

Application for Recognition of Exemption
Under Section 501(c)(3) of the Internal Revenue Code

(00)

OMB No. 1545-0056

Note: If exempt status is approved, this application will be open for public inspection.

▶ (Use with the June 2006 revision of the Instructions for Form 1023 and the current Notice 1382)

Use the instructions to complete this application and for a definition of all **bold** items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at www.irs.gov for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts I - XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

Part I Identification of Applicant

1 Full name of organization (exactly as it appears in your organizing document)		2 c/o Name (if applicable)	
DSC Foundation, Inc.			
3 Mailing address (Number and street) (see instructions)		Room/Suite	4 Employer Identification Number (EIN)
13709 Gamma Road			47-5373716
City or town, state or country, and ZIP + 4		5 Month the annual accounting period ends (01 - 12)	
Dallas, Texas 75244		12	
6 Primary contact (officer, director, trustee, or authorized representative)		b Phone: 214-923-3950	
a Name: Richard T. Cheatham		c Fax: (optional)	
7 Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, <i>Power of Attorney and Declaration of Representative</i> , with your application if you would like us to communicate with your representative.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8 Was a person who is not one of your officers, directors, trustees, employees, or an authorized representative listed in line 7, paid, or promised payment, to help plan, manage, or advise you about the structure or activities of your organization, or about your financial or tax matters? If "Yes," provide the person's name, the name and address of the person's firm, the amounts paid or promised to be paid, and describe that person's role.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9a Organization's website: www.DSCF.org			
b Organization's email: (optional) info@DSCF.org			
10 Certain organizations are not required to file an information return (Form 990 or Form 990-EZ). If you are granted tax-exemption, are you claiming to be excused from filing Form 990 or Form 990-EZ? If "Yes," explain. See the instructions for a description of organizations not required to file Form 990 or Form 990-EZ.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11 Date incorporated if a corporation, or formed, if other than a corporation. (MM/DD/YYYY)		06 / 16 / 2015	
12 Were you formed under the laws of a foreign country ? If "Yes," state the country.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part II Organizational Structure

You must be a corporation (including a limited liability company), an unincorporated association, or a trust to be tax exempt. (See instructions.) **DO NOT file this form unless you can check "Yes" on lines 1, 2, 3, or 4.**

- 1 Are you a **corporation**? If "Yes," attach a copy of your articles of incorporation showing **certification of filing** with the appropriate state agency. Include copies of any amendments to your articles and be sure they also show state filing certification. **Yes** **No**
- 2 Are you a **limited liability company (LLC)**? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application. **Yes** **No**
- 3 Are you an **unincorporated association**? If "Yes," attach a copy of your articles of association, constitution, or other similar organizing document that is dated and includes at least two signatures. Include signed and dated copies of any amendments. **Yes** **No**
- 4a Are you a **trust**? If "Yes," attach a signed and dated copy of your trust agreement. Include signed and dated copies of any amendments. **Yes** **No**
- b Have you been funded? If "No," explain how you are formed without anything of value placed in trust. **Yes** **No**
- 5 Have you adopted **bylaws**? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected. **Yes** **No**

Part III Required Provisions in Your Organizing Document

The following questions are designed to ensure that when you file this application, your organizing document contains the required provisions to meet the organizational test under section 501(c)(3). Unless you can check the boxes in both lines 1 and 2, your organizing document does not meet the organizational test. **DO NOT file this application until you have amended your organizing document.** Submit your original and amended organizing documents (showing state filing certification if you are a corporation or an LLC) with your application.

- 1 Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph): **Page 3, Article 5, Paragraph a**
- 2a Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c.
- 2b If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. **Page 4, Article 6, Paragraph c**
- 2c See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state:

Part IV Narrative Description of Your Activities

Using an attachment, describe your *past*, *present*, and *planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 1a List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
See Attachment 5.		
		
		
		
		

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

b List the names, titles, and mailing addresses of each of your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation. Do not include officers, directors, or trustees listed in line 1a.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
None.		
		
		
		
		

c List the names, names of businesses, and mailing addresses of your five highest compensated independent contractors that receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
None.		
		
		
		
		

The following "Yes" or "No" questions relate to *past, present, or planned* relationships, transactions, or agreements with your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, and 1c.

2a Are any of your officers, directors, or trustees **related** to each other through **family or business relationships**? If "Yes," identify the individuals and explain the relationship. **Yes** **No**

b Do you have a business relationship with any of your officers, directors, or trustees other than through their position as an officer, director, or trustee? If "Yes," identify the individuals and describe the business relationship with each of your officers, directors, or trustees. **Yes** **No**

c Are any of your officers, directors, or trustees related to your highest compensated employees or highest compensated independent contractors listed on lines 1b or 1c through family or business relationships? If "Yes," identify the individuals and explain the relationship. **Yes** **No**

3a For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties.

b Do any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c receive compensation from any other organizations, whether tax exempt or taxable, that are related to you through **common control**? If "Yes," identify the individuals, explain the relationship between you and the other organization, and describe the compensation arrangement. **Yes** **No**

4 In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption. Answer "Yes" to all the practices you use.

a Do you or will the individuals that approve compensation arrangements follow a conflict of interest policy? **Yes** **No**

b Do you or will you approve compensation arrangements in advance of paying compensation? **Yes** **No**

c Do you or will you document in writing the date and terms of approved compensation arrangements? **Yes** **No**

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- d** Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements? Yes No
- e** Do you or will you approve compensation arrangements based on information about compensation paid by **similarly situated** taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. Yes No
- f** Do you or will you record in writing both the information on which you relied to base your decision and its source? Yes No
- g** If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is **reasonable** for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.
-
- 5a** Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c. Yes No
- b** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation?
- c** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves?
- Note:** A conflict of interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.
-
- 6a** Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through **non-fixed payments**, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. Yes No
- b** Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. Yes No
-
- 7a** Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine that you pay no more than **fair market value**. Attach copies of any written contracts or other agreements relating to such purchases. Yes No
- b** Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales. Yes No
-
- 8a** Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f. Yes No
- b** Describe any written or oral arrangements that you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at arm's length.
- e** Explain how you determine you pay no more than fair market value or you are paid at least fair market value.
- f** Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.
-
- 9a** Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f. Yes No

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- b Describe any written or oral arrangements you made or intend to make.
- c Identify with whom you have or will have such arrangements.
- d Explain how the terms are or will be negotiated at arm's length.
- e Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You

The following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and organizations as part of your activities. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1a In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals. Yes No
- b In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations. Yes No
- 2 Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program. Yes No
- 3 Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds. Yes No

Part VII Your History

The following "Yes" or "No" questions relate to your history. (See instructions.)

- 1 Are you a **successor** to another organization? Answer "Yes," if you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to non-profit status. If "Yes," complete Schedule G. Yes No
- 2 Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E. Yes No

Part VIII Your Specific Activities

The following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropriate box. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1 Do you support or oppose candidates in **political campaigns** in any way? If "Yes," explain. Yes No
- 2a Do you attempt to **influence legislation**? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a. Yes No
- b Have you made or are you making an **election** to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities. Yes No
- 3a Do you or will you operate bingo or **gaming** activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. **Revenue and expenses** should be provided for the time periods specified in Part IX, Financial Data. Yes No
- b Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies or any written contracts or other agreements relating to such arrangements. Yes No
- c List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo.

Part VIII Your Specific Activities (Continued)

- 4a** Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct. (See instructions.) **Yes** **No**
- mail solicitations
 - email solicitations
 - personal solicitations
 - vehicle, boat, plane, or similar donations
 - foundation grant solicitations
 - phone solicitations
 - accept donations on your website
 - receive donations from another organization's website
 - government grant solicitations
 - Other

Attach a description of each fundraising program.

- b** Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements. **Yes** **No**
- c** Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements. **Yes** **No**
- d** List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you.
- e** Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes" if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors. **Yes** **No**

5 Are you **affiliated** with a governmental unit? If "Yes," explain. **Yes** **No**

6a Do you or will you engage in **economic development**? If "Yes," describe your program. **Yes** **No**

b Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.

7a Do or will persons other than your employees or volunteers **develop** your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees. **Yes** **No**

b Do or will persons other than your employees or volunteers **manage** your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees. **Yes** **No**

c If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements.

8 Do you or will you enter into **joint ventures**, including partnerships or **limited liability companies** treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate. **Yes** **No**

9a Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10. **Yes** **No**

b Do you provide child care so that parents or caretakers of children you care for can be **gainfully employed** (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). **Yes** **No**

c Of the children for whom you provide child care, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). **Yes** **No**

d Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k). **Yes** **No**

10 Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other **intellectual property**? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed. **Yes** **No**

Part VIII Your Specific Activities (Continued)

- 11** Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution. **Yes** **No**
-
- 12a** Do you or will you operate in a **foreign country or countries**? If "Yes," answer lines 12b through 12d. If "No," go to line 13a. **Yes** **No**
- b** Name the foreign countries and regions within the countries in which you operate.
- c** Describe your operations in each country and region in which you operate.
- d** Describe how your operations in each country and region further your exempt purposes.
-
- 13a** Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a. **Yes** **No**
- b** Describe how your grants, loans, or other distributions to organizations further your exempt purposes.
- c** Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract. **Yes** **No**
- d** Identify each recipient organization and any **relationship** between you and the recipient organization.
- e** Describe the records you keep with respect to the grants, loans, or other distributions you make.
- f** Describe your selection process, including whether you do any of the following:
- (i)** Do you require an application form? If "Yes," attach a copy of the form. **Yes** **No**
- (ii)** Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused. **Yes** **No**
- g** Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.
-
- 14a** Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15. **Yes** **No**
- b** Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.
- c** Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries. **Yes** **No**
- d** Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors. **Yes** **No**
- e** Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information. **Yes** **No**
- f** Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately. **Yes** **No**

Part VIII Your Specific Activities *(Continued)*

- | | | | |
|-----------|--|--|---|
| 15 | Do you have a close connection with any organizations? If "Yes," explain. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16 | Are you applying for exemption as a cooperative hospital service organization under section 501(e)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 17 | Are you applying for exemption as a cooperative service organization of operating educational organizations under section 501(f)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 18 | Are you applying for exemption as a charitable risk pool under section 501(n)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 19 | Do you or will you operate a school ? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 20 | Is your main function to provide hospital or medical care ? If "Yes," complete Schedule C. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 21 | Do you or will you provide low-income housing or housing for the elderly or handicapped ? If "Yes," complete Schedule F. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 22 | Do you or will you provide scholarships, fellowships, educational loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Note: Private foundations may use Schedule H to request advance approval of individual grant procedures.

