Form <b>990</b>
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Department of the Treasury Internal Revenue Service

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

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mbers on this form as it may be made public. Do not enter social sec

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	Go to	www.i	rs.gov/	Form99	0 for ir	nstruct	tions a	nd the	lates	t info	rmat	ion.
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AF	or the	e 2021 calendar year, or tax year beginning and	ending		
B (	Check if pplicabl	e: C Name of organization		D Employer identific	cation number
	Addre	DSC FOUNDATION, INC			
	Name chang			47-537373	16
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return			972-980-9	
	termir ated	, , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	1,061,864.
	Amen return	DALLAS, IX 75244		H(a) Is this a group re	
	Applic tion pendi	F Name and address of principal officer: I IM FALLON		for subordinates	
		13709 GAMMA ROAD, DALLAS, TX 75244		H(b) Are all subordinates in	
		empt status: $X 501(c)(3) 501(c) ( ) < (insert no.) 4947(a)(1) ( )$	or 527	1 '	list. See instructions
<u>J (</u>	Nebsi	te: ► N/A		H(c) Group exemption	
	orm of	f organization: X Corporation  Trust Association Other ► Summary	L Year		State of legal domicile: TX
		Briefly describe the organization's mission or most significant activities: THE	SOLE M	TSSTON OF TH	
e	'	FOUNDATION IS TO SERVE THE MISSION AND VI			
Activities & Governance	2	Check this box			
veri	3			3	7
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)			7
s S	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			1
/itie		Total number of volunteers (estimate if necessary)			0
çti	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		890,326.	1,001,476.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
sev Sev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,396.	11,192.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		35,828.	-220,673.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		929,550.	791,995.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		96,407.	201,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		182,376.	158,492.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Å.	b d	Total fundraising expenses (Part IX, column (D), line 25) <b>57,6</b>		537,024.	474,321.
_	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		815,807.	833,813.
	18 19	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		113,743.	-41,818.
or		Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
ets c	20	Total assets (Part X, line 16)		1,064,407.	1,126,886.
Assets	20	Total liabilities (Part X, line 26)		169,901.	251,879.
Net	-	Net assets or fund balances. Subtract line 21 from line 20	-	894,506.	875,007.
Pa	art II	Signature Block	······ 1		

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

Date	ign Signature of officer	Sign
		Here
	Type or print name and title	
signature Date Check DTIN	Print/Type preparer's name	
11/14/22 self-employed P00542807	aid PAUL D. KNUTSON	Paid I
TTE 600	se Only 🛛 Firm's address 🕨 7557 RAMBLER ROAD	Use Only
Phone no. (214) 346-0750	DALLAS, TX 75231	
structions X Yes No	ay the IRS discuss this return with the preparer shown above	May the IR
separate instructions. Form 990 (2021)	2001 12-09-21 LHA For Paperwork Reduction Act Notice	132001 12-09-
11/14/22       if self-employed       ₽0054280         Firm's EIN ►       20-2257536         TTE 600       Phone no. (214) 346-07         structions       X Yes	Aid       Print/Type preparer's name         PAUL D. KNUTSON         reparer         See Only         Firm's address         7557         RAMBLER         DALLAS, TX         75231         ay the IRS discuss this return with the preparer shown above	Paid I Preparer Use Only May the IR

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 8879-TE	IRS e-file Signature Authorization for a Tax Exempt Entity	OMB No. 1545-0047
	For calendar year 2021, or fiscal year beginning, 2021, and ending	, <sup>20</sup>
Department of the Treasury	Do not send to the IRS. Keep for your records.	<sup>,20</sup> —   2021
Internal Revenue Service Name of filer	Go to www.irs.gov/Form8879TE for the latest information.	EIN or SSN
	JNDATION, INC	47-5373716
Name and title of officer or pe		
	PRESIDENT	
	Return and Return Information	
Form 5330 filers may enter or <b>10a</b> below, and the amo	n for which you are using this Form 8879-TE and enter the applicable amount, if any, fro dollars and cents. For all other forms, enter whole dollars only. If you check the box on unt on that line for the return being filed with this form was blank, then leave line <b>1b</b> , <b>2</b> ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable	l line    1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check h	ere <b>b Total revenue,</b> if any (Form 990, Part VIII, column (A), line 12)	1ь 791,995.
2a Form 990-EZ che		
3a Form 1120-POL		
4a Form 990-PF che		
5a Form 8868 check		
6a Form 990-T check		
7a Form 4720 check		
<ul> <li>8a Form 5227 check</li> <li>9a Form 5330 check</li> </ul>		8b
10a Form 8038-CP ch		9b , line 22) 10b
	ion and Signature Authorization of Officer or Person Subject to Ta	
	I declare that X I am an officer of the above entity or I am a person subject to	
of entity)		nd that I have examined a copy of the
financial institution to debi later than 2 business days payment of taxes to receiv	ition account indicated in the tax preparation software for payment of the federal taxes of the entry to this account. To revoke a payment, I must contact the U.S. Treasury Finan prior to the payment (settlement) date. I also authorize the financial institutions involved e confidential information necessary to answer inquiries and resolve issues related to the ber (PIN) as my signature for the electronic return and, if applicable, the consent to elec	ncial Agent at 1-888-353-4537 no d in the processing of the electronic ne payment. I have selected a
X I authorize HO	WARD, LLP t	to enter my PIN 75230
	ERO firm name	Enter five numbers, but do not enter all zeros
with a state age	on the tax year 2021 electronically filed return. If I have indicated within this return that a ncy(ies) regulating charities as part of the IRS Fed/State program, I also authorize the afor isclosure consent screen.	a copy of the return is being filed
return. If I have i	person subject to tax with respect to the entity, I will enter my PIN as my signature on the indicated within this return that a copy of the return is being filed with a state agency(ies) rogram, I will enter my PIN on the return's disclosure consent screen.	s) regulating charities as part of the
Signature of officer or person subject	Time D Fills	Date 11/15/2022
	tion and Authentication	
· · · · · · · · · · · · · · · · · · ·	ur six-digit electronic filing identification your five-digit self-selected PIN. 75476275233 Do not enter all zeros	
	neric entry is my PIN, which is my signature on the 2021 electronically filed return indica cordance with the requirements of <b>Pub. 4163,</b> Modernized e-File (MeF) Information for .	ated above. I confirm that I am
ERO's signature 🕨 HOW	ARD, LLP Date  11	/14/22
	ERO Must Retain This Form - See Instructions	50
LUA For Driver	Do Not Submit This Form to the IRS Unless Requested To Do	Form 8879-TE (2021)
LITA FOR Privacy act and	Paperwork Reduction Act Notice, see instructions.	
102521 01-11-22		

	DSC FOUNDATION, INC	47-5373716 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE SOLE MISSION OF THE DSC FOUNDATION IS TO SERVE	THE MICCION AND
	VISION OF THE DALLAS SAFARI CLUB AND TO PROMOTE, ES	
	SCIENCE BASED RESEARCH SUPPORTING SUSTAINABLE USE W	
	CONSERVATION AND THE ROLE OF WELL REGULATED HUNTING	
2	Did the organization undertake any significant program services during the year which were not listed	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program se	• •
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ns to others, the total expenses, and
	revenue, if any, for each program service reported. (Code:) (Expenses \$229,227. including grants of \$201,000	
4a	(Code:) (Expenses \$ 229,227. including grants of \$ 201,000 GAVE 26 GRANTS IN SUPPORT OF THE MISSION OF THE DAL	
	INSURE THE CONSERVATION OF WILDLIFE THROUGH PUBLIC	
	EDUCATION AND ADVOCACY FOR WELL-REGULATED HUNTING A	· · · · · · · · · · · · · · · · · · ·
	THE GRANTS FUNDED PROJECTS THAT INCLUDED ANTI-POACH	
	HUNTING AND SHOOTING INITIATIVES, SCIENTIFIC RESEAR	-
	GATHERING STUDIES, WILDLIFE REHABILITATION EFFORTS	AND CONSERVATION.
41		
4b	(Code:) (Expenses \$ including grants of \$	) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$	) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	,
40	(Expenses \$ including grants of \$ ) (Revenue \$ Total program service expenses ► 229,227.	)
<u>4e</u>	Total program service expenses ► 229,227.	Form <b>990</b> (2021)
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 Form 990 (2021)
 DSC
 FOUNDATION, INC

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 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? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u>x</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	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,	110	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	-23	<u> </u>
D		11b		x
c	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			- 23
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			<u> </u>
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18	х	
19	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"		- 22	
13		19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<u> </u>
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	
			000	•

