract					
	Independent	compensation consultant X Compensation survey or study					
	Form 990 of	other organizations X Approval by the board or compensation comm	nittee				
4	During the year, organization or a	did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing a related organization:					
а	Receive a severa	ance payment or change-of-control payment?		4a		Х	
		receive payment from a supplemental nonqualified retirement plan?		4b 4c		X X	
	c Participate in or receive payment from an equity-based compensation arrangement?						
	IT YES to any of	imes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section 50	I(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
	For persons listed contingent on th	I on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation e revenues of:					
	5	?		5a		Х	
		nization?		5b		Х	
6	For persons listed	a or 5b, describe in Part III. I on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation e net earnings of:					
		i?		6a		Х	
	0	nization?		6b		X	
	If "Yes" on line 6a	a or 6b, describe in Part III.					
7	For persons liste payments not de	ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed escribed on lines 5 and 6? If "Yes," describe in Part III		7		Х	
	to the initial con	nts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject tract exception described in Regulations section 53.4958-4(a)(3)?					
	It "Yes," describ	e in Part İll		8		X	
	section 53.4958-	did the organization also follow the rebuttable presumption procedure described in Regulations 6(c)?		9			
BAA	For Paperwork	Reduction Act Notice, see the Instructions for Form 990.	Schedule J ((Form	ı 990)	2023	

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable benefits	(E) Total of	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other	benefits	(E) Total of columns(B)(i)-(D)	(F) Compensatic in column (B) reported as deferred on pric Form 990
MARJORIE MURAT	(i)	128,190.	12,500.	0.	4,219.	10,785.	155,694.	0.
1 CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
_	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
10	(i)							
10	(ii)							
11	(i)							
<u>11</u>	(ii)							
12	(i)						+	
12	(ii)							
13	(i) (ii)						+	
15								
14	(i) (ii)				+		+	
14								
15	(i) (ii)				+		+	
10								
16	(i) (ii)				+		+	
BAA	(11)		TEEA4102L 07/03					J (Form 990) 2023

76-0838983

Part III Supplemental Information

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

Department of the Treasury Internal Revenue Service Name of the organization

DALLAS AFTERSCHOOL

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

DALLAS AFTERSCHOOL LEVELS THE PLAYING FIELD FOR CHILDREN OF ALL RACES AND ECONOMIC BACKGROUNDS BY INCREASING THE QUALITY AND AVAILABILITY OF AFTERSCHOOL AND SUMMER PROGRAMS IN DALLAS COUNTY. BY SUPPORTING 270 AFTERSCHOOL AND SUMMER PROGRAMS AND THEIR STAFF MEMBERS, WE TRANSFORM THE LIVES OF OVER 19,000 STUDENTS ANNUALLY.

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 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 COMPENSATION DECISIONS.

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

THE HR COMMITTEE REVIEWS THE AGENCY'S GOALS FOR THE COMING YEAR, PAST YEAR'S PERFORMANCE, EQUITY ANALYSIS AND BENCHMARK COMPENSATION FOR SIMILAR SIZED ORGANIZATIONS BEFORE MAKING COMPENSATION DECISIONS FOR ALL EMPLOYEES OTHER THAN THE CEO.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

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

FORM 990, PART VIII INCOME FROM FUNDRAISING EVENTS

Schedule O (Form 990) 2023							
Name of the organization	Employer identification number						
DALLAS AFTERSCHOOL	76-0838983						
THE NET ECONOMIC BENEFIT FROM OUR FUNDRAISING EVENT IS CALCULAT	TED AS FOLLOWS:						
CONTRIBUTIONS FROM FUNDRAISING EVENT REPORTED ON PART VIII, LIN	NE 1C \$ 76,101						
GROSS INCOME FROM FUNDRAISING EVENT REPORTED ON PART VIII, LINE	E 8A 21,869						
LESS: DIRECT COSTS OF EVENT REPORTED ON PART VIII, LINE 8B	(69,318)						
GROSS INCOME FROM GAMING ACTIVITIES REPORTED ON PART VIII, LINE	E 9A 8,150						
LESS: DIRECT COSTS OF ACTIVITIES REPORTED ON PART VIII, LINE 9E	3 (5,152)						
NET ECONOMIC BENEFIT OF FUNDRAISING EVENT	\$ 31,650						

2023

FEDERAL EXEMPT ORGANIZATION TAX SUMMARY

PAGE 1

CLIENT DAL45 DALLAS AFTERSCHOOL 76-0838983 10/29/24 5:22 PM 2023 2022 DIFF REVENUE 3,051,787 62,925 CONTRIBUTIONS AND GRANTS 1,834,455 1,217,332 PROGRAM SERVICE REVENUE 152,554 -89,629 -3,970 INVESTMENT INCOME 4,861 8,831 OTHER REVENUE -36,453 -16,379 -20,074TOTAL REVENUE..... 3,083,120 1,979,461 1,103,659 EXPENSES 170,000 1,457,903 170,000 -49,209 0 1,507,112 9,562 OTHER EXPENSES 728,078 718,516 TOTAL EXPENSES 2,355,981 2,225,628 130,353 IET ASSETS OR FUND BALANCES REVENUE LESS EXPENSES. TOTAL ASSETS AT END OF YEAR. **NET ASSETS OR FUND BALANCES** -246,167 973,306 727,139 2,128,814 1,423,351 705,463 302,075 1,826,739 324,939 -22,864 728,327 1,098,412