Part IX Financial Data

For purposes of this schedule, years in existence refer to completed tax years. If in existence 4 or more years, complete the schedule for the most recent 4 tax years. If in existence more than 1 year but less than 4 years, complete the statements for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. If in existence less than 1 year, provide projections of your likely revenues and expenses for the current year and the 2 following years, based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. (See instructions.)

A. Statement of Revenues and Expenses

	Type of revenue or expense	Current tax year	3 prior tax years or 2 succeeding tax years			(e) Provide Total for (a) through (d)
		(a) From <u>01/01/16</u> To <u>12/31/16</u>	(b) From <u>06/16/15</u> To <u>12/31/15</u>	(c) From <u>01/01/17</u> To <u>12/31/17</u>	(d) From..... To	
Revenues	1 Gifts, grants, and contributions received (do not include unusual grants)	1,100,000	17,600	1,375,000		2,492,600
	2 Membership fees received	0	0	0		0
	3 Gross investment income	0	0	0		0
	4 Net unrelated business income	0	0	0		0
	5 Taxes levied for your benefit	0	0	0		0
	6 Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)	0	0	0		0
	7 Any revenue not otherwise listed above or in lines 9–12 below (attach an itemized list)	0	0	0		0
	8 Total of lines 1 through 7	1,100,000	17,600	1,375,000		2,492,600
	9 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)	0	0	0		0
	10 Total of lines 8 and 9	1,100,000	17,600	1,375,000		2,492,600
11 Net gain or loss on sale of capital assets (attach schedule and see instructions)	0	0	0		0	
12 Unusual grants	0	0	0		0	
13 Total Revenue Add lines 10 through 12	1,100,000	17,600	1,375,000		2,492,600	
Expenses	14 Fundraising expenses	10,000	0	10,000		
	15 Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)	950,000	0	1,200,000		
	16 Disbursements to or for the benefit of members (attach an itemized list)	0	0	0		
	17 Compensation of officers, directors, and trustees	0	0	0		
	18 Other salaries and wages	50,000	0	100,000		
	19 Interest expense	0	0	0		
	20 Occupancy (rent, utilities, etc.)	0	0	0		
	21 Depreciation and depletion	0	0	0		
	22 Professional fees	22,500	0	10,000		
	23 Any expense not otherwise classified, such as program services (attach itemized list)	19,290	1,033	22,340		
	24 Total Expenses Add lines 14 through 23	1,051,790	1,033	1,342,340		

Part IX Financial Data (Continued)

B. Balance Sheet (for your most recently completed tax year)

Year End: **2015**

Assets		(Whole dollars)
1	Cash	0
2	Accounts receivable, net	17,600
3	Inventories	0
4	Bonds and notes receivable (attach an itemized list)	0
5	Corporate stocks (attach an itemized list)	0
6	Loans receivable (attach an itemized list)	0
7	Other investments (attach an itemized list)	0
8	Depreciable and depletable assets (attach an itemized list)	0
9	Land	0
10	Other assets (attach an itemized list)	0
11	Total Assets (add lines 1 through 10)	17,600
Liabilities		
12	Accounts payable	0
13	Contributions, gifts, grants, etc. payable	0
14	Mortgages and notes payable (attach an itemized list)	0
15	Other liabilities (attach an itemized list)	0
16	Total Liabilities (add lines 12 through 15)	0
Fund Balances or Net Assets		
17	Total fund balances or net assets	17,600
18	Total Liabilities and Fund Balances or Net Assets (add lines 16 and 17)	17,600
19	Have there been any substantial changes in your assets or liabilities since the end of the period shown above? If "Yes," explain.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part X Public Charity Status

Part X is designed to classify you as an organization that is either a **private foundation** or a **public charity**. Public charity status is a more favorable tax status than private foundation status. If you are a private foundation, Part X is designed to further determine whether you are a **private operating foundation**. (See instructions.)

- 1a** Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed. If you are unsure, see the instructions. Yes No
- b** As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law. Attach a statement that describes specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document or by operation of state law. See the instructions, including Appendix B, for information about the special provisions that need to be contained in your organizing document. Go to line 2.
- 2** Are you a private operating foundation? To be a private operating foundation you must engage directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. If "Yes," go to line 3. If "No," go to the signature section of Part XI. Yes No
- 3** Have you existed for one or more years? If "Yes," attach financial information showing that you are a private operating foundation; go to the signature section of Part XI. If "No," continue to line 4. Yes No
- 4** Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation? Yes No
- 5** If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box.
- The organization is not a private foundation because it is:
- a** 509(a)(1) and 170(b)(1)(A)(i)—a church or a convention or association of churches. Complete and attach Schedule A.
 - b** 509(a)(1) and 170(b)(1)(A)(ii)—a **school**. Complete and attach Schedule B.
 - c** 509(a)(1) and 170(b)(1)(A)(iii)—a **hospital**, a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C.
 - d** 509(a)(3)—an organization supporting either one or more organizations described in line 5a through c, f, g, or h or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.

Part X Public Charity Status (Continued)

- e 509(a)(4)—an organization organized and operated exclusively for testing for public safety.
- f 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.
- g 509(a)(1) and 170(b)(1)(A)(vi)—an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.
- h 509(a)(2)—an organization that normally receives not more than one-third of its financial support from gross **investment income** and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).
- i A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.

6 If you checked box g, h, or i in question 5 above, you must request either an **advance** or a **definitive ruling** by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.

a Request for Advance Ruling: By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, *Extending the Tax Assessment Period*, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at www.irs.gov or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.

Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

For Organization

.....
 (Signature of Officer, Director, Trustee, or other authorized official)

.....
 (Type or print name of signer)

.....
 (Date)

.....
 (Type or print title or authority of signer)

For IRS Use Only

.....
 IRS Director, Exempt Organizations

.....
 (Date)

b Request for Definitive Ruling: Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6b(i) and (ii).

(i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses. _____

(b) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," check this box.

(ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each **disqualified person**. If the answer is "None," check this box.

(b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.

7 Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual. Yes No

Part XI User Fee Information

You must include a user fee payment with this application. It will not be processed without your paid user fee. If your average annual gross receipts have exceeded or will exceed \$10,000 annually over a 4-year period, you must submit payment of \$850. If your gross receipts have not exceeded or will not exceed \$10,000 annually over a 4-year period, the required user fee payment is \$400. See instructions for Part XI, for a definition of **gross receipts** over a 4-year period. Your check or money order must be made payable to the United States Treasury. *User fees are subject to change. Check our website at www.irs.gov and type "User Fee" in the keyword box, or call Customer Account Services at 1-877-829-5500 for current information.*

- 1 Have your annual gross receipts averaged or are they expected to average not more than \$10,000? Yes No
 If "Yes," check the box on line 2 and enclose a user fee payment of \$400 (Subject to change—see above).
 If "No," check the box on line 3 and enclose a user fee payment of \$850 (Subject to change—see above).
- 2 Check the box if you have enclosed the reduced user fee payment of \$400 (Subject to change).
- 3 Check the box if you have enclosed the user fee payment of \$850 (Subject to change).

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please Sign Here

.....
 (Signature of Officer, Director, Trustee, or other authorized official)

Richard Cheatham

.....
 (Type or print name of signer)

.....
 (Date)

Vice President, Director

.....
 (Type or print title or authority of signer)

Reminder: Send the completed Form 1023 Checklist with your filled-in-application.