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23       Did the organization answer "Yee" to Part VI, Section A, Ine 3.4, or 5, shout compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J       2a       X         24       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," to the assue after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," to the assued fare December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J.       24a       X         24       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24a       24a         25       Bott the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction ware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have no more than y of the organization's prior Forms 900 or 990-E27. If "Yes," complete Schedule L, Part I       25b       X         26       Did the organization prior any amount on Part X, line 5 or 22, for receivables in an prior year, and that the transaction with or of the software prior to more reflect, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of number of any not the person 21°. If "Yes," complete Schedule L, Part I       26c       X         27       Did the organi	Form	990 (2021) DSC FOUNDATION, INC 47-5	37371	.6	Pa	age <b>4</b>
22       Did the organization report more than \$5,000 of grants or other assistance to or formostic individuals on Part X, climits, we complete Schedule I, Part I all Monther AL (Section A, line 3.4, or 5, shout compensation of the organization's current and former officer, directora, trustees, key employees, and highest compensation of the organization's current and former officer, directora, trustees, key employees, and highest compensation of the organization's current and former officer, directora, trustees, key employees, and highest compensation of the organization's current and former officers, directora, trustees, key employees, and highest compensation of the organization's current basis day of the organization invest any proceede of the exempt bonds beyond a temporary paried exception?       24a         24a       Did the organization invest any proceede of the exempt bonds beyond a temporary paried exception?       24a         25a       Section 50(16(2)) organization. Cult of negatization angle in an excess benefit transaction with a disquilified person during the year?       24d         25a       Section 50(16(2)) organization. Cult of negatization excepts the exception?       24d         25a       Section 50(16(2)) organization. Cult of negatization reports and the temperate on any of these parison? If 'ves, 'complete Schedule L, Part I       25a         25a       Section 50(16(2)) organization. Cult of negatization reports any current or tork method, and or these statistication throw and signal field person in a proy yea, and that the transaction has not bent reported on any of these parison? If 'ves, 'complete Schedule L, Part I       25b         25a       Marting an employee haterod, a grant select	Pai	t IV Checklist of Required Schedules (continued)				Na
Part RL column (A), line 27 // Yes, "compares Schedule () <i>Parts</i> () and //     22     X       23     Did the cognization answer "Yes" (Part) II. Schedule (). <i>Ne</i> 84, or 5 shout compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? // Yes, "complete Schedule // Art // No, "go of the 26a     24a     X       24a     Did the cognization have a tax-exampt bond issue with an outstanding principal amount of more than \$100,000 as of the last duy of the year, that was issued atter December 31, 2002 // II 'Yes," answer inse 24b through 24d and complete Schedule // Art // No, "go of the 26a     24a     X       24b     Did the cognization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24a     24a       25a     Schedule // No, "go of the 26a     24a     24a     24a       25a     Schedule // No, "go of the 35a     24a     24a     24a       25a     Schedule // No, "go of the 35b (Cr)(20) organizations. Do the organization engage in an excess benefit transactom with a disqualified person in a price year, and that the tarsaction way around on Pary of the organization species Schedule /, Part I     25b     X       26a     Did the organization invexeme proteid on any of the organization's point of parse schedule / Part I     25b     X       26a     Did the organization invexeme proteid on any of the organization's point of parse schedule / Part I     25b     X       27a     Did the organization invexeme proteod on any of the organization's point fo	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			res	NO
22       Did the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5, about compensation of the organization current and forms offices, directors, trustees, key employee, and highest compensated employee? If "Yes," complete Schedule I, Ves, " complete Schedule I, Ves, " complete Schedule I, Ves, " complete Schedule I, Part II       28         24       Did the organization nave at axexempt bond issue with an outstanding principal amount of more than \$100,000 as of the Schedule I, Ves, " to yes," complete Schedule I, Ves, " complete Schedule I, Ves, " complete Schedule I, Part II       28a         25       Did the organization naves any proceeds of tax-exempt bonds beyond a temporary period exception?       28a         26       Did the organization and the disolog(20) organizations. Did the organization and the the singed in an excess benefit transaction with a disqualified perion in a prior year, and that the transaction naves that the singed in an excess benefit transaction with a disqualified perion in a prior year, and that the transaction naves that the singed in an excess benefit transaction with a disqualified perion the prior tary of these periods? II "Yes," complete Schedule L, Part II       28a       X         28       Did the organization prior tary amount on Part X, line 5 or 22, for receivable from or payables to any current or former office, director, trustee, key employee, creator or founder, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of charging methods, conditions, and exceptions);       28       X         29       Did the organization prior tary a busines transaction with an et all sole targe of an asset transet of trans office director, trustee, key		<b>6</b>	2	2		х
Schedule J.       23       X         44       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the tax day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," to the 25A       24a       X         24a       Did the organization martain an escrow account other than a refunding escrow at any time during the year to detease any tox-event bond?       24d       X         25a       Section 50(105), 50(104), and 50(12)(20) consistations. Did the organization aging in an excess benefit transaction with a disqualified person during the year? (**ys, * complete Schedule L, Part I       25a       X         25a       Section 50(105), 50(104), and 50(12)(20) consistations. Did the organization aging in an excess benefit transaction with a disqualified person during the year? (**ys, * complete Schedule L, Part I       25a       X         25a       Did the organization access than the transaction with a disqualified person during the year? If **ys, * complete Schedule L, Part I       25a       X         25a       Did the organization any other of any of these persons? If **ys, * complete Schedule L, Part II       25a       X         27       Did the organization approve thered, or any otherse benefit transaction take, key employee, creator or founder, substantial contributor, or 35%       25b       X         27       Did the organization approve thered, or any other special controlutor, or a 35%       27b       X <td>23</td> <td></td> <td></td> <td></td> <td></td> <td></td>	23					
24a       Dot the organization have a tax-eventy bond issue with an outstanding principal amount of more than \$100,000 as 01 the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24b and complete Schedule K If Wo," to to line 25a       24a       X         24b       D Obt the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24a       X         25b       D Obt the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24d       24d         25a       Section 501(c)(3), 601(c)(4), and 501(c)(20) organizations. Did the organization regues in an excess benefit transaction with a disquidified period. The advance of the organization regues in an excess benefit transaction with a disquidified period. Did the organization regues any current or former officer, director, trustes, key employee, center or former officer, centrol, trustes, key employee, center or former officer, director, trustes, key employee, center or former officer, director		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete				
is backulk K 1 Woi, pot of the size. That was issued after Docember 31, 2002? If Yes, " asswer fines 24b through 24d and complete     24a       b Did the organization invest any proceeds of tax exampt bonds beyond a temporary period exception?     24b       c Did the organization invest any proceeds of tax exampt bonds beyond a temporary period exception?     24c       2 Did the organization invest any proceeds of tax exampt bonds beyond a temporary period exception?     24d       2 B Section 50(16), 801(4/4), and 501(220 graphantations. Did the organization engage in an excess benefit transaction with a disqualified period ultring the year? If Yes, "complete Schedule I, Part I     25a       2 B Dot the organization axe tax the anguad in an excess benefit transaction with a disqualified period ultring the year? If Yes, "complete Schedule I, Part I     25a       2 B Dot the organization axe tax that tengaged in an excess benefit transaction with a disqualified period ultring the year? If Yes, "complete Schedule I, Part II     25a       2 B Dot the organization ayer tax thats, ley amplyor, creator of founder, substantial contributor, or 53% controlled entity or family member of any of these persons? If Yes, "complete Schedule I, Part II     26a       2 D Di the organization apert by a basiess transaction with a disc (see the Schedule I, Part II V, instructions for applicable filing thresholds, conditions, and exceptions?     27       2 D Di the organization apert by a basiess transaction with and or the solution transaction with a disc (see the Schedule I, Part II V, instructions for applicable filing thresholds, conditions, and exceptions?     28a       2 D Did the organization receive contr			2	3	X	
Schedule K II 'We,' go to line 25a     24a       D Did the organization meaintain an escrow account other than a refunding escrow at any time during the year?     24a       C Did the organization maintain an escrow account other than a refunding escrow at any time during the year?     24a       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 in a prior year, and that the transaction may are that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction may of the organization's prior Forms 990 or 990 E2? II 'Yea,' complete Schedule L, Part I     25a       25b Did the organization avare that it engaged in an excess barefit transaction with a disqualified person in a prior year, and that the transaction may of the organization's prior Forms 990 or 990 E2? II 'Yea,' complete Schedule L, Part I     25a       25b Did the organization provide agrint or there assistance to any or these persons? II 'Yea,' complete Schedule L, Part II     26a       27b Did the organization provide theored or tamy or these persons? II 'Yea,' complete Schedule L, Part II     26a       27b Did the organization provide theored or tamy or these persons? II 'Yea,' complete Schedule L, Part II     27a       28b Was the organization provide theored or tamy or these persons? II 'Yea,' complete Schedule L, Part IV     28a       28b A starty member of any information experiments of any or these persons? II 'Yea,' complete Schedule L, Part IV     28a       28b A starty member of any information experison thinking at these persons? II 'Yea,' complete Schedule	24a					
b       Define organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24b         c       Define organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?       24c         d       Define organization acts as in "on behalf of "issuer for bonds outstanding at any time during the year?       24d         25a       Section 50(16(3), 501(4)(4), and 501(c)(29) organizations. Di for organization engage in an excess benefit transaction with a disqualified person during the year? // Yea," complete Schedule L, Part I       25a         25       Dis the organization are port 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 39%       26b       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or dura 36% controlled entity or family member of any of these persons? // *Yes, * complete Schedule L, Part II       27       X         28       Was the organization report any amount on Part y family member of any of these persons? // *Yes, * complete Schedule L, Part IV, instructions for applicable fing thresholds, conditions, and exceptions?       A 35% controlled entity of namily member of any of these persons? // *Yes, * complete Schedule L, Part IV, instructions for applicable fing thresholds, conditions, and exceptions?       A 35% controlled entity of namily member of any of these persons and ** Yes, * complete Sc						37
c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-resemptions?       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 rangeg in an excess benefit transaction with a disqualified person in a prior year, and that the transaction aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction any of the organization's prior Forms 990 or 990-E22 // 'Yea, 'complete Schedule L, Part I       25a       X         e       Did the organization reported on any of the organization's prior Forms 990 or 990-E22 // 'Yea, 'complete Schedule L, Part I       25b       X         27       Did the organization provide a grant or other assistance to any current or forme officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereol, a grant selection committee member, or ta a 35b controlled entity fonduling an employee thereol of anny in these persons? // 'Yes, 'complete Schedule L, Part I //       26b       X         28       Was the organization provide a grant or other assistance to any current or forme officer, director, trustee, key employee, creator or founder, cubstantial contributor? // 'Yes, 'complete Schedule L, Part I //       27c       X         28       Was the organization neevice meet than 825.000 in non-cash contributors? // 'Yes, 'complete Schedule L, Part I //       28a       X			·····			X
any tax-sempt boods?     24d       25a     Section 501(e)(3), 501(e)(4), and 501(e)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     25a       25a     Section 501(e)(3), 501(e)(4), and 501(e)(29) organizations. Did the organization engage 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 E2?     17 Yes," complete Schedule L, Part I       25a     Did the organization areport any amount on Part X, line 5 or 22, for receivables from or payables to any ourrent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or tamily member of any of these persons? If "Yes," complete Schedule L, Part I     26     X       27     Do the organization approximation approx thereof or family member of any of these persons? If "Yes," complete Schedule L, Part IV     28     X       28     Was the organization approximation approx thereof or founder, or substantial contributor or a family enthereof any of these persons? If "Yes," complete Schedule L, Part IV     28     X       29     Did the organization receive contributions of any individual described in line 28a? If "Yes," complete Schedule L, Part IV     28     X       20     A attributions for applicable filing thresholds, conditions, and exceptions)     If Yes," complete Schedule L, Part IV     28     X       20     Do the organization receive contributions of art, historical treasures, or other similar assets, or qualified con			24	u,		
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)(s), 501(c)(s), and 501(c)(s) organizations.       25a         b is the organization aware that 1 engaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction any of the organizations prior forms 900 c 900 E/21 'f Yes,' complete Schedule L, Part I       25a       X         b is the organization report organizations. The forms 900 c 900 E/21 'f Yes,' complete Schedule L, Part I       25a       X         controlled entity or family member of any of these persons? If Yes, 'complete Schedule L, Part I       25a       X         27       Did the organization provide a grant or other assistance to any current or forme officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) a raining member of any of these persons?       If Yes, 'complete Schedule L, Part I       27         28       Was the organization provide a grant or other assistance to any current or forme officer, director, trustee, key employee, creator or founder, substantial contributor? If Yes, 'complete Schedule L, Part IV.       28a       X         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes, 'complete Schedule L, Part IV.       28a       X         29       Did the organization spece contributions of at, historical treasures, or other similar assets, or qualified consenation or other similar assets.	C		2/	10		
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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990/E27. If "Yes," complete Schedule L, Part I       25b       X         26b       Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction 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 of raming member of any of these persons? If "Yes," complete Schedule L, Part I       26       X         27       Did the organization aware that it engaged in an excee set or founder, substantial contributor or a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization receive more than 325,000 in non-cash contribution? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization neceive more than 325,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization neceive any tambes to any case or transition more than 25% of the organization neceive any payment transe. The payment or transfer more than 25% of the set asset? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization neceive and thine 28a	h					
transaction with a disgualified person during the year? // **Yes, * complete Schedule L, Part I       25a       X         b is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 CF27 // *Yes,* complete Schedule L, Part I       25b       X         27D 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 (renking member of any of these persons? // *Yes,* complete Schedule L, Part II       26       X         27D Did the organization reports thereof or family member of any of these persons? // *Yes,* complete Schedule L, Part IV       26b       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV       28b       X         29       D dt the organization receive more than 325,000 in ono-cash contributions? If *Yes,* complete Schedule L, Part IV       28a       X         29       D dt the organization receive contributions of ant, historical treasures, or other similar assets, or qualified consensiton       28       X         29       D dt the organization receive contributions of ant, historical treasures, or other similar assets, or qualified consensiton       28       X         20       D dt the organization relevice thoring discesed, or tharsfer more than 25% of ths relasse						
b Is the organization avane that it engaged in an excess benefit transaction with a disqualified person in a prory ear, and that the transaction has not been reported on any of the organization's pior Forms 990 or 990-E27 // Yes," complete Schedule 1, Part I       25b       X         28       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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? // Yes," complete Schedule L, Part II.       26       X         27       Did the organization approach or that assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof) or family member of any of these persons? // Yes," complete Schedule L, Part II.       26       X         28       Was the organization approach is the stransaction with one of the following parties (see the Schedule L, Part II.       27       X         29       Did the organization receive more than \$25,000 in non-cash contributions? // Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization neceive contributions of art, historical trassures, or other similar assets? or qualified consention       29       X         29       Did the organization receive contributions of art, historical trassures, or other similar assets? or qualified consention       29       X         29       Did the organization regive thereori			25	ā		х
Schedule I, Part I       25b       X         26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any ourrent 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 or these persons? If 'Yes,' complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV.       28a       X         a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV.       28a       X         a A surfactorial entity of one or more individuals and/or organization selection of multian entity.       28a       X         30       Did the organization receive contributions? If 'Yes,' complete Schedule L, Part IV.       28a       X         31       Did the organization liquiduals and/or organization and/or enganization and/or enganization individual described in line 28a? If 'Yes,' complete Schedule N, Part I       30         32       Did the	b					
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 of family member of any of these persons? If ''ves,' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereo() or family member of any of these persons? If ''ves,' complete Schedule L, Part II       27       X         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, conditions, and exceptions):       28       X         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If ''ves,' complete Schedule L, Part IV       28a       X         29       DA family member of any individual described in line 28a' If ''Yes,' complete Schedule L, Part IV       28b       X         29       Did the organization receive more that \$25,000 in non-ceah contributions? If 'Yes,' complete Schedule M       29       X         30       Did the organization receive more that \$25,000 in non-ceah contributions? If 'Yes,' complete Schedule N, Part I       30       X         31       Did the organization neelve durity disregarded as separate from the organization nucleon \$1,7012 and \$30,17013 Pi I'Yes,' complete Schedule R, Part I, III, or						
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or stere assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity (including an employee thereol) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       27       X         28       Was the organization provide the schedule L, Part IV.       28       X         29       Did the organization receive more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.       28a X         29       Did the organization receive contributions of art, historical treasures, or ther similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       29       X         20       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part I       31       X         31       Did the organization receive contributions of art, historical treasures, or ther similar assets. If "Yes," complete Schedule M, Part I       31       X         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part I       31       X         33       Did the organization receive contributions		Schedule L, Part I	25	ōb		Х
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant steelection committee member, or to a 35% controlled entity (including an employee) thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       28       X         29       Did the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       28       X         20       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28       X         20       Did the organization receive more than \$25,000 in on-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical trasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I       31       X         31       Did the organization well, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule M, Part I       31       X         32       Did the organization on 100% of an entity disrega	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee) thereof or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III.       27       X         29       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III.       28       X         20       A current of former officer, director, trustee, key employee, creator or gunder, or substantial contributor? II       28a       X         29       Did the organization receive more individuals and/or organizations described in line 28a or 28b? II       29       X         29       Did the organization receive contributions of art, historical trassures, or other similar assets, or qualified conservation contributions? II "Yes," complete Schedule L, Part II       20       X         30       Did the organization neceive contributions of art, historical trassures, or other similar assets, or qualified conservation contributions? II "Yes," complete Schedule R, Part II       30       X         31       Did the organization receive on than ytax-exempt or taxable entity? II "Yes," complete Schedule R, Part II.       31       X         32       Did the organi						
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* "Yes," complete Schedule L, Part III.       Z7       X         8       Was the organization a party to a builtses transaction with one of the following parties (see the Schedule L, Part IV. instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       Z8b       X         b       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       Z8b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         31       Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule M.       30       X         32       Did the organization networe than 100% of an entity disregarded as separate from the organization under Regulations self. exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II.       31       X         33       Did the organization netated to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II.       33       <			2	6		Х
entity (including an employee thereof) or family member of any of these persons? // *Yes,* complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       1       1         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? //       28       X         20       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? //       28       X         20       A family member of any individual described in line 28a? // *vs,* complete Schedule L, Part IV.       28a       X         20       D dit the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // *vs,* complete Schedule M.       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // *vs,* complete Schedule M, Part I       30       X         31       X       Did the organization nearies contributions of art, historical treasures, or onplete Schedule R, Part II       33       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.3? // *ves,* complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         33       Did t	27		.			
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): <ul> <li>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</li> <li>Yes," complete Schedule L, Part IV</li> <li>C A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If</li> <li>Yes," complete Schedule L, Part IV</li> <li>28a</li> <li>28b</li> <li>28c</li> <li>28c</li></ul>				_		v
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? # "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? # "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? # "Yes," complete Schedule L, Part IV 28c X 28b 30 Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M 30 Did the organization inductate, terminate, or dissolve and cease operations? # "Yes," complete Schedule N, Part I 31 X 32 Did the organization inductate, terminate, or dissolve and cease operations? # "Yes," complete Schedule N, Part I 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? # "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 4 Was the organization netated to any tax-exempt or taxable entity? # "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35 35 Did the organization netated to any tax-exempt from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? # "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 35 35 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treaded as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 Did the organ	20					
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #       28a       X         b A family member of any individual described in line 28a? # "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization seli, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33       Did the organization seli, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part I       31       X         34       Was the organization neal out 7103? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         35       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         34       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35       Did the organization have a controlled en	20					
"Yes," complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? // // *es," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? // *yes," complete Schedule M       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? // *yes," complete Schedule M       30       X         31       Did the organization receive more than \$25,000 in non-cash contributions? // *yes," complete Schedule N       31       X         32       Did the organization soil, exchange, dispose of, or transfer more than 25% of its net assets? // fryes," complete Schedule N, Part I       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // *yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax exempt or taxable entity? // fryes," complete Schedule R, Part I, lin, or IV, and Part V, line 1       35a       X         35a       Did the organization neated to any tax exempt or taxable entity? If *Yes," complete Schedule R, Part I, lin, or IV, and Part V, line 1       35a       X         35a       <	а					
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       "Yes," complete Schedule L, Part IV       28c       X         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       28       X         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       31       X         31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32 Did the organization receive and 00% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         33 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         34 Was the organization control the draganization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization conduct me than 5% of its activities through an entity that is not a related organization?       36       X         36a       Did the organization co			28	Ba		Х
c       A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? // ff       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? // fr 'Yes," complete Schedule M       29       X         29       Did the organization receive more than \$25,000 in non-cash contributions? // fr 'Yes," complete Schedule M       30       X         30       Did the organization receive more than \$25,000 in non-cash contributions? // fr 'Yes," complete Schedule N, Part I       30       X         31       Did the organization receive more than \$25,000 in non-cash contributions? // fr 'Yes," complete Schedule N, Part I       30       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // fr 'Yes," complete Schedule N, Part I       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization conduct more vany payment from or engage in any transfers to an exempt non-charitable related organization?       36       X         35a       X       M       M       M       M       37	b		·····			Х
29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       32       X         34       Was the organization nave a controlled entity within the meaning of section 512(b)(13)?       34       X         35a       Did the organization. Nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization?       37       X         38       Did the organization conduct more than 5% of its activities through an entity that is not a related organization?       36       X         37       Did the organization complete Schedule O.       38       X       37 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
30       Did the organization receive contributions of art, historical treasures, or other risinilar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-27 atf 310.7701-27 if "Yes," complete Schedule R, Part I       33       X         34       Was the organization netated to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       35a       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule R, Part V, line 2       36       X         38       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37       X         36       X       X       X       X       X		"Yes," complete Schedule L, Part IV	28	Bc		Х
contributions? /f "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? /f "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete       32       X         34       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? /f "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? /f "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Bid "Yees" 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)? /f "Yes," complete Schedule R, Part V, line 2       35b         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? /f "Yes," complete Schedule R, Part VI       36       X         38       Did the organization	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	2	9		Х
31       Did the organization liquidate, terminate, or dissolve and cease operations? // "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization neare a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations receive any payment from or engage in any transaction with a controlled entity within the organization receive any payment from or engage in any transaction with a controlled entity within the organization receive any payment from or engage in any transaction with a controlled entity within the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         39       Did the o	30					
32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       35b       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         39       Note: All Form 990 filers are required to complete Schedule O       38       X         39       Did the organization complete Schedule O in provide explanations on Schedule O for Part VI, lines 11b and 19		contributions? If "Yes," complete Schedule M	3			X
Schedule N, Part II       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // ff "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? // ff "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       ff "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)?       35a       X         35       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V I       36       X         36       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI II ins 11b and 19?       37       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI ins 2       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI ins 2       38       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI ins			3	1		<u> </u>
33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O contains a response or note to any line in this Part V       38       X         39       Did the organization complete Schedule O contains a response or note to any line in this Part V       38       X         38       Did the organization complete Schedule O contains a response or note to any line in this Part V       38       X         39       Did the org	32			~		v
sections 301.7701-2 and 301.7701-3? // ff "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? // ff "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         9       Part V       Statements Regarding Other IRS Filings and Tax Compliance       1a       7       Yes N         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       1b       0       1b       0         a Did the organization comply with backup wit	22		3	2		
34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI is Complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O complete Schedule O       37       X       X         39       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         30       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         31       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         32       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         33       Did the organization comple	33		2	2		x
Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? // fr "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? // fr "yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes       N         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1c       X         12004       12-09-21       Form 9	34			5		
35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         9       Note: All Form 990 filers are required to complete Schedule O       38       X         9       Part V       Statements Regarding Other IRS Filings and Tax Compliance       1       7         1       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1       1       7         1       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1       1       7       1         1       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1       1<			3	4		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)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         90       Note: All Form 990 filers are required to complete Schedule O       7       38       X         91       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       Yes       N         12       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       1c       X         13       Did the organization comply	35a					Х
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?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         38       Did the organization complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         Note: All Form 990 filers are required to complete Schedule O       Matter IRS Filings and Tax Compliance       18       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       14       7       12         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       1b       0       12         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1c       X         132004       12-09-21       Form 990 (202						
If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       12       Yes       Nu         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       1b       0       1c       X         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X			35	ōb		
37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O complete Schedule O       38       X         99       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       14       7       14       7         14       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       16       16       X         132004       12-09-21       12       Form 990 (202       Form 990 (202	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	n?			
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>			3	6		X
38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       Yes       Yes         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       Yes       Yes         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X         132004       12-09-21       Form 990 (202	37					
Note: All Form 990 filers are required to complete Schedule 0       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule 0 contains a response or note to any line in this Part V       Yes       N         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       Yes       N         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       1b       0       Ic       X         132004       12-09-21       Form 990 (202       Form 990 (202       Form 990 (202       Form 990 (202			3	7		X
Part 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       Image: Check if Schedule O contains a response or note to any line in this Part V         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       Image: Check if Schedule O contains a response or note to any line in this Part V         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       Image: Check if Schedule O contains a response or note to any line in this Part V         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Ic       X         132004       12-09-21       Form 990 (202)	38	Notes All From 2020 films and an exception 2.5 bedde 0.		_	v	
Check if Schedule O contains a response or note to any line in this Part V         Yes Nutrition         1a       7       Yes Nutrition         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X         132004       12-09-21       Form 990 (202	Par	t V Statements Regarding Other IRS Filings and Tax Compliance	3	ð	Λ	
1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       7       1a       7         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1c       X         132004       12-09-21       Form 990 (202		Check if Schodule O contains a response or note to any line in this Dart V				
1a       7         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X         132004       12-09-21       Form 990 (202)				Τ.	Yes	No
b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       Ib       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       Ic       X         (gambling) winnings to prize winners?       Ic       X       Form 990 (202)	1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	7			
c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       I       I       I         (gambling) winnings to prize winners?       Ic       X       Ic       X       Ic       Ic       X       Ic			0			
(gambling) winnings to prize winners?         1c         X           132004         12-09-21         Form 990 (202)						
132004 12-09-21 Form <b>990</b> (202		(gambling) winnings to prize winners?			_	
	132004	12-09-21	Fc	orm 9	<b>990</b> (	2021)