Schedule A. Churches

- 1a** Do you have a written creed, statement of faith, or summary of beliefs? If "Yes," attach copies of relevant documents. **Yes** **No**
- b** Do you have a form of worship? If "Yes," describe your form of worship. **Yes** **No**
- 2a** Do you have a formal code of doctrine and discipline? If "Yes," describe your code of doctrine and discipline. **Yes** **No**
- b** Do you have a distinct religious history? If "Yes," describe your religious history. **Yes** **No**
- c** Do you have a literature of your own? If "Yes," describe your literature. **Yes** **No**
- 3** Describe the organization's religious hierarchy or ecclesiastical government.
- 4a** Do you have regularly scheduled religious services? If "Yes," describe the nature of the services and provide representative copies of relevant literature such as church bulletins. **Yes** **No**
- b** What is the average attendance at your regularly scheduled religious services? _____
- 5a** Do you have an established place of worship? If "Yes," refer to the instructions for the information required. **Yes** **No**
- b** Do you own the property where you have an established place of worship? **Yes** **No**
- 6** Do you have an established congregation or other regular membership group? If "No," refer to the instructions. **Yes** **No**
- 7** How many members do you have? _____
- 8a** Do you have a process by which an individual becomes a member? If "Yes," describe the process and complete lines 8b-8d, below. **Yes** **No**
- b** If you have members, do your members have voting rights, rights to participate in religious functions, or other rights? If "Yes," describe the rights your members have. **Yes** **No**
- c** May your members be associated with another denomination or church? **Yes** **No**
- d** Are all of your members part of the same **family**? **Yes** **No**
- 9** Do you conduct baptisms, weddings, funerals, etc.? **Yes** **No**
- 10** Do you have a school for the religious instruction of the young? **Yes** **No**
- 11a** Do you have a minister or religious leader? If "Yes," describe this person's role and explain whether the minister or religious leader was ordained, commissioned, or licensed after a prescribed course of study. **Yes** **No**
- b** Do you have schools for the preparation of your ordained ministers or religious leaders? **Yes** **No**
- 12** Is your minister or religious leader also one of your officers, directors, or trustees? **Yes** **No**
- 13** Do you ordain, commission, or license ministers or religious leaders? If "Yes," describe the requirements for ordination, commission, or licensure. **Yes** **No**
- 14** Are you part of a group of churches with similar beliefs and structures? If "Yes," explain. Include the name of the group of churches. **Yes** **No**
- 15** Do you issue church charters? If "Yes," describe the requirements for issuing a charter. **Yes** **No**
- 16** Did you pay a fee for a church charter? If "Yes," attach a copy of the charter. **Yes** **No**
- 17** Do you have other information you believe should be considered regarding your status as a church? If "Yes," explain. **Yes** **No**

Schedule B. Schools, Colleges, and Universities

If you operate a school as an activity, complete Schedule B

Section I Operational Information

1a Do you normally have a regularly scheduled curriculum, a regular faculty of qualified teachers, a regularly enrolled student body, and facilities where your educational activities are regularly carried on? If "No," do not complete the remainder of Schedule B. **Yes** **No**

b Is the primary function of your school the presentation of formal instruction? If "Yes," describe your school in terms of whether it is an elementary, secondary, college, technical, or other type of school. If "No," do not complete the remainder of Schedule B. **Yes** **No**

2a Are you a public school because you are operated by a state or subdivision of a state? If "Yes," explain how you are operated by a state or subdivision of a state. Do not complete the remainder of Schedule B. **Yes** **No**

b Are you a public school because you are operated wholly or predominantly from government funds or property? If "Yes," explain how you are operated wholly or predominantly from government funds or property. Submit a copy of your funding agreement regarding government funding. Do not complete the remainder of Schedule B. **Yes** **No**

3 In what public school district, county, and state are you located?

4 Were you formed or substantially expanded at the time of public school desegregation in the above school district or county? **Yes** **No**

5 Has a state or federal administrative agency or judicial body ever determined that you are racially discriminatory? If "Yes," explain. **Yes** **No**

6 Has your right to receive financial aid or assistance from a governmental agency ever been revoked or suspended? If "Yes," explain. **Yes** **No**

7 Do you or will you contract with another organization to develop, build, market, or finance your facilities? If "Yes," explain how that entity is selected, explain how the terms of any contracts or other agreements are negotiated at arm's length, and explain how you determine that you will pay no more than fair market value for services. **Yes** **No**

Note. Make sure your answer is consistent with the information provided in Part VIII, line 7a.

8 Do you or will you manage your activities or facilities through your own employees or volunteers? If "No," attach a statement describing the activities that will be managed by others, the names of the persons or organizations that manage or will manage your activities or facilities, and how these managers were or will be selected. Also, submit copies of any contracts, proposed contracts, or other agreements regarding the provision of management services for your activities or facilities. Explain how the terms of any contracts or other agreements were or will be negotiated, and explain how you determine you will pay no more than fair market value for services. **Yes** **No**

Note. Answer "Yes" if you manage or intend to manage your programs through your own employees or by using volunteers. Answer "No" if you engage or intend to engage a separate organization or independent contractor. Make sure your answer is consistent with the information provided in Part VIII, line 7b.

Section II Establishment of Racially Nondiscriminatory Policy

Information required by **Revenue Procedure 75-50.**

1 Have you adopted a racially nondiscriminatory policy as to students in your organizing document, bylaws, or by resolution of your governing body? If "Yes," state where the policy can be found or supply a copy of the policy. If "No," you must adopt a nondiscriminatory policy as to students before submitting this application. See Publication 557. **Yes** **No**

2 Do your brochures, application forms, advertisements, and catalogues dealing with student admissions, programs, and scholarships contain a statement of your racially nondiscriminatory policy? **Yes** **No**

a If "Yes," attach a representative sample of each document.

b If "No," by checking the box to the right you agree that all future printed materials, including website content, will contain the required nondiscriminatory policy statement.

3 Have you published a notice of your nondiscriminatory policy in a newspaper of general circulation that serves all racial segments of the community? (See the instructions for specific requirements.) If "No," explain. **Yes** **No**

4 Does or will the organization (or any department or division within it) discriminate in any way on the basis of race with respect to admissions; use of facilities or exercise of student privileges; faculty or administrative staff; or scholarship or loan programs? If "Yes," for any of the above, explain fully. **Yes** **No**

Schedule B. Schools, Colleges, and Universities (Continued)

5 Complete the table below to show the racial composition for the current academic year and projected for the next academic year, of: (a) the student body, (b) the faculty, and (c) the administrative staff. Provide actual numbers rather than percentages for each racial category.

If you are not operational, submit an estimate based on the best information available (such as the racial composition of the community served).

Racial Category	(a) Student Body		(b) Faculty		(c) Administrative Staff	
	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year
Total						

6 In the table below, provide the number and amount of loans and scholarships awarded to students enrolled by racial categories.

Racial Category	Number of Loans		Amount of Loans		Number of Scholarships		Amount of Scholarships	
	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year
Total								

7a Attach a list of your incorporators, founders, board members, and donors of land or buildings, whether individuals or organizations.

b Do any of these individuals or organizations have an objective to maintain segregated public or private school education? If "Yes," explain. **Yes** **No**

8 Will you maintain records according to the non-discrimination provisions contained in Revenue Procedure 75-50? If "No," explain. (See instructions.) **Yes** **No**

Schedule C. Hospitals and Medical Research Organizations

Check the box if you are a **hospital**. See the instructions for a definition of the term "hospital," which includes an organization whose principal purpose or function is providing **hospital** or **medical care**. Complete Section I below.

Check the box if you are a **medical research organization** operated in conjunction with a hospital. See the instructions for a definition of the term "medical research organization," which refers to an organization whose principal purpose or function is medical research and which is directly engaged in the continuous active conduct of medical research in conjunction with a hospital. Complete Section II.

Section I Hospitals

- | | | | |
|-----------|--|-------------------------------------|------------------------------------|
| 1a | Are all the doctors in the community eligible for staff privileges? If "No," give the reasons why and explain how the medical staff is selected. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2a | Do you or will you provide medical services to all individuals in your community who can pay for themselves or have private health insurance? If "No," explain. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b | Do you or will you provide medical services to all individuals in your community who participate in Medicare? If "No," explain. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c | Do you or will you provide medical services to all individuals in your community who participate in Medicaid? If "No," explain. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3a | Do you or will you require persons covered by Medicare or Medicaid to pay a deposit before receiving services? If "Yes," explain. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b | Does the same deposit requirement, if any, apply to all other patients? If "No," explain. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4a | Do you or will you maintain a full-time emergency room? If "No," explain why you do not maintain a full-time emergency room. Also, describe any emergency services that you provide. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b | Do you have a policy on providing emergency services to persons without apparent means to pay? If "Yes," provide a copy of the policy. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c | Do you have any arrangements with police, fire, and voluntary ambulance services for the delivery or admission of emergency cases? If "Yes," describe the arrangements, including whether they are written or oral agreements. If written, submit copies of all such agreements. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5a | Do you provide for a portion of your services and facilities to be used for charity patients? If "Yes," answer 5b through 5e. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b | Explain your policy regarding charity cases, including how you distinguish between charity care and bad debts. Submit a copy of your written policy. | | |
| c | Provide data on your past experience in admitting charity patients, including amounts you expend for treating charity care patients and types of services you provide to charity care patients. | | |
| d | Describe any arrangements you have with federal, state, or local governments or government agencies for paying for the cost of treating charity care patients. Submit copies of any written agreements. | | |
| e | Do you provide services on a sliding fee schedule depending on financial ability to pay? If "Yes," submit your sliding fee schedule. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6a | Do you or will you carry on a formal program of medical training or medical research? If "Yes," describe such programs, including the type of programs offered, the scope of such programs, and affiliations with other hospitals or medical care providers with which you carry on the medical training or research programs. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b | Do you or will you carry on a formal program of community education? If "Yes," describe such programs, including the type of programs offered, the scope of such programs, and affiliation with other hospitals or medical care providers with which you offer community education programs. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7 | Do you or will you provide office space to physicians carrying on their own medical practices? If "Yes," describe the criteria for who may use the space, explain the means used to determine that you are paid at least fair market value, and submit representative lease agreements. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8 | Is your board of directors comprised of a majority of individuals who are representative of the community you serve? Include a list of each board member's name and business, financial, or professional relationship with the hospital. Also, identify each board member who is representative of the community and describe how that individual is a community representative. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9 | Do you participate in any joint ventures? If "Yes," state your ownership percentage in each joint venture, list your investment in each joint venture, describe the tax status of other participants in each joint venture (including whether they are section 501(c)(3) organizations), describe the activities of each joint venture, describe how you exercise control over the activities of each joint venture, and describe how each joint venture furthers your exempt purposes. Also, submit copies of all agreements. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Note. Make sure your answer is consistent with the information provided in Part VIII, line 8.