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orm S	DSC FOUNDATION, INC	47-5373	716	Pa	age <b>5</b>
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
-				Yes	No
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 1			
	iled for the calendar year ending with or within the year covered by this return f at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to $e-file$ . See instruction		20	- 11	
			3a		х
	f "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	inancial account in a foreign country (such as a bank account, securities account, or other financial a		4a		Х
	f "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	counts (FBAR).			
5a \	Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac	tion?	5b		X
c I	f "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	e organization solicit			
			<u>6a</u>		<u> </u>
bl	f "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts			
	were not tax deductible?		6b		
	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		<u> </u>
			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		_		v
	o file Form 8282?		7c		X
	f "Yes," indicate the number of Forms 8282 filed during the year	7d	7-		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra f the organization received a contribution of qualified intellectual property, did the exception file Fe		7f		
-	f the organization received a contribution of qualified intellectual property, did the organization file Fo f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		7g 7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
		by the	8		
	Sponsoring organization mave excess business notaings at any time during the year sector sectors sponsoring organizations maintaining donor advised funds.				
			9a		
			9b		
	Section 501(c)(7) organizations. Enter:				
	nitiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
	Section 501(c)(12) organizations. Enter:	•	1		
	Gross income from members or shareholders	11a			
b (	Gross income from other sources. (Do not net amounts due or paid to other sources against				
í	amounts due or received from them.)	11b			
2a 🕄	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b l	f "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
3 3	Section 501(c)(29) qualified nonprofit health insurance issuers.				
al	s 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	13b	-		
	Enter the amount of reserves on hand	13c			37
			14a		X
	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
	s the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		4-		v
	excess parachute payment(s) during the year?		15		X
	f "Yes," see the instructions and file Form 4720, Schedule N.	incomo	40		Х
	s the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Λ
	f "Yes," complete Form 4720, Schedule O.				
	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in		47		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? f "Yes," complete Form 6069.		17		
	12-09-21 6		Form	990	(2021)
2005					005