Schedule C. Hospitals and Medical Research Organizations (Continued)

Section I Hospitals (Continued)

- 10** Do you or will you manage your activities or facilities through your own employees or volunteers? If "No," attach a statement describing the activities that will be managed by others, the names of the persons or organizations that manage or will manage your activities or facilities, and how these managers were or will be selected. Also, submit copies of any contracts, proposed contracts, or other agreements regarding the provision of management services for your activities or facilities. Explain how the terms of any contracts or other agreements were or will be negotiated, and explain how you determine you will pay no more than fair market value for services. **Yes** **No**
- Note.** Answer "Yes" if you do manage or intend to manage your programs through your own employees or by using volunteers. Answer "No" if you engage or intend to engage a separate organization or independent contractor. Make sure your answer is consistent with the information provided in Part VIII, line 7b.
-
- 11** Do you or will you offer recruitment incentives to physicians? If "Yes," describe your recruitment incentives and attach copies of all written recruitment incentive policies. **Yes** **No**
-
- 12** Do you or will you lease equipment, assets, or office space from physicians who have a financial or professional relationship with you? If "Yes," explain how you establish a fair market value for the lease. **Yes** **No**
-
- 13** Have you purchased medical practices, ambulatory surgery centers, or other business assets from physicians or other persons with whom you have a business relationship, aside from the purchase? If "Yes," submit a copy of each purchase and sales contract and describe how you arrived at fair market value, including copies of appraisals. **Yes** **No**
-
- 14** Have you adopted a **conflict of interest policy** consistent with the sample health care organization conflict of interest policy in Appendix A of the instructions? If "Yes," submit a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," explain how you will avoid any conflicts of interest in your business dealings. **Yes** **No**

Section II Medical Research Organizations

- 1** Name the hospitals with which you have a relationship and describe the relationship. Attach copies of written agreements with each hospital that demonstrate continuing relationships between you and the hospital(s).
-
- 2** Attach a schedule describing your present and proposed activities for the direct conduct of medical research; describe the nature of the activities, and the amount of money that has been or will be spent in carrying them out.
-
- 3** Attach a schedule of assets showing their fair market value and the portion of your assets directly devoted to medical research.

Schedule D. Section 509(a)(3) Supporting Organizations

Section I Identifying Information About the Supported Organization(s)

1 State the names, addresses, and EINs of the supported organizations. If additional space is needed, attach a separate sheet.

Name	Address	EIN
Dallas Safari Club	13709 Gamma Road Dallas, Texas 75244	51 - 0157792
		-

2 Are all supported organizations listed in line 1 public charities under section 509(a)(1) or (2)? If "Yes," go to Section II. If "No," go to line 3. Yes No

3 Do the supported organizations have tax-exempt status under section 501(c)(4), 501(c)(5), or 501(c)(6)? Yes No

If "Yes," for each 501(c)(4), (5), or (6) organization supported, provide the following financial information:

- Part IX-A. Statement of Revenues and Expenses, lines 1-13 and
- Part X, lines 6b(ii)(a), 6b(ii)(b), and 7.

If "No," attach a statement describing how each organization you support is a public charity under section 509(a)(1) or (2).

Section II Relationship with Supported Organization(s)—Three Tests

To be classified as a supporting organization, an organization must meet one of three relationship tests:

- Test 1: "Operated, supervised, or controlled by" one or more publicly supported organizations, or
- Test 2: "Supervised or controlled in connection with" one or more publicly supported organizations, or
- Test 3: "Operated in connection with" one or more publicly supported organizations.

1 Information to establish the "operated, supervised, or controlled by" relationship (Test 1)
Is a majority of your governing board or officers elected or appointed by the supported organization(s)? If "Yes," describe the process by which your governing board is appointed and elected; go to Section III. If "No," continue to line 2. Yes No

2 Information to establish the "supervised or controlled in connection with" relationship (Test 2)
Does a majority of your governing board consist of individuals who also serve on the governing board of the supported organization(s)? If "Yes," describe the process by which your governing board is appointed and elected; go to Section III. If "No," go to line 3. Yes No

3 Information to establish the "operated in connection with" responsiveness test (Test 3)
Are you a trust from which the named supported organization(s) can enforce and compel an accounting under state law? If "Yes," explain whether you advised the supported organization(s) in writing of these rights and provide a copy of the written communication documenting this; go to Section II, line 5. If "No," go to line 4a. Yes No

- 4** Information to establish the alternative "operated in connection with" responsiveness test (Test 3)
- a** Do the officers, directors, trustees, or members of the supported organization(s) elect or appoint one or more of your officers, directors, or trustees? If "Yes," explain and provide documentation; go to line 4d, below. If "No," go to line 4b. Yes No
 - b** Do one or more members of the governing body of the supported organization(s) also serve as your officers, directors, or trustees or hold other important offices with respect to you? If "Yes," explain and provide documentation; go to line 4d, below. If "No," go to line 4c. Yes No
 - c** Do your officers, directors, or trustees maintain a close and continuous working relationship with the officers, directors, or trustees of the supported organization(s)? If "Yes," explain and provide documentation. Yes No
 - d** Do the supported organization(s) have a significant voice in your investment policies, in the making and timing of grants, and in otherwise directing the use of your income or assets? If "Yes," explain and provide documentation. Yes No
 - e** Describe and provide copies of written communications documenting how you made the supported organization(s) aware of your supporting activities.

Schedule D. Section 509(a)(3) Supporting Organizations (Continued)

Section II Relationship with Supported Organization(s)—Three Tests (Continued)

- 5** Information to establish the "operated in connection with" integral part test (Test 3)
Do you conduct activities that would otherwise be carried out by the supported organization(s)? If "Yes," explain and go to Section III. If "No," continue to line 6a. **Yes** **No**
- 6** Information to establish the alternative "operated in connection with" integral part test (Test 3)
a Do you distribute at least 85% of your annual **net income** to the supported organization(s)? If "Yes," go to line 6b. (See instructions.) **Yes** **No**
If "No," state the percentage of your income that you distribute to each supported organization. Also explain how you ensure that the supported organization(s) are attentive to your operations.
b How much do you contribute annually to each supported organization? Attach a schedule.
c What is the total annual revenue of each supported organization? If you need additional space, attach a list.
d Do you or the supported organization(s) **earmark** your funds for support of a particular program or activity? If "Yes," explain. **Yes** **No**
- 7a** Does your organizing document specify the supported organization(s) by name? If "Yes," state the article and paragraph number and go to Section III. If "No," answer line 7b. **Yes** **No**
b Attach a statement describing whether there has been an historic and continuing relationship between you and the supported organization(s).

Section III Organizational Test

- 1a** If you met relationship Test 1 or Test 2 in Section II, your organizing document must specify the supported organization(s) by name, or by naming a similar purpose or charitable class of beneficiaries. If your organizing document complies with this requirement, answer "Yes." If your organizing document does not comply with this requirement, answer "No," and see the instructions. **Yes** **No**
- b** If you met relationship Test 3 in Section II, your organizing document must generally specify the supported organization(s) by name. If your organizing document complies with this requirement, answer "Yes," and go to Section IV. If your organizing document does not comply with this requirement, answer "No," and see the instructions. **Yes** **No**

Section IV Disqualified Person Test

You do not qualify as a supporting organization if you are **controlled** directly or indirectly by one or more **disqualified persons** (as defined in section 4946) other than **foundation managers** or one or more organizations that you support. Foundation managers who are also disqualified persons for another reason are disqualified persons with respect to you.

- 1a** Do any persons who are disqualified persons with respect to you, (except individuals who are disqualified persons only because they are foundation managers), appoint any of your foundation managers? If "Yes," (1) describe the process by which disqualified persons appoint any of your foundation managers, (2) provide the names of these disqualified persons and the foundation managers they appoint, and (3) explain how control is vested over your operations (including assets and activities) by persons other than disqualified persons. **Yes** **No**
- b** Do any persons who have a family or business relationship with any disqualified persons with respect to you, (except individuals who are disqualified persons only because they are foundation managers), appoint any of your foundation managers? If "Yes," (1) describe the process by which individuals with a family or business relationship with disqualified persons appoint any of your foundation managers, (2) provide the names of these disqualified persons, the individuals with a family or business relationship with disqualified persons, and the foundation managers appointed, and (3) explain how control is vested over your operations (including assets and activities) in individuals other than disqualified persons. **Yes** **No**
- c** Do any persons who are disqualified persons, (except individuals who are disqualified persons only because they are foundation managers), have any influence regarding your operations, including your assets or activities? If "Yes," (1) provide the names of these disqualified persons, (2) explain how influence is exerted over your operations (including assets and activities), and (3) explain how control is vested over your operations (including assets and activities) by individuals other than disqualified persons. **Yes** **No**

Schedule E. Organizations Not Filing Form 1023 Within 27 Months of Formation

Schedule E is intended to determine whether you are eligible for tax exemption under section 501(c)(3) from the postmark date of your application or from your date of incorporation or formation, whichever is earlier. If you are not eligible for tax exemption under section 501(c)(3) from your date of incorporation or formation, Schedule E is also intended to determine whether you are eligible for tax exemption under section 501(c)(4) for the period between your date of incorporation or formation and the postmark date of your application.

1 Are you a church, association of churches, or integrated auxiliary of a church? If "Yes," complete Schedule A and stop here. Do not complete the remainder of Schedule E. **Yes** **No**

2a Are you a public charity with annual **gross receipts** that are normally \$5,000 or less? If "Yes," stop here. Answer "No" if you are a private foundation, regardless of your gross receipts. **Yes** **No**

b If your gross receipts were normally more than \$5,000, are you filing this application within 90 days from the end of the tax year in which your gross receipts were normally more than \$5,000? If "Yes," stop here. **Yes** **No**

3a Were you included as a subordinate in a group exemption application or letter? If "No," go to line 4. **Yes** **No**

b If you were included as a subordinate in a group exemption letter, are you filing this application within 27 months from the date you were notified by the organization holding the group exemption letter or the Internal Revenue Service that you cease to be covered by the group exemption letter? If "Yes," stop here. **Yes** **No**

c If you were included as a subordinate in a timely filed group exemption request that was denied, are you filing this application within 27 months from the postmark date of the Internal Revenue Service final adverse ruling letter? If "Yes," stop here. **Yes** **No**

4 Were you created on or before October 9, 1969? If "Yes," stop here. Do not complete the remainder of this schedule. **Yes** **No**

5 If you answered "No" to lines 1 through 4, we cannot recognize you as tax exempt from your date of formation unless you qualify for an extension of time to apply for exemption. Do you wish to request an extension of time to apply to be recognized as exempt from the date you were formed? If "Yes," attach a statement explaining why you did not file this application within the 27-month period. Do not answer lines 6, 7, or 8. If "No," go to line 6a. **Yes** **No**

6a If you answered "No" to line 5, you can only be exempt under section 501(c)(3) from the postmark date of this application. Therefore, do you want us to treat this application as a request for tax exemption from the postmark date? If "Yes," you are eligible for an advance ruling. Complete Part X, line 6a. If "No," you will be treated as a private foundation. **Yes** **No**

Note. Be sure your ruling eligibility agrees with your answer to Part X, line 6.

b Do you anticipate significant changes in your sources of support in the future? If "Yes," complete line 7 below. **Yes** **No**

Schedule E. Organizations Not Filing Form 1023 Within 27 Months of Formation (Continued)

7 Complete this item only if you answered "Yes" to line 6b. Include projected revenue for the first two full years following the current tax year.

Type of Revenue	Projected revenue for 2 years following current tax year		
	(a) From To	(b) From To	(c) Total
1 Gifts, grants, and contributions received (do not include unusual grants)			
2 Membership fees received			
3 Gross investment income			
4 Net unrelated business income			
5 Taxes levied for your benefit			
6 Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)			
7 Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)			
8 Total of lines 1 through 7			
9 Gross receipts from admissions, merchandise sold, or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)			
10 Total of lines 8 and 9			
11 Net gain or loss on sale of capital assets (attach an itemized list)			
12 Unusual grants			
13 Total revenue. Add lines 10 through 12			

8 According to your answers, you are only eligible for tax exemption under section 501(c)(3) from the postmark date of your application. However, you may be eligible for tax exemption under section 501(c)(4) from your date of formation to the postmark date of the Form 1023. Tax exemption under section 501(c)(4) allows exemption from federal income tax, but generally not deductibility of contributions under Code section 170. Check the box at right if you want us to treat this as a request for exemption under 501(c)(4) from your date of formation to the postmark date.



Attach a completed Page 1 of Form 1024, Application for Recognition of Exemption Under Section 501(a), to this application.

Schedule F. Homes for the Elderly or Handicapped and Low-Income Housing

Section I General Information About Your Housing

1 Describe the type of housing you provide.

2 Provide copies of any application forms you use for admission.

3 Explain how the public is made aware of your facility.

4a Provide a description of each facility.

b What is the total number of residents each facility can accommodate?

c What is your current number of residents in each facility?

d Describe each facility in terms of whether residents rent or purchase housing from you.

5 Attach a sample copy of your residency or homeownership contract or agreement.

6 Do you participate in any joint ventures? If "Yes," state your ownership percentage in each joint venture, list your investment in each joint venture, describe the tax status of other participants in each joint venture (including whether they are section 501(c)(3) organizations), describe the activities of each joint venture, describe how you exercise control over the activities of each joint venture, and describe how each joint venture furthers your exempt purposes. Also, submit copies of all joint venture agreements. Yes No

Note. Make sure your answer is consistent with the information provided in Part VIII, line 8.

7 Do you or will you contract with another organization to develop, build, market, or finance your housing? If "Yes," explain how that entity is selected, explain how the terms of any contract(s) are negotiated at arm's length, and explain how you determine you will pay no more than fair market value for services. Yes No

Note. Make sure your answer is consistent with the information provided in Part VIII, line 7a.

8 Do you or will you manage your activities or facilities through your own employees or volunteers? If "No," attach a statement describing the activities that will be managed by others, the names of the persons or organizations that manage or will manage your activities or facilities, and how these managers were or will be selected. Also, submit copies of any contracts, proposed contracts, or other agreements regarding the provision of management services for your activities or facilities. Explain how the terms of any contracts or other agreements were or will be negotiated, and explain how you determine you will pay no more than fair market value for services. Yes No

Note. Answer "Yes" if you do manage or intend to manage your programs through your own employees or by using volunteers. Answer "No" if you engage or intend to engage a separate organization or independent contractor. Make sure your answer is consistent with the information provided in Part VIII, line 7b.

9 Do you participate in any government housing programs? If "Yes," describe these programs. Yes No

10a Do you own the facility? If "No," describe any enforceable rights you possess to purchase the facility in the future; go to line 10c. If "Yes," answer line 10b. Yes No

b How did you acquire the facility? For example, did you develop it yourself, purchase a project, etc. Attach all contracts, transfer agreements, or other documents connected with the acquisition of the facility.

c Do you lease the facility or the land on which it is located? If "Yes," describe the parties to the lease(s) and provide copies of all leases. Yes No

Schedule F. Homes for the Elderly or Handicapped and Low-Income Housing (Continued)

Section II Homes for the Elderly or Handicapped

- 1a** Do you provide housing for the elderly? If "Yes," describe who qualifies for your housing in terms of age, infirmity, or other criteria and explain how you select persons for your housing. **Yes** **No**
- b** Do you provide housing for the handicapped? If "Yes," describe who qualifies for your housing in terms of disability, income levels, or other criteria and explain how you select persons for your housing. **Yes** **No**
- 2a** Do you charge an entrance or founder's fee? If "Yes," describe what this charge covers, whether it is a one-time fee, how the fee is determined, whether it is payable in a lump sum or on an installment basis, whether it is refundable, and the circumstances, if any, under which it may be waived. **Yes** **No**
- b** Do you charge periodic fees or maintenance charges? If "Yes," describe what these charges cover and how they are determined. **Yes** **No**
- c** Is your housing affordable to a significant segment of the elderly or handicapped persons in the community? Identify your **community**. Also, if "Yes," explain how you determine your housing is affordable. **Yes** **No**
- 3a** Do you have an established policy concerning residents who become unable to pay their regular charges? If "Yes," describe your established policy. **Yes** **No**
- b** Do you have any arrangements with government welfare agencies or others to absorb all or part of the cost of maintaining residents who become unable to pay their regular charges? If "Yes," describe these arrangements. **Yes** **No**
- 4** Do you have arrangements for the healthcare needs of your residents? If "Yes," describe these arrangements. **Yes** **No**
- 5** Are your facilities designed to meet the physical, emotional, recreational, social, religious, and/or other similar needs of the elderly or handicapped? If "Yes," describe these design features. **Yes** **No**

Section III Low-Income Housing

- 1** Do you provide low-income housing? If "Yes," describe who qualifies for your housing in terms of income levels or other criteria, and describe how you select persons for your housing. **Yes** **No**
- 2** In addition to rent or mortgage payments, do residents pay periodic fees or maintenance charges? If "Yes," describe what these charges cover and how they are determined. **Yes** **No**
- 3a** Is your housing affordable to low income residents? If "Yes," describe how your housing is made affordable to low-income residents. **Yes** **No**

Note. Revenue Procedure 96-32, 1996-1 C.B. 717, provides guidelines for providing low-income housing that will be treated as charitable. (At least 75% of the units are occupied by low-income tenants or 40% are occupied by tenants earning not more than 120% of the very low-income levels for the area.)
- b** Do you impose any restrictions to make sure that your housing remains affordable to low-income residents? If "Yes," describe these restrictions. **Yes** **No**
- 4** Do you provide social services to residents? If "Yes," describe these services. **Yes** **No**

Schedule G. Successors to Other Organizations

1a Are you a **successor** to a **for-profit organization**? If "Yes," explain the relationship with the **predecessor** organization that resulted in your creation and complete line 1b. **Yes** **No**

b Explain why you took over the activities or assets of a for-profit organization or converted from for-profit to nonprofit status.