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 Form 990 (2021)
 DSC FOUNDATION, INC
 47-5373716
 Page

 Part VI
 Governance, Management, and Disclosure.
 For each "Yes" response to lines 2 through 7b below, and for a "No" response

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a		7		
	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.				
b	Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>		7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with a	ny 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				
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint o				
	more members of the governing body?		7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockhol				
ĩ	persons other than the governing body?		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the		15		
	The governing body?	0	8a	х	
	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		9		x
Sact	organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>		9		
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue (	Code.)			
	Did the survey institute have been been been able to a filling of		40-	Yes	N X
	Did the organization have local chapters, branches, or affiliates?		10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	e filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
l2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to confl		12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," de	scribe			
	on Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approval by ind	ependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization		15b		X
	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 wi	th 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 pa				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	-			
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>				
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	T (section 501(c)(3	)s only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.	. (	,·· <b>,</b> ,		
	Own website Another's website X Upon request Other (explain on Sci	hedule ()			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or	,	nd finan	cial	
	statements available to the public during the tax year.	and the second policy, at			
20	State the name, address, and telephone number of the person who possesses the organization's books and	records			
-0	TRACY CORLISS - 214-923-3950				
	13709 GAMMA ROAD, DALLAS, TX 75244				
	$1 \rightarrow 1 \rightarrow 2 \rightarrow 1 \rightarrow $				

Form 990 (202	21) DSC FOUNDATION, INC	47-5373716	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated											
E	Employees, and Independent Contractors										
C	Check if Schedule O contains a response or note to any line in this Part VII										
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
1a Complete	this table for all persons required to be listed. Report compensation for the calendar year ending	with or within the organization's	s tax year.								

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See 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, 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.

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an		compensation	compensation	amount of			
	week		officer and a director/trustee)		from	from related	other			
	(list any	ector						the	organizations	compensation
	hours for	or di	9			ated		organization	(W-2/1099-MISC/	from the
	related	Istee	truste		æ	bensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	ional		ploye	t com		1099-NEC)		and related
	line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) RICHARD CHEATHAM	60.00	-		0	×	<u> </u>	ц			
FORMER EXECUTIVE DIRECTOR							х	147,500.	0.	0.
(2) TIM FALLON	1.00							,		
PRESIDENT		х						0.	0.	0.
(3) SCOTT TOBERMANN	1.00									
VICE PRESIDENT		х						0.	Ο.	0.
(4) DAVE FULSON	1.00									
DIRECTOR		Х						0.	0.	0.
(5) JERRY BAKER	1.00									
TREASURER		Х						0.	0.	0.
(6) LARRY WEISHUHN	1.00									
DIRECTOR		Х						0.	0.	0.
(7) LARRY D. HERWIG, DDS	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(8) RUSSELL STACY	1.00								0	0
DIRECTOR	1 00	Х						0.	0.	0.
(9) COREY MASON	1.00			37					0	0
CEO (10) KAREN MEHALL PHILLIPS	1.00			X				0.	0.	0.
(10) KAREN MEHALL PHILLIPS DIRECTOR	1.00	x						0.	0.	0.
DIRECTOR		Λ			-			0.	0.	0.
132007 12-09-21										Form <b>990</b> (2021)

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132007 12-09-21

Form 990 (2021)