2a Are you a successor to an organization other than a for-profit organization? Answer "Yes" if you have taken or will take over the activities of another organization; or you have taken or will take over 25% or more of the fair market value of the net assets of another organization. If "Yes," explain the relationship with the other organization that resulted in your creation. **Yes** **No**

b Provide the tax status of the predecessor organization.

c Did you or did an organization to which you are a successor previously apply for tax exemption under section 501(c)(3) or any other section of the Code? If "Yes," explain how the application was resolved. **Yes** **No**

d Was your prior tax exemption or the tax exemption of an organization to which you are a successor revoked or suspended? If "Yes," explain. Include a description of the corrections you made to re-establish tax exemption. **Yes** **No**

e Explain why you took over the activities or assets of another organization.

3 Provide the name, last address, and EIN of the predecessor organization and describe its activities.

Name: _____ **EIN:** _____

Address: _____

4 List the owners, partners, principal stockholders, officers, and governing board members of the predecessor organization. Attach a separate sheet if additional space is needed.

Name	Address	Share/Interest (If a for-profit)

5 Do or will any of the persons listed in line 4, maintain a working relationship with you? If "Yes," describe the relationship in detail and include copies of any agreements with any of these persons or with any for-profit organizations in which these persons own more than a 35% interest. **Yes** **No**

6a Were any assets transferred, whether by gift or sale, from the predecessor organization to you? If "Yes," provide a list of assets, indicate the value of each asset, explain how the value was determined, and attach an appraisal, if available. For each asset listed, also explain if the transfer was by gift, sale, or combination thereof. **Yes** **No**

b Were any restrictions placed on the use or sale of the assets? If "Yes," explain the restrictions. **Yes** **No**

c Provide a copy of the agreement(s) of sale or transfer.

7 Were any debts or liabilities transferred from the predecessor for-profit organization to you? If "Yes," provide a list of the debts or liabilities that were transferred to you, indicating the amount of each, how the amount was determined, and the name of the person to whom the debt or liability is owed. **Yes** **No**

8 Will you lease or rent any property or equipment previously owned or used by the predecessor for-profit organization, or from persons listed in line 4, or from for-profit organizations in which these persons own more than a 35% interest? If "Yes," submit a copy of the lease or rental agreement(s). Indicate how the lease or rental value of the property or equipment was determined. **Yes** **No**

9 Will you lease or rent property or equipment to persons listed in line 4, or to for-profit organizations in which these persons own more than a 35% interest? If "Yes," attach a list of the property or equipment, provide a copy of the lease or rental agreement(s), and indicate how the lease or rental value of the property or equipment was determined. **Yes** **No**

Schedule H. Organizations Providing Scholarships, Fellowships, Educational Loans, or Other Educational Grants to Individuals and Private Foundations Requesting Advance Approval of Individual Grant Procedures

Section I *Names of individual recipients are not required to be listed in Schedule H. Public charities and private foundations complete lines 1a through 7 of this section. See the instructions to Part X if you are not sure whether you are a public charity or a private foundation.*

- 1a Describe the types of educational grants you provide to individuals, such as scholarships, fellowships, loans, etc.
 - b Describe the purpose and amount of your scholarships, fellowships, and other educational grants and loans that you award.
 - c If you award educational loans, explain the terms of the loans (interest rate, length, forgiveness, etc.).
 - d Specify how your program is publicized.
 - e Provide copies of any solicitation or announcement materials.
 - f Provide a sample copy of the application used.
- 2 Do you maintain case histories showing recipients of your scholarships, fellowships, educational loans, or other educational grants, including names, addresses, purposes of awards, amount of each grant, manner of selection, and relationship (if any) to officers, trustees, or donors of funds to you? If "No," refer to the instructions. Yes No
- 3 Describe the specific criteria you use to determine who is eligible for your program. (For example, eligibility selection criteria could consist of graduating high school students from a particular high school who will attend college, writers of scholarly works about American history, etc.)
- 4a Describe the specific criteria you use to select recipients. (For example, specific selection criteria could consist of prior academic performance, financial need, etc.)
- b Describe how you determine the number of grants that will be made annually.
- c Describe how you determine the amount of each of your grants.
- d Describe any requirement or condition that you impose on recipients to obtain, maintain, or qualify for renewal of a grant. (For example, specific requirements or conditions could consist of attendance at a four-year college, maintaining a certain grade point average, teaching in public school after graduation from college, etc.)
- 5 Describe your procedures for supervising the scholarships, fellowships, educational loans, or other educational grants. Describe whether you obtain reports and grade transcripts from recipients, or you pay grants directly to a school under an arrangement whereby the school will apply the grant funds only for enrolled students who are in good standing. Also, describe your procedures for taking action if the terms of the award are violated.
- 6 Who is on the selection committee for the awards made under your program, including names of current committee members, criteria for committee membership, and the method of replacing committee members?
- 7 Are relatives of members of the selection committee, or of your officers, directors, or **substantial contributors** eligible for awards made under your program? If "Yes," what measures are taken to ensure unbiased selections? Yes No
- Note.** If you are a private foundation, you are not permitted to provide educational grants to **disqualified persons**. Disqualified persons include your substantial contributors and foundation managers and certain family members of disqualified persons.

Section II *Private foundations complete lines 1a through 4f of this section. Public charities do not complete this section.*

- 1a If we determine that you are a private foundation, do you want this application to be considered as a request for advance approval of grant making procedures? Yes No N/A
- b For which section(s) do you wish to be considered?
- 4945(g)(1)—Scholarship or fellowship grant to an individual for study at an educational institution
 - 4945(g)(3)—Other grants, including loans, to an individual for travel, study, or other similar purposes, to enhance a particular skill of the grantee or to produce a specific product
- 2 Do you represent that you will (1) arrange to receive and review grantee reports annually and upon completion of the purpose for which the grant was awarded, (2) investigate diversions of funds from their intended purposes, and (3) take all reasonable and appropriate steps to recover diverted funds, ensure other grant funds held by a grantee are used for their intended purposes, and withhold further payments to grantees until you obtain grantees' assurances that future diversions will not occur and that grantees will take extraordinary precautions to prevent future diversions from occurring? Yes No
- 3 Do you represent that you will maintain all records relating to individual grants, including information obtained to evaluate grantees, identify whether a grantee is a disqualified person, establish the amount and purpose of each grant, and establish that you undertook the supervision and investigation of grants described in line 2? Yes No

Schedule H. Organizations Providing Scholarships, Fellowships, Educational Loans, or Other Educational Grants to Individuals and Private Foundations Requesting Advance Approval of Individual Grant Procedures (Continued)

Section II Private foundations complete lines 1a through 4f of this section. Public charities do not complete this section. (Continued)

- 4a** Do you or will you award scholarships, fellowships, and educational loans to attend an educational institution based on the status of an individual being an *employee of a particular employer*? If "Yes," complete lines 4b through 4f. Yes No
- b** Will you comply with the seven conditions and either the percentage tests or facts and circumstances test for scholarships, fellowships, and educational loans to attend an educational institution as set forth in Revenue Procedures 76-47, 1976-2 C.B. 670, and 80-39, 1980-2 C.B. 772, which apply to inducement, selection committee, eligibility requirements, objective basis of selection, employment, course of study, and other objectives? (See lines 4c, 4d, and 4e, regarding the percentage tests.) Yes No
- c** Do you or will you provide scholarships, fellowships, or educational loans to attend an educational institution to employees of a particular employer? Yes No N/A

If "Yes," will you award grants to 10% or fewer of the eligible applicants who were actually considered by the selection committee in selecting recipients of grants in that year as provided by Revenue Procedures 76-47 and 80-39? Yes No
- d** Do you provide scholarships, fellowships, or educational loans to attend an educational institution to children of employees of a particular employer? Yes No N/A

If "Yes," will you award grants to 25% or fewer of the eligible applicants who were actually considered by the selection committee in selecting recipients of grants in that year as provided by Revenue Procedures 76-47 and 80-39? If "No," go to line 4e. Yes No
- e** If you provide scholarships, fellowships, or educational loans to attend an educational institution to children of employees of a particular employer, will you award grants to 10% or fewer of the number of employees' children who can be shown to be eligible for grants (whether or not they submitted an application) in that year, as provided by Revenue Procedures 76-47 and 80-39? Yes No N/A

If "Yes," describe how you will determine who can be shown to be eligible for grants without submitting an application, such as by obtaining written statements or other information about the expectations of employees' children to attend an educational institution. If "No," go to line 4f.

Note. Statistical or sampling techniques are not acceptable. See Revenue Procedure 85-51, 1985-2 C.B. 717, for additional information.
- f** If you provide scholarships, fellowships, or educational loans to attend an educational institution to *children of employees of a particular employer* without regard to either the 25% limitation described in line 4d, or the 10% limitation described in line 4e, will you award grants based on facts and circumstances that demonstrate that the grants will not be considered compensation for past, present, or future services or otherwise provide a significant benefit to the particular employer? If "Yes," describe the facts and circumstances that you believe will demonstrate that the grants are neither compensatory nor a significant benefit to the particular employer. In your explanation, describe why you cannot satisfy either the 25% test described in line 4d or the 10% test described in line 4e. Yes No

Form 1023 Checklist

(Revised December 2013)

Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code

Note. Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

Check each box to finish your application (Form 1023). Send this completed Checklist with your filled-in application. If you have not answered all the items below, your application may be returned to you as incomplete.