	990 (2021) DSC FOUND									47-53	<u>373</u>	716	P	age <b>8</b>
Par	t VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	t C		· /	—			
	<b>(A)</b> Name and title	(B) Average hours per week	box offi	not c , unle	ss per	ition more rson i	than c s both r/trust	ı an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatio from related	I		(F) stimate nount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		fr org an	pensa rom th anizat d relat anizati	ie tion ted
			-											
			-											
			-											
			-											
	Subtotal								147,500.		0.			0.
	Total from continuation sheets to Part VII Total (add lines 1b and 1c)								147,500.		0.			0.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	1			1
3	Did the organization list any <b>former</b> officer,	director, truste	ee, k	key e	empl	oye	e, or	hig	hest compensated emp	loyee on	ſ		Yes	No
4	line 1a? If "Yes," complete Schedule J for su For any individual listed on line 1a, is the su											3	х	
	and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4		X
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," comp</i>	•				-					<u></u>	5		x
<u>Sec</u>	tion B. Independent Contractors Complete this table for your five highest cor	npensated ind	lepe	nde	nt co	ontra	actor	rs th	nat received more than \$	100,000 of comp	ensat	ion fro		
	the organization. Report compensation for t	he calendar ye	ear e	endir	ng w	ith c	or wit	thin	the organization's tax y (B)	ear.		(0	 )	
Name and business address         Description of services           SAFARI CLASSICS PRODUCTIONS, 5206 MCKINNEY         Image: Content of Services								C		nsatio	n			
AVE. SUITE 101, DALLAS, TX 75205 MEDIA SERVICES									26	2,5	00.			
	Tabel sumbar of trades and the table of the	al callo e la l	-+ /'						ale ave) where we do a	un theory				
2	Total number of independent contractors (in \$100,000 of compensation from the organiz	0	στ lin	niteo	a to i	thos 1		ted	above) who received mo	ore than			000	
												Form	330 (	2021)

					DATIO	N, INC			47-5373	716 Page 9
Pa	rt V	/	Statement of Re	venue						
			Check if Schedule O	contains a	response	or note to any lin		(5)	(2)	
							( <b>A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ស ស	1	а	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts					1b					
N G			Fundraising events		1c	721,767.				
ar /		d	Related organizations		1d					
is, C		е	Government grants (contr	ibutions)	1e					
tion S		f	All other contributions, gifts,	grants, and						
ibu			similar amounts not included	above	1f	279,709.				
utro D C		÷.	Noncash contributions included in		1g \$		1 001 456			
<u>o</u> e		h	Total. Add lines 1a-1f				1,001,476.			
	_	_				Business Code				
Program Service Revenue	2	a b								
Serv		c								
s mer		d								
Be		e								
Pro		f	All other program service	revenue						
		g	Total. Add lines 2a-2f			►				
	3		Investment income (includ							
			other similar amounts)				5,892.			5,892.
	4		Income from investment of							
	5		Royalties		i) Real	(ii) Personal				
	_	_	0		i) Real	(ii) Personal				
			Gross rents	6a 6b						
			Less: rental expenses Rental income or (loss)	6c						
			Net rental income or (loss)	· · · ·						
			Gross amount from sales of		Securities	(ii) Other				
	-		assets other than inventory	7a	5,300.					
		b	Less: cost or other basis							
an			and sales expenses	7b	0.					
venue		с	Gain or (loss)	7c	5,300.					
Re			Net gain or (loss)			►	5,300.			5,300.
Other	8	а	Gross income from fundraisi							
Ò			including \$		- 1					
			contributions reported on			49,196.				
		h	Part IV, line 18 Less: direct expenses			· · · ·				
			Net income or (loss) from				-220,673.			-220,673.
			Gross income from gamin							
			Part IV, line 19	-						
		b	Less: direct expenses							
		с	Net income or (loss) from	gaming ac	tivities	►				
	10	а	Gross sales of inventory,							
			and allowances							
			Less: cost of goods sold			-				
		С	Net income or (loss) from	sales of in	ventory					
sn	44	~				Business Code				
Miscellaneous Revenue	11	a b								
ellar ven		и С								
lisce Be			All other revenue							
Σ			Total. Add lines 11a-11d							
	12		Total revenue. See instruction				791,995.	0.	0.	-209,481.
13200	9 12-	09-	21							Form <b>990</b> (2021

# 10131115 759901 JE0059.000

JE0059.1

<sup>10</sup> 

DSC FOUNDATION, INC Part IX Statement of Functional Expenses

47-5373716 Page 10

#### Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Χ Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising expenses (C) Management and general expenses (B) (A) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 105,000. 105,000. and domestic governments. See Part IV, line 21 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 96,000. individuals. See Part IV, lines 15 and 16 96,000. Benefits paid to or for members 4 5 Compensation of current officers, directors, 147,500. 147,500. trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10,992. 10,992. 10 Payroll taxes 11 Fees for services (nonemployees): 24,165. 24,165. Management а b Legal 33,764. 33,764. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е 2,764. 2,764. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 276,237. 13,737. 262,500. column (A), amount, list line 11g expenses on Sch 0.) 4,269. 4,269. Advertising and promotion 12 1,058. 1,058. Office expenses 13 Information technology 14 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 10,013. 10,013. Depreciation, depletion, and amortization 22 2,548. 2,548. 23 Insurance Other expenses. Itemize expenses not covered 24 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 0.) 57,608. 57,608. BAD DEBT EXPENSE а OTHER PROGRAM EXPENSES 14,490. 14,490. h 10,661. 10,148. 10,661. SOFTWARE С 10,148. CREDIT CARD FEES d 26,596. 26,596. All other expenses е 833,813. 229,227. 546,978. 57,608. Total functional expenses. Add lines 1 through 24e 25 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)

132010 12-09-21

# 10131115 759901 JE0059.000

2021.05000 DSC FOUNDATION, INC

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Form 990 (2021)

10131115 759901 JE0059.000

JE0059.1

(A) Beginning of year (B) End of year 522,096. 370,604. 1 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 291,789. 171,826. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 Assets 8 Inventories for sale or use 8 982. 780. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 57,062. basis. Complete Part VI of Schedule D \_\_\_\_\_ 10a 18,036. 39,420. 39,026. b Less: accumulated depreciation \_\_\_\_\_ 10b 10c 361,612. 391,958. 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 0. 1,200. 15 15 Other assets. See Part IV, line 11 1,064,407. 1,126,886. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 132,606. 222,325. Accounts payable and accrued expenses 17 17 29,554. 36,304. 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 991. 25 of Schedule D 169,901. 251,879. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🔀 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 526,152. 472,903. 27 27 Net assets with donor restrictions 368,354. 402,104. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 875,007. 894,506. Total net assets or fund balances 32 32 064,407. 1,126,886. 33 33 Total liabilities and net assets/fund balances Form 990 (2021)

Form 990 (2021)
Part X Balance Sheet

DSC FOUNDATION, INC

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

Form	DSC FOUNDATION, INC	47-53	73716	Pag	<sub>je</sub> 12
Pa	rt 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	791		
2	Total expenses (must equal Part IX, column (A), line 25)	2	833		
3	Revenue less expenses. Subtract line 2 from line 1	3	-41	<u> </u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	894	<u> </u>	
5	Net unrealized gains (losses) on investments	5	22	, 31	L9.
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	875	, O (	)7.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				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	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
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		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(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.

Go to www.i

irs.gov/Form990 for instructions and the latest information	I.	
	_	-

	OMB No. 1545-0047
	2021
	Open to Public Inspection
Employer	identification number

Name of the organization

		DSC	FOUNDATION	, INC				4	7-5373716				
Pa	rt I	Reason for Public			omplete th	nis part.) S	ee instruction						
The	organ	ization is not a private found											
1		A church, convention of ch					I)(A)(i).						
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)											
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
		city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, state, or local go	overnment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).						
7		An organization that norma	ally receives a substar	ntial part of its support fr	rom a gove	ernmental	unit or from th	ne general j	public described in				
		section 170(b)(1)(A)(vi). (0	Complete Part II.)										
8		A community trust describ	ed in section 170(b)(	1)(A)(vi). (Complete Par	t II.)								
9		An agricultural research or	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college				
		or university or a non-land-	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	e or				
		university:											
10		An organization that norma	•					-	•				
		activities related to its exer							-				
		income and unrelated busi		(less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	after June 30, 1975.				
11		See section 509(a)(2). (Co		volute test for public est	fatu Caa	nontion E(	O(a)(4)						
	X	An organization organized An organization organized	-	•	•			rny out tho	purposes of one or				
12	- 23	more publicly supported o	-	-	-			•					
		lines 12a through 12d that	-										
а	X		• •					-	aivina				
		the supported organizati		-	• • •	-							
		organization. You must											
b		<b>Type II.</b> A supporting or	-		tion with its	s supporte	d organizatio	n(s), by hav	/ing				
		control or management					-		-				
		organization(s). You mu	st complete Part IV,	Sections A and C.									
с		Type III functionally into	egrated. A supporting	g organization operated	in connect	ion with, a	and functional	ly integrate	ed with,				
		its supported organization	on(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functional	y integrated. A supp	orting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)				
		that is not functionally in	tegrated. The organiz	ation generally must sat	isfy a distr	bution rec	uirement and	an attentiv	veness				
		requirement (see instruc	tions). You must con	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .						
е	X	- 0					Туре I, Туре	II, Type III					
		functionally integrated, c		nally integrated supporting	ng organiz	ation.			1				
f		er the number of supported	•						1				
<u> </u>	Prov	vide the following information i) Name of supported	in about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of	monetary	(vi) Amount of other				
	,	organization	(	(described on lines 1-10	in your governi Yes	ng document? No	support (see ir		support (see instructions)				
				above (see instructions))	103								
DA	LLA	S SAFARI CLUB	51-0157792	7	x			0.	0.				
Tota	al							0.	0.				

Schedule A	Eorm	000	002
Schedule A		990	1202

DSC FOUNDATION, INC

4	7	-5	3	7	3	71	6	Page 2
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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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support				1		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for the	-					. —
<u></u>	organization, check this box and stop	<u>o here</u>					·····
	ction C. Computation of Publi						
	Public support percentage for 2021 (I		-			14	%
	Public support percentage from 2020					15	%
108	33 1/3% support test - 2021. If the other here. The organization qualifies						
h	stop here. The organization qualifies		-			or more obsolute	
D	<b>33 1/3% support test - 2020.</b> If the o						
17-	and <b>stop here.</b> The organization qual		• •			and line 14 is 100/	
1/8	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	-	-	
L	meets the facts-and-circumstances te 10% -facts-and-circumstances test	-				17a and line 15 is	
D	more, and if the organization meets the						
	organization meets the facts-and-circl						
18	Private foundation. If the organization						
							(Form 990) 2021

DSC FOUNDATION, INC

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	ction A. Public Support				1		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
~	<b>o</b>						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and						
1 a	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
h	Unrelated business taxable income						
~	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included 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 Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ie organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiza	tion,
Sec	ction C. Computation of Publi	c Support Per	rcentage			· · · ·	
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2020					16	%
Sec	ction D. Computation of Inves					<u> </u>	
17	Investment income percentage for 20	<b>)21</b> (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2021. If the						17 is not
	more than 33 1/3%, check this box ar	-	•		•••		▶∟
b	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che			•		•	n ▶Ц
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in		
13202	3 01-04-22		16			Schedule	A (Form 990) 2021

Yes No

# Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

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Х 1 Х 2 х 3a 3b 3c Х 4a 4b 4c Х 5a 5b <u>5c</u> х 6 Х 7 Х 8 х 9a Х 9b Х 9c Х 10a 10b Schedule A (Form 990) 2021

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Schedule A	(Form 990) 202 <sup>-</sup>	1 DSC	FOUNDATION,
Part IV	Supporting	Organizations	(continued)

Х

х

No

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		Х
b	A family member of a person described on line 11a above?	11b		Х
с	A 35% 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		Х
Sec	tion B. Type I Supporting Organizations			
			Yes	No
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? <i>If "No," describe in</i> <b>Part VI</b> <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization for the supported organization of the supported organization of the supported organization of the organization o</i>			

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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. 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,

#### upervised. or controlled the supporting organization. Section C. Type II Supporting Organizations

Yes Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) 1

Section D. A	II Type III Supporting Orga	anizations

			Yes	No
1	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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

# Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

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 3b

Yes No

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Schedule A (Form 990) 2021

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Sche	dule A (Form 990) 2021 DSC FOUNDATION, INC			47-5373716 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on	Nov. 20, 1970 ( explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrat	ed Type III supporting or	rganization (see

instructions).

Schedule A (Form 990) 2021

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c Excess from 2019 d Excess from 2020 e Excess from 2021

2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
b	Excess from 2018				

DSC FOUNDATION, INCPart V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

1 Amounts paid to supported organizations to accomplish exempt purposes

Schedule A (Form 990) 2021

Section D - Distributions

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1

**Current Year** 

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Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021	DSC FOUNDATI	ON, IN	С		47-537371	6 Page 8
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D Section D, lines 5, 6, an	<b>Drmation.</b> Provide the ex 5 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 5 D, lines 2 and 3; Part IV, Sec ad 8; and Part V, Section E,	planations re 9a, 9b, 9c, 1 <sup>-</sup> xtion E, lines	equired by Part II, I 1a, 11b, and 11c; 1c, 2a, 2b, 3a, and	Part IV, Section B, line d 3b; Part V, line 1; Pa	a or 17b; Part III, line 12 es 1 and 2; Part IV, Sec art V, Section B, line 1e	2; tion C,
	(See instructions.)						
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00		Supplement	al Financial Statements	2		OMB No. 1545-0047
	HEDULE D n 990)		anization answered "Yes" on Form 990,			2021
		Part IV, line 6, 7, 8, 9, 10	), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12 Attach to Form 990.			Open to Public
	ment of the Treasury I Revenue Service		90 for instructions and the latest inform	ation.		Inspection
Nam	e of the organizati	on DSC FOUNDATION, IN	<b>^</b>			er identification number 47-5373716
Par	t I Organiza	ations Maintaining Donor Advise		or Ac		
		n answered "Yes" on Form 990, Part IV, lin			oountor	
	-		(a) Donor advised funds	()	<b>)</b> Funds a	nd other accounts
1	Total number at er	nd of year				
2		f contributions to (during year)				
3	Aggregate value o	f grants from (during year)				
4	Aggregate value a	t end of year				
5	Did the organization	on inform all donors and donor advisors in	writing that the assets held in donor advise	ed fund	s	
		n's property, subject to the organization's				Yes No
6		on inform all grantees, donors, and donor a				
		oses and not for the benefit of the donor o				
Par		ate benefit? ation Easements. Complete if the org				Yes No
				Part IV,	line 7.	
1		servation easements held by the organization	· · · · · ·	a histo	rically imp	autont land area
		n of land for public use (for example, recrea f natural habitat	Preservation of Preservation of		•	ortant land area
		of open space		acertii		
2		through 2d if the organization held a qualit	fied conservation contribution in the form	of a con	servation	easement on the last
_	day of the tax year	<b>a b</b> .		]		d at the End of the Tax Year
а	Total number of co	onservation easements			2a	
b	Total acreage rest			ſ	2b	
с	Number of conser	vation easements on a certified historic stru	ucture included in (a)		2c	
d	Number of conser	vation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	re		
	listed in the Nation	nal Register		[	2d	
3	Number of conser	vation easements modified, transferred, rel	eased, extinguished, or terminated by the	organiz	ation duri	ng the tax
	year 🕨					
4		where property subject to conservation eas				
5		tion have a written policy regarding the per orcement of the conservation easements it				Yes No
6	,	r hours devoted to monitoring, inspecting,				
0		r nours devoted to monitoring, inspecting,	handling of violations, and enforcing cons		leasemen	tto during the year
7	Amount of expens	es incurred in monitoring, inspecting, hanc	lling of violations, and enforcing conservat	tion eas	ements di	uring the year
	▶\$					
8	Does each conser	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(I	h)(4)(B)(i	)	
	and section 170(h)	(4)(B)(ii)?				Yes No
9	In Part XIII, describ	be how the organization reports conservation	on easements in its revenue and expense	stateme	ent and	
	balance sheet, and	d include, if applicable, the text of the footr	note to the organization's financial stateme	ents tha	t describe	s the
Dee		ounting for conservation easements.		h a 0		! .
Par		ations Maintaining Collections of		ner Si	milar As	ssets.
		the organization answered "Yes" on Form				
1a	-	elected, as permitted under FASB ASC 95				
		easures, or other similar assets held for put			ce of publ	C
b	· •	Part XIII the text of the footnote to its finar elected, as permitted under FASB ASC 95			choot wor	ke of
b		sures, or other similar assets held for public				
		ng amounts relating to these items:				
	-	ded on Form 990, Part VIII, line 1			▶ \$	
					· -	
2		received or held works of art, historical tre			· · _	
		unts required to be reported under FASB A				
а	-	on Form 990, Part VIII, line 1	-		▶ \$_	
		Form 990, Part X			▶ \$	
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.		Sch	edule D (Form 990) 2021

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30			
2021.05000	DSC	FOUNDATION,	INC

Sche		NDATION, IN				47-53			age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Simila	r Assets	contir	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the	following that make	significant	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further the	ne organization's ex	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o				ar assets	_	-		-
D	to be sold to raise funds rather than to be ma		<u>u</u>				Yes		No
Pai	<b>t IV</b> Escrow and Custodial Arran		te if the organizatio	n answered "Yes"	on Form 990	), Part IV, I	line 9, or		
	reported an amount on Form 990, Par								
<b>1</b> a	Is the organization an agent, trustee, custodi		•				7		٦
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:			<u> </u>	Amoun		
	De sienie a balance						Amoun		
	Beginning balance								
	Additions during the year								
e f	Distributions during the year								
' 2a	Ending balance Did the organization include an amount on Fe						Yes		No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • • • • • • • • • • • • •	∟			]
Par									<u></u>
	·	(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four	years	back
1a	Beginning of year balance	361,612.	306,660.	155,533		89,372.			
b	Contributions			149,960	•	65,355.			
с	Net investment earnings, gains, and losses	30,346.	54,952.	1,167	•	806.			
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance	391,958.	361,612.	306,660	. 1	155,533.			
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a	)) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment $\blacktriangleright \frac{77.7170}{27.7170}$	%							
С	Term endowment  22.2830	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered for	the organiz	ation	r		
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza						3b		<u> </u>
4 Par	t VI Land, Buildings, and Equipm		vment funds.						
1 41	Complete if the organization answere		Part IV line 11a S	ee Form 990 Part	X line 10				
	Description of property	(a) Cost or of			Accumulate	od	(d) Boo		
	Description of property	basis (investm	. ,		depreciation		( <b>u)</b> 600	value	E
19	Land		.,		1 5.41.01				
	Buildings								
	Leasehold improvements								
	Equipment								
	Other		5	7,062.	18,0	36.	3	9,0	26.
	. Add lines 1a through 1e. (Column (d) must e							9,02	
		quui i uni 330, i dil 7		<u>.,</u>		Schedule			
							•	,	-

Part VII	Investn	nonte -	Other Se	curities	
Schedule D	) (Form 990	) 2021	DSC	FOUNDATION,	INC

Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
			or your market value
2) Closely held equity interests     3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)	.,		,
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990. Part X. line 15.	
-	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	10.)	·····	
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)		i	
(6) (7)			
(7) (8)			
(7)			

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

Schedule D (Form 990) 2021

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Sche	dule D (Form 990) 2021 DSC FOUNDATION, INC			47-5	373716	Page <b>4</b>
	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re			9
	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	961	,231.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	22,319.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	146,917.			
е	Add lines 2a through 2d			2e		<u>,236.</u>
3	Subtract line 2e from line 1			3	791	,995.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	- 1 - 14/211-		5	791	,995.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts with	Expenses per l	Return	•	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				000	701
1	Total expenses and losses per audited financial statements			1	980	<u>,731.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1.1				
а	Donated services and use of facilities			-		
b	Prior year adjustments			-		
С	Other losses		146 010	-		
d	Other (Describe in Part XIII.)	· · · · · · · · · · · · · · · · · · ·	146,918.		110	010
е	Add lines 2a through 2d			2e		<u>,918.</u>
3	Subtract line <b>2e</b> from line <b>1</b>			3	833	,813.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1				
a	Investment expenses not included on Form 990, Part VIII, line 7b			-		
b						0
_c	Add lines 4a and 4b			4c	022	,813.
5 Dai	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) <b>t XIII</b> Supplemental Information.			5	000	,013.
га						