- Assemble the application and materials in this order:
 - Form 1023 Checklist
 - Form 2848, *Power of Attorney and Declaration of Representative* (if filing)
 - Form 8821, *Tax Information Authorization* (if filing)
 - Expedite request (if requesting)
 - Application (Form 1023 and Schedules A through H, as required)
 - Articles of organization
 - Amendments to articles of organization in chronological order
 - Bylaws or other rules of operation and amendments
 - Documentation of nondiscriminatory policy for schools, as required by Schedule B
 - Form 5768, *Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation* (if filing)
 - All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN.

- User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.

- Employer Identification Number (EIN)

- Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
 - You must provide specific details about your past, present, and planned activities.
 - Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
 - Describe your purposes and proposed activities in specific easily understood terms.
 - Financial information should correspond with proposed activities.

- Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.

Schedule A	Yes ___ No <input checked="" type="checkbox"/>	Schedule E	Yes ___ No <input checked="" type="checkbox"/>
Schedule B	Yes ___ No <input checked="" type="checkbox"/>	Schedule F	Yes ___ No <input checked="" type="checkbox"/>
Schedule C	Yes ___ No <input checked="" type="checkbox"/>	Schedule G	Yes ___ No <input checked="" type="checkbox"/>
Schedule D	Yes <input checked="" type="checkbox"/> No ___	Schedule H	Yes ___ No <input checked="" type="checkbox"/>

- An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
 - Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) Pg. 3, Art. 5, Para. a
 - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law P. 4, Art. 6, Para. c
- Signature of an officer, director, trustee, or other official who is authorized to sign the application.
 - Signature at Part XI of Form 1023.
- Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service
P.O. Box 192
Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service
201 West Rivercenter Blvd.
Attn: Extracting Stop 312
Covington, KY 41011

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 1

Part I, Line 7

Jeffrey S. Tenenbaum
Venable LLP
575 7th Street, NW
Washington, DC 20004

Lindsey M. Avedisian
Venable LLP
575 7th Street, NW
Washington, DC 20004

Jeffrey S. Tenenbaum and Lindsey M. Avedisian, attorneys of the law firm Venable LLP, are Authorized Representatives of DSC Foundation, Inc. (“DSC Foundation” or “the Foundation”), as reflected on the enclosed Form 2848 Power of Attorney. The Foundation engaged Venable LLP to assist in formation matters and may continue to consult with Venable LLP on legal matters in the future.

The Foundation may consult periodically with an independent accounting firm and/or law firm on financial and tax matters.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 2

Part II, Line 1

DSC Foundation is a Texas nonprofit corporation. A certified copy of the Restated Certificate of Formation is attached as **Exhibit B**. The Restated Certificate of Formation fully replaces the original Certificate of Formation under Texas law. For reference, the original Certificate of Formation and Amendments are attached as **Exhibit A**.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 3

Part II, Line 5

DSC Foundation has adopted bylaws. A copy of the current DSC Foundation Bylaws showing the date of adoption is attached as **Exhibit C**.

ATTACHMENT 4

Part IV

DSC Foundation is a Texas nonprofit corporation organized and operated exclusively to support the Dallas Safari Club through charitable and educational activities. The Dallas Safari Club is a Texas nonprofit corporation that is exempt under Internal Revenue Code Section 501(c)(4) with a mission to conserve wildlife and wilderness lands, to educate youth and the general public regarding sustainability issues, and to promote and protect the rights and interests of hunters worldwide.

The Dallas Safari Club is the world's oldest and largest global environmental organization, and is considered a leading international authority on both environmental preservation and sustainable development. It is a neutral forum for governments, non-government organizations, scientists, businesses, and local communities to find practical solutions to conservation and development challenges. The Dallas Safari Club has become a respected member and voice in the conservation community, has a strong relationship with U.S. Fish and Wildlife Service, and is a member of the world's largest conservation body, the International Union for Conservation of Nature.

The Dallas Safari Club has long philanthropically supported projects that serve the goals of conservation, education, and advocacy for the rights of sportsmen and sportswomen. In doing so, the Dallas Safari Club identified a need within the conservation movement for a charitable and educational organization that will engage different groups that support wildlife conservation and protection of wild habitat; advocate for sustainable use wildlife and wilderness policies; and educate people on the benefits of sustainable use policies, well-regulated hunting, and wise and effective resource management policies and procedures.

In support of the Dallas Safari Club, DSC Foundation hopes to become a leading voice in wildlife conservation research and to educate the public about preserving and interacting with the natural environment. The Foundation will develop innovative methods to promote the successful North American Model of Conservation. The Foundation hopes to capitalize on the hard-earned stature and prominence of Dallas Safari Club to advance its charitable and educational mission.

Beginning in May 2016, DSC Foundation will commence the activities described below in furtherance of its educational and charitable mission:

- 1) Supporting research regarding sustainable use wildlife conservation and the role of well-regulated hunting;
- 2) Creating and maintaining a library made available to the public free of charge and containing primary and secondary research publications relating to wildlife conservation;
- 3) Developing educational programs that promote the concept and benefits of sustainable use wildlife conservation and well-regulated hunting globally; and
- 4) Providing grants and otherwise partnering with other charitable, educational, and governmental organizations pursuing the same or similar goals as the DSC Foundation

and the charitable and educational goals of its supported organization, the Dallas Safari Club.

Educational Programs

DSC Foundation plans to educate the public on the value of sustainable use conservation by organizing symposia and seminars to educate lay people, wildlife professionals, and academics about wildlife conservation issues. DSC Foundation hopes to hold these symposia every other year and hold the seminars annually. DSC Foundation also intends to produce and distribute video presentations highlighting dangers to wildlife and wilderness and ways to protect and preserve both for future generations. The Foundation estimates spending approximately 15% of its time on educational programs.

Research Grants and Funding for Conservation Efforts

DSC Foundation plans to provide research funding to a variety of organizations in furtherance of its charitable and educational mission. DSC Foundation will provide research grants to organizations that conduct and publish studies on declining wildlife populations. Examples of research that DSC Foundation may fund include studies on topics such as declining wildlife populations in southern Africa, duck breeding grounds in Canada and their preservation, and other research initiatives focused on topics like consumption and replacement costs of North American wildlife.

The Foundation may also award research grants to doctoral students for doctoral thesis research on selected wildlife management issues. If the Foundation begins to award such grants, it will develop specific criteria for qualification and a process for evaluating candidates similar to that of the process for evaluating grant applicants as described in ATTACHMENT 16.

DSC Foundation will also provide grants for the preservation and protection of wildlife habitats around the world. Such support may be granted to programs like the Texas Bighorn Society, the Texas Parks and Wildlife Department, the Wildlife Society, CAMPFIRE, SULi, anti-poaching efforts, habitat restoration, the Caddo Lake Ramsar site project, and the Wild Harvest Initiative. Further, DSC Foundation may provide grants to organizations that work abroad and focus on advocating pro-conservation and anti-poaching initiatives and that teach sustainable use wildlife management policies. The Foundation estimates spending approximately 30% of its time on conservation research and conservation support funding activities.

Conservation Research Publication

DSC Foundation plans to share such research at symposia that DSC Foundation will hold or attend. Research topics may include the effectiveness of sustainable use policies, the value of the consumption of wild game, proper and effective predator/prey management policies and practices, and innovative ways to avoid or mitigate human/wildlife interaction that result in unregulated death of wildlife and destruction of wild places.

DSC Foundation may also share such research through online outlets and published manuscripts and articles. DSC Foundation further intends to share such research with wildlife regulatory agencies around the world as well as NGOs involved in wildlife and wilderness research and

conservation efforts. The Foundation estimates spending approximately 10% of its time on research publication activities.

Support to Educational Institutions in Furtherance of Conservation Efforts

DSC Foundation plans to award grants to educational institutions that will provide scholarships to individuals in the form of financial assistance or tuition discounts for the study of conservation. These institutions, which will be reviewed and vetted per the Foundation's grant-making process described in ATTACHMENT 16, will select the scholarship recipients at their discretion. Recipients may be individuals interested in careers as wildlife professionals, including game scouts, wildlife biologists, forestry service professionals, and guides.

Examples of institutions to which the Foundation may make conservation education grants after careful review include the Southern African Wildlife College and The Wildlife Society ("Society"). Southern African Wildlife College provides education for prospective wildlife professionals in South Africa. The student population is primarily composed of individuals from indigenous under-represented South African communities. The Wildlife Society is an organization that helps to expose prospective wildlife professionals in the United States to actual issues on the ground in wildlife management careers and to help instill a better understanding of sustainable use wildlife management practices. Foundation funding may be granted to an organization like the Society to provide tuition discounts for classes, leadership conferences, and meetings conducted by the Society in furtherance of the charitable and educational purposes of the Foundation.

DSC Foundation may also support programs that educate people on the value of wildlife, of ways to mitigate harmful human wildlife interaction, and that provide and/or promote outdoor education curricula. For example, the DSC Foundation may support the Dallas Ecological Foundation, a nonprofit tax-exempt organization that promotes a public school outdoor education curriculum in middle and high schools across the country. The Foundation estimates spending approximately 20% of its time in providing support for educational institutions.

Conservation Advocacy

The DSC Foundation may, through grants to other organizations and through its own activities, advocate for or against policies that impact wildlife conservation. The Foundation's grant-making procedures are described in more detail in ATTACHMENT 16. As part of such advocacy, DSC Foundation may engage in public education campaigns and may submit comments on rulemakings or other actions by administrative agencies. The Foundation also intends to support symposia at which the leading conservation organizations and conservationists are in attendance and develop plans for a new international conference. The Foundation may create a wildlife institute policy center to host these types of symposia. The Foundation estimates spending approximately 25% of its time on conservation advocacy activities.