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 XI, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES INCLUDED ON LINE 8B	147,181.
ADVISORY FEES INCLUDED IN NET INVESTMENT INCOME	-2,764.
DONOR DIRECTED FUNDS RELEASED	2,500.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	146,917.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES INCLUDED ON LINE 8B	147,181.
ADVISORY FEES INCLUDED IN NET INVESTMENT INCOME	-2,763.
DONOR DIRECTED FUNDS RELEASED	2,500.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	146,918.
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33 10131115 759901 JE0059.000 2021.05000 DSC FOUNDATION,	INC JE0059.1

Part XIII Supplemental Information (continued)	
	Schedule D (Form 990) 2021

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SCHEDULE F Statement of Activities Outside the United States							OMB No. 1545-0047
	orm 990)	Complete if	the organization	n answered "Yes" on Form 990, Part	IV, line 14b, 1	5, or 16.	2021
	rtment of the Treasury		www.irc.gov/Eo	Attach to Form 990. rm990 for instructions and the latest	information		Open to Public Inspection
	nal Revenue Service ne of the organizatior		www.iis.gov/Fo		intornation.	Employer i	identification number
	C FOUNDATIO		ctivities Out	side the United States. Comple	te if the organ	47-537	
		Part IV, line 14b.			ete il the organ	ization answe	sied les on
1				ds to substantiate the amount of its gra he selection criteria used to award the			X Yes No
2	For grantmakers. United States.	Describe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistanc	e outside the
_3				n be duplicated if additional space is n			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in ( gram service, e specific type (s) in the regi	e expenditures for and investments
3 a	Subtotal	0	0				0.
	Total from continua	ation	0				0.
c	sheets to Part I <b>Totals</b> (add lines 3 and 3b)	a	0				0.

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

Schedule F (Form 990) 2021

132071 12-20-21

DSC FOUNDATION, INC

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM\ appraisal, other)
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	0.	WIRE TRANSFER	0.		FMV
			FUNDING OF					
		SUB-SAHARAN	ANTI-POACHING IN					
		AFRICA	MOZAMBIQUE	30,000.	WIRE TRANSFER	0.		FMV
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	0.	WIRE TRANSFER	0.		FMV
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	0.	WIRE TRANSFER	0.		FMV
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	10,000.	WIRE TRANSFER	0.		FMV
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	15,000.	WIRE TRANSFER	0.		FMV
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	10,000.	WIRE TRANSFER	Ο.		FMV
			FOR CONSERVATION,					
		SUB-SAHARAN	EDUCATION AND					
		AFRICA	ANTI-POACHING EFFORTS	5,000.	WIRE TRANSFER	0.		FMV

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2021

Page 2

	F (Form 990)	DSC F	OUNDATION, I	NC		47-53	73716		Page <b>2</b>
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)	
1 (a) Nam	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	FOR CONSERVATION, EDUCATION AND ANTI-POACHING EFFORTS	1,000.	WIRE TRANSFER	0.		FMV
			SUB-SAHARAN AFRICA	FOR CONSERVATION, EDUCATION AND ANTI-POACHING EFFORTS	5,000.	WIRE TRANSFER	0.		FMV
			SUB-SAHARAN AFRICA	FOR CONSERVATION, EDUCATION AND ANTI-POACHING EFFORTS	15,000.	WIRE TRANSFER	0.		FMV

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

ype of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)

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Schedule F (Form 990) 2021

Pa<u>ge</u> 3

Schedule F (Form 990) 2021

(a) Type of grant or assistance

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2021

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Schedule F (Form 990) 2021 DSC FOUNDATION, INC

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

GRANT APPLICATIONS, WHICH INCLUDE FINANCIAL STATEMENTS, REASONS AND NEEDS

FOR THE GRANT AND HOW MONEY IS BEING SPENT, ENTITY QUESTIONNAIRE,

INCLUDING TAX STATUS (NON-PROFIT) ARE REVIEWED BY THE GRANT COMMITTEE,

RECOMMENDATIONS ARE TAKEN TO THE BOARD AND APPROVED. GRANT RECIPIENTS

APPROVED FOR FUNDS MUST HAVE PERIODIC REPORTS RENDERED WITH PICTURES AND

A NARRATIVE REPORT UPDATE OR PROGRESS COVERING THE USE OF THE GRANT MONEY

ON THE IDENTIFIED PROJECTS FUNDED.

Schedule F (Form 990) 2021

JE0059.1

10131115 759901 JE0059.000

SCHEDULE G	Suppleme	ities	OMB No. 1545-0047							
(Form 990)						Part IV, line 17, 18, o rm 990-EZ, line 6a.	r 19,	or if the	2021	
Department of the Treasury		-	ttach to Form 990	-		-			Open to Public	
Internal Revenue Service Name of the organization		to www.irs.gov	/Form990 for instr	uction	s and	the latest informati	on.	<b>F</b> orm law and		
Name of the organization		NDATION,	INC					47-5373	entification number 0716	
	complete this part		organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E2	Z filers are not	
<ul> <li>Indicate whether th</li> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solici</li> <li>d In-person so</li> <li>2 a Did the organization</li> </ul>	e organization rais tions email solicitations tations licitations on have a written c ed in Form 990, P highest paid indiv	ed funds through r oral agreement art VII) or entity ir riduals or entities	e Solicita f Solicita g Special with any individual connection with p	tion of tion of fundra (incluc rofessi	non-g gover iising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Ye		
(i) Name and addres or entity (fund		(ii) <i>F</i>	Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts to from activity		Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization	
				Yes	No	-				
Total           3         List all states in whi or licensing.	ich the organizatio			contrib	▶ utions	or has been notified	it is e	exempt from re	egistration	
LHA For Paperwork Re	eduction Act Noti	ce, see the Instr	uctions for Form 9	990 or	990-E	Ζ.		Schedul	e G (Form 990) 2021	

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		(a) Event #1 AUCTION	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	coi. <b>(c)</b> )
1	Gross receipts	770,963.			770,963
2	Less: Contributions	721,767.			721,767
3	Gross income (line 1 minus line 2)	49,196.			49,196
4	Cash prizes				
5	Noncash prizes	124,788.			124,788
6	Rent/facility costs	9,265.			9,265
7	Food and beverages	43,198.			43,198
8	Entertainment	17,630.			17,630
	Other direct expenses	74,988.			74,988
9				<b>\</b>	
10	Direct expense summary. Add lines 4 throu	ugh 9 in column (d)		•	269,869
10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from	ugh 9 in column (d) n line 3, column (d)			269,869
10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization	ugh 9 in column (d) n line 3, column (d)			269,869
10 11 art	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from	n line 3, column (d) n line 3, column (d) n answered "Yes" on Form		eported more than	269,869 -220,673
10 11 art	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization	ugh 9 in column (d) n line 3, column (d)	990, Part IV, line 19, or r		269,869 -220,673
10 11 art	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization	n line 3, column (d) n line 3, column (d) n answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	269,869 -220,673
10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization	gh 9 in column (d) n line 3, column (d) n answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	269,869 -220,673
10 11 art	<ul> <li>Direct expense summary. Add lines 4 throut Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.</li> </ul>	(a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	269,869 -220,673 (d) Total gaming (ad
10 11 art	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	(a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	269,869 -220,673 (d) Total gaming (ad
10 11 art 2	<ul> <li>Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.</li> <li>Gross revenue</li> <li>Cash prizes</li> <li>Noncash prizes</li> </ul>	(a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	
10 11 11 11 11 1 1 2 3	<ul> <li>Direct expense summary. Add lines 4 throut Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.</li> <li>Gross revenue</li> <li>Cash prizes</li> <li>Noncash prizes</li> <li>Rent/facility costs</li> </ul>	(a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	269,869 -220,673 (d) Total gaming (ad
10 11 11 11 1 1 2 3 4	<ul> <li>Direct expense summary. Add lines 4 throut Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.</li> <li>Gross revenue</li> <li>Cash prizes</li> <li>Noncash prizes</li> <li>Rent/facility costs</li> </ul>	(a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	269,869 -220,673 (d) Total gaming (ad col. (a) through col. (
10 11 irt 2 3 4	<ul> <li>Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from</li> <li>Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.</li> <li>Gross revenue</li> <li>Cash prizes</li> <li>Noncash prizes</li> <li>Rent/facility costs</li> <li>Other direct expenses</li> </ul>	(a) Bingo (a) Bingo (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	eported more than (c) Other gaming	269,869 -220,673 (d) Total gaming (ad col. (a) through col. (
10 11 11 1 2 3 4 5	<ul> <li>Direct expense summary. Add lines 4 throut Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.</li> <li>Gross revenue</li> <li>Cash prizes</li> <li>Noncash prizes</li> <li>Rent/facility costs</li> <li>Other direct expenses</li> <li>Volunteer labor</li> </ul>	(a) Bingo (a) Bingo (b) Column (c)	990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	c) Other gaming	269,869 -220,673 (d) Total gaming (ad col. (a) through col. (

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes **b** If "Yes," explain: \_\_\_\_

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Schedule G (Form 990) 2021

Yes

No

No

Sch	edule G (Form 990) 2021	DSC	FOUNDATION,	INC	4	7-537	3716	Page 3
11	Does the organization conduct g						Yes	No
					r of a partnership or other entity formed			
							Yes	No
13	Indicate the percentage of gamin							
						13	a	%
							b	%
					's gaming/special events books and records:	····		
		•						
	Name 🕨							
	Address 🕨							
						_	_	
15a	Does the organization have a cor	ntract with	a third party from who	m the c	rganization receives gaming revenue?	L	Yes	No
_								
b					n 🕨 \$ and the amoun	[		
	of gaming revenue retained by th	-	•					
с	If "Yes," enter name and address	of the thi	rd party:					
	Name N							
	Name							
	Address							
16	Gaming manager information:							
10	Gaming manager mormation.							
	Name 🕨							
	Gaming manager compensation	▶ \$						
	Description of services provided							
	Director/officer	Em Em	ployee	Indep	pendent contractor			
	Mandatory distributions:							
а	Is the organization required unde	r state law	to make charitable dis	tributio	ns from the gaming proceeds to		-	
	retain the state gaming license?					L	∐ Yes	└── No
b		•		stribute	ed to other exempt organizations or spent in th	ie		
Pa	organization's own exempt activi rt IV Supplemental Infor				uired by Part I, line 2b, columns (iii) and (v); an		lines 0	0h 10h
ı a						o Part III,	lines 9,	90, 100,
	150, 15C, 16, and 17D, a	s applicab	ie. Also provide any ad-	aitionai	information. See instructions.			
13208	33 10-21-21					chedule G	i (Form	990) 2021
				43	5			

	continued)		
			Schedule G (Form 990)
132084 11-18-21			

SCHEDULE I	G	arants and Oth	er Assistan	ce to Organ	izations.		OMB No. 1545-0047			
(Form 990)	Go	vernments, an ete if the organization	d Individual	s in the Ŭni	ted States		2021			
Department of the Treasury	Compi	ete il the organization	Attach to For				Open to Public			
Internal Revenue Service		Go to www.ir	s.gov/Form990 fo		nation.		Inspection			
Name of the organization DSC FOUND	ATION, IN	С					Employer identification number $47-5373716$			
Part I General Information on Grants and Assistance										
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection										
criteria used to award the grants or assis	tance?						X Yes No			
2 Describe in Part IV the organization's pro	cedures for monit	oring the use of grant t	funds in the United	l States.						
Part II Grants and Other Assistance to I	-				anization answered "Y	'es" on Form 990, Parl	IV, line 21, for any			
recipient that received more than \$					(f) Method of	()				
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
CONSERVATION FORCE							TO SUPPORT THE OPERATIONS			
PO BOX 278							OF A SIMILAR ORGANIZATION			
METAIRIE, LA 70004	72-1364493	501(C)(3)	٥.	37,500.	FMV		IN CONSERVATION.			
THE WILDLIFE SOCIETY INC 425 BARLOW PLACE, SUITE 200 BETHESDA, MD 20814 52-0788946 501(C)(3) 0. 5,000.FMV					TO SUPPORT THE OPERATIONS OF A SIMILAR ORGANIZATION IN CONSERVATION.					
WILD SHEEP FOUNDATION 412 PRONGHORN TRAIL BOZEMAN, MT 59718	42-1109229	501(C)(3)	0.	10,000.	FMV		TO SUPPORT THE OPERATIONS OF A SIMILAR ORGANIZATION IN CONSERVATION.			
CONGRESSIONAL SPORTMEN FOUNDATION 110 NORTH CAROLINA AVENUE SE WASHINGTON, DC 20003	52-1686163	501(C)(3)	0.	20,000.	FMV		TO SUPPORT THE OPERATIONS OF A SIMILAR ORGANIZATION IN CONSERVATION.			
LUWIRE WILDLIFE CONSERVANCY FOUNDATION - 708 3RD AVE, STE 34 - NEW YORK, NY 10017	83-1655474	501(C)(3)	0.	10,000.	FMV		TO SUPPORT THE OPERATIONS OF A SIMILAR ORGANIZATION IN CONSERVATION.			
KIDS OUTDOOR ZONE 9508 CHISHOLM TRAIL AUSTIN, TX 78748	26-2314956	501(C)(3)	0.	1,000.	FMV		TO PROVIDE FAITH-BASED CAMPS AND MENTORING TO AT-RISK YOUTH			
2 Enter total number of section 501(c)(3) ar	nd government org	ganizations listed in the	e line 1 table				▶12.			
3 Enter total number of other organizations										

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

Schedule I (Form 990) 2021

# Schedule I (Form 990) DSC FOUNDATION, INC Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

47-5373716 Page 1

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARKS AND WILDLIFE FOUNDATION OF TEXAS, INC 2914 SWISS AVENUE -							TO SUPPORT THE OPERATIONS OF A SIMILAR ORGANIZATION
DALLAS, TX 75204	74-2602504	501(C)(3)	0.	5,000.	FMV		IN CONSERVATION
MULE DEER FOUNDATION 1939 SOUTH 4130 WEST SALT LAKE CITY, UT 84104	68-0163253	501(C)(3)	0.	7,500.	FMV		TO SUPPORT THE OPERATIONS OF A SIMILAR ORGANIZATION IN CONSERVATION
BIG BROTHERS BIG SISTERS LONE STAR 450 E JOHN CARPENTER FREEWAY IRVING, TX 75062	75-0800632	501(C)(3)	0.	1,000.	FMV		TO SUPPORT AND EMPOWER CHILDREN
FOREVER FOUNDATION FOR TX WILDLIFE 6644 FM 1102 NEW BRAUNFELS, TX 78132	74-2605516	501(C)(3)	0.	5,000.	FMV		TO SUPPORT THE OPERATION: OF A SIMILAR ORGANIZATION IN CONSERVATION
ECO DEFENSE GROUP 6300 N SAGEWOOD DR STE H-234 PARK CITY, UT 84098	82-2083991	501(C)(3)	0.	2,000.	FMV		TO SUPPORT THE OPERATION OF A SIMILAR ORGANIZATION IN CONSERVATION
MOZAMBIQUE CONSERVATION FORCE 21212 TELEPHONE RD HEMPSTEAD, TX 77445	84-2419452	501(C)(3)	0.	1,000.			TO SUPPORT THE OPERATION OF A SIMILAR ORGANIZATION IN CONSERVATION

Schedule I (Form 990)

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:

Schedule I (Form 990) 2021

Part III

GRANT RECIPIENTS MUST HAVE PERIODIC REPORTS RENDERED WITH PICTURES AND

NARRATIVE UPDATES OR PROGRESS COVERING THE USE OF THE GRANT MONEY ON THE

IDENTIFIED PROJECTS.

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 non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Page 2

SC	HEDULE J	Compensation Information	1	OMB No. 1	545-00	47		
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	F	20	<b>n</b> 1			
		Compensated Employees		20		1		
Dono	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	lic		
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection				
Nam	e of the organizatio	1	Employer i			mber		
		DSC FOUNDATION, INC	47-5	537371	6			
Pa	rt I Question	s Regarding Compensation						
					Yes	No		
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,					
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for com	panions Payments for business use of personal re	sidence					
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S					
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)					
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or p	provision of all of the expenses described above? If "No," complete Part III to explain		1b				
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2				
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization's	<b>;</b>					
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to					
	establish compensation	ation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee Written employment contract							
	Independent of	compensation consultant X Compensation survey or study						
	Form 990 of o	ther organizations Approval by the board or compensation c	ommittee					
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a re	lated organization:						
а	Receive a severance	e payment or change-of-control payment?		<b>4</b> a		<u> </u>		
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X		
С	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X		
	If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n					
	contingent on the r							
						X		
b		ation?		<b>5</b> b		X		
		or 5b, describe in Part III.						
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	'n					
	contingent on the r			6a		X		
	a The organization?							
b		ation?		6b		X		
		or 6b, describe in Part III.						
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		7				
	not described on lines 5 and 6? If "Yes," describe in Part III					X		
8								
_				8		X		
9		id the organization also follow the rebuttable presumption procedure described in						
		1 53.4958-6(c)?			<i>c</i> :	<u> </u>		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	lule J (Forn	n 990	) 2021		

132111 11-02-21

# 47-5373716

### 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>(B)</b> Breakdown of W	-2 and/or 1099-MISC compensation	C and/or 1099-NEC	other deferred benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) RICHARD CHEATHAM	(i)	147,500.	0.	0.	0.	0.	147,500.	0.
FORMER EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

### 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.

Schedule J (Form 990) 2021

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



47-5373716

DSC FOUNDATION, INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CLUB AND TO PROMOTE, ESTABLISH AND CONDUCT SCIENCE BASED RESEARCH

SUPPORTING SUSTAINABLE USE WILDLIFE CONSERVATION AND THE ROLE OF WELL

TO CREATE AND MAINTAIN A LIBRARY OF PRIMARY AND REGULATED HUNTING.

SECONDARY RESEARCH RELATING TO WILDLIFE CONSERVATION MADE AVAILABLE TO

THE PUBLIC. TO DEVELOP EDUCATIONAL PROGRAMS THAT PROMOTE THE CONCEPT

AND BENEFITS OF SUSTAINABLE USE WILDLIFE CONSERVATION AND WELL

REGULATED HUNTING GLOBALLY AND TO PROVIDE GRANTS OR OTHERWISE PARTNER

WITH OTHER CHARITABLE, EDUCATIONAL AND GOVERNMENTAL ORGANZIATIONS

PURSUING THE SAME OR SIMILAR GOAS AS THE DALLAS SAFARI CLUB.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MAINTAIN A LIBRARY OF PRIMARY AND SECONDARY RESEARCH RELATING TO

WILDLIFE CONSERVATION MADE AVAILABLE TO THE PUBLIC. TO DEVELOP

EDUCATIONAL PROGRAMS THAT PROMOTE THE CONCEPT AND BENEFITS OF

SUSTAINABLE USE WILDLIFE CONSERVATION AND WELL REGULATED HUNTING

GLOBALLY AND TO PROVIDE GRANTS OR OTHERWISE PARTNER WITH OTHER

EDUCATIONAL AND GOVERNMENTAL ORGANZIATIONS PURSUING THE CHARITABLE,

SAME OR SIMILAR GOALS AS THE DALLAS SAFARI CLUB.

FORM 990, PART VI, SECTION B, LINE 11B:

DRAFT IS PROVIDED TO THE BOARD PRIOR TO FILING OF THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

NO LESS THAN ANNUAL REVIEW.

Schedule O (Form 990) 2021

INC

Schedule O (Form 990) 2021	Page <b>2</b>
Name of the organization DSC FOUNDATION, INC	Employer identification number 47-5373716
EODM 000 DADE VI GEORION C LINE 19.	
UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES	13,737.
MANAGEMENT AND GENERAL EXPENSES	262,500.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	276,237.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	276,237.
132212 11-11-21	Schedule O (Form 990) 2021