ATTACHMENT 5

Part V, Lines 1(a) to 1(c)

Pursuant to Article IV, Section 4.9 of DSC Foundation's Bylaws (attached as **Exhibit C**), directors and officers will not receive any salary for services performed as such. They may, however, receive reimbursement for expenses reasonably incurred on behalf of DSC Foundation.

Name	Title	Mailing Address	Compensation Amount
Jim Tolson	President, Director	5608 Shady Elm Circle Plano, Texas 75093	None
Karl Evans	Vice President, Director	2926 Old Boyce Road Waxahachie, Texas 75165	None
Richard Cheatham	Vice President, Director	4305 W. Lovers Lane 2nd Floor Dallas, Texas 75209	None
John Patterson	Secretary, Director	7627 Kevin Drive Dallas, Texas 75248	None
Allen Moore	Treasurer, Director	2 Windsor Ridge Frisco, Texas 75034	None
John Eads	Director	P.O. Box 544 DeSoto, Texas 75123	None
Craig Nyhus	Director	P.O. Box 551695 Dallas, Texas 75355	None

DSC Foundation was recently formed and currently has no employees. It plans to hire an executive director and additional staff later in 2016. The Foundation will compensate all employees and independent contractors at fair market value, as approved by the Board of Directors and in accordance with the Foundation policies on compensation (see **Exhibit D**) and conflict of interest (see **Exhibit E**).

ATTACHMENT 6

Part V, Line 2(a)

The Foundation's officers and directors have business relationships with each other. Richard T. Cheatham provides or has contracted to provide legal services to Jim Tolson, Karl Evans, John Patterson, and Allen Moore. There are no other business relationships among the Foundation's Officers and Directors.

ATTACHMENT 7

Part V, Line 3(a)

Name: **Jim Tolson**
Title: President and Director
Avg. Hrs. Worked: Mr. Tolson will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board and his duties as President. DSC Foundation estimates that Mr. Tolson will work 5 hours on average per week on Foundation matters.

Qualifications: Mr. Tolson serves as the President and Director of DSC Foundation on a volunteer basis. He is the owner of a wildlife ranch and actively contributes to wildlife management programs and youth hunting opportunities. Currently, he is also the Director and Vice President of the DSC Frontline Foundation as well as a member of the Dallas Safari Club's Board of Directors. In the past, he has served as President of the Dallas Safari Club, Chairman of the Dallas Safari Club's Grants Committee, and Trustee and Chairman of the Dallas Ecological Foundation. Mr. Tolson is also the former Owner and President of the National Engineered Reinforced Concrete Construction Company.

Duties: Mr. Tolson's duties as DSC Foundation's President are described in the Bylaws, Article VI, Section 6.4 (see **Exhibit C**). His duties include daily management; supervision and control of DSC Foundation's property, business, and affairs; and carrying out the directives of the Board. His duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Name: **Karl Evans**
Title: Vice President and Director
Avg. Hrs. Worked: Mr. Evans will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board and his duties as Vice President. DSC Foundation estimates that Mr. Evans will work 5 hours on average per week on Foundation matters.

Qualifications: Mr. Evans serves as Vice President and Director of DSC Foundation on a volunteer basis. He is an active rancher and the current President of the Dallas Safari Club. In the past, he has served as Chairman of the Dallas Safari Club's Grants Committee and Director and Vice President of the DSC Frontline Foundation. Mr. Evans is a retired City of Dallas employee.

Duties: Mr. Evans' duties as DSC Foundation Vice President are described in the Bylaws, Article VI, Section 6.5 (see **Exhibit C**). His duties include assisting the President in executive and administrative duties; exercising the powers and duties of the President in his absence or inability to act; and carrying

out the directives of the Board. His duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Name: **Richard Cheatham**
Title: Vice President and Director
Avg. Hrs. Worked: Mr. Cheatham will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board and his duties as Vice President. DSC Foundation estimates that Mr. Cheatham will work 10 hours on average per week on Foundation matters.

Qualifications: Mr. Cheatham serves as Vice President and Director of DSC Foundation on a volunteer basis. He is a practicing attorney with 35 years of experience. He is the Co-Founder, Director, and President of the DSC Frontline Foundation. Currently, Mr. Cheatham also serves as Director and General Counsel of The Friends of Trinity Strand Trail (an urban group developing a 9-mile inner-city trail system) and Master Naturalist. In the past, he has served as President and General Counsel of the Dallas Safari Club, Chairman of the Dallas Safari Club's Grants Committee, and Trustee of the Dallas Ecological Foundation.

Duties: Mr. Cheatham's duties as DSC Foundation Vice President are described in the Bylaws, Article VI, Section 6.5 (see **Exhibit C**). His duties include assisting the President in executive and administrative duties; exercising the powers and duties of the President in his absence or inability to act; and carrying out the directives of the Board. His duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Name: **John Patterson**
Title: Secretary and Director
Avg. Hrs. Worked: Mr. Patterson will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board and his duties as Secretary. DSC Foundation estimates that Mr. Patterson will work 5 hours on average per week on Foundation matters.

Qualifications: Mr. Patterson serves as Secretary and Director of DSC Foundation on a volunteer basis. He is the retired Vice President of a national bank association. He is the Co-Founder, Director, and Vice President of the DSC Frontline Foundation. Currently, Mr. Patterson also serves as a member of the Board of Directors of the Dallas Safari Club and as Trustee of the Dallas Ecological Foundation. In the past, he has served as President of the Dallas Safari Club and Chairman of the Dallas Safari Club's Grants Committee.

Duties: Mr. Patterson's duties as DSC Foundation Secretary are described in the Bylaws, Article VI, Section 6.6 (see **Exhibit C**). His duties include administrative and custodial duties, such as maintaining the Bylaws, maintaining the minutes of meetings, and providing proper notice of the meetings. His duties as Secretary also include carrying out the directives of the Board. His duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Name: **Allen Moore**
Title: Treasurer and Director
Avg. Hrs. Worked: Mr. Moore will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board and his duties as Treasurer. DSC Foundation estimates that Mr. Moore will work 5 hours on average per week on Foundation matters.

Qualifications: Mr. Moore serves as Treasurer and Director of DSC Foundation on a volunteer basis. He is a CPA and investment adviser. Mr. Moore is the former owner of a hunting ranch that is actively involved in wildlife management programs and youth hunting opportunities. He is also the Co-Founder, Director, and Vice President of the DSC Frontline Foundation. Currently, he serves as a member of the Board of Directors of the Dallas Safari Club. In the past, he has served as President of the Dallas Safari Club, Chairman of the Dallas Safari Club's Grants Committee, and Trustee and Chairman of the Dallas Ecological Foundation.

Duties: Mr. Moore's duties as a DSC Foundation Treasurer are described in the Bylaws, Article VI, Section 6.7 (see **Exhibit C**). His duties include financial and accounting duties, such as maintaining the books and records and managing corporate funds. His duties as Treasurer also include carrying out the directives of the Board. His duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Name: **John Eads**
Title: Director
Avg. Hrs. Worked: Mr. Eads will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board. DSC Foundation estimates that Mr. Eads will work 3 hours on average per week on Foundation matters.

Qualifications: Mr. Eads serves as Director of DSC Foundation on a volunteer basis. He is also currently the Treasurer of the Dallas Safari Club. Mr. Eads is a CPA in private practice, an author and presenter on various public accounting topics, an active member of Dallas Safari Club's Grants Committee, a key component of the Dallas Safari Club's fundraising efforts, and the recipient

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

Duties: of the Dallas Safari Club's Award of Excellence and numerous professional and community involvement awards.
Mr. Eads' duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Name: **Craig Nyhus**

Title: Director

Avg. Hrs. Worked: Mr. Nyhus will attend meetings of DSC Foundation's Board of Directors and work necessary and reasonable hours to carry out the directives and decisions of the Board. DSC Foundation estimates that Mr. Nyhus will work 3 hours on average per week on Foundation matters.

Qualifications: Mr. Nyhus serves as Director of DSC Foundation on a volunteer basis. He is the former Vice-President and current President-Elect of the Dallas Safari Club, Convention Co-Chairman of 2016 Dallas Safari Club annual Convention and Sporting Expo, and the editor of Lone Star Outdoors News. Mr. Nyhus is an attorney formerly in private practice, an author and outdoor writer, and director of the Lone Star Outdoor News Foundation.

Duties: Mr. Nyhus' duties and powers as a Director are described in the Bylaws, Article IV, Sections 4.5 and 4.8 (see **Exhibit C**). These include attending meetings of the Board and voting on Board decisions.

Each of these individuals has given thousands of hours to the Dallas Safari Club and its mission of conservation, education, and protection of hunters' rights. Each has also served and led the Dallas Safari Club. Each has developed a particular and in-depth understanding of the complex issues of wildlife management and conservation; the North American Model of Conservation (that has, at its core, the concept of sustainable use practices); the scope, breadth and need for appropriate and effective advocacy of issues related to sustainable use wildlife management practices; the compelling need for education of the general public and youth; and the need to raise funds to support these causes. Each has overseen large-scale fundraising endeavors and has developed contacts in the hunting and conservation community that can be resourced to support conservation, education, and hunter advocacy.

ATTACHMENT 8

Part V, Line 4(g)

DSC Foundation does not intend to record individual Director votes except when a dissenting Director specifically requests his/her dissent be reflected in the minutes. This approach is common practice among nonprofit corporation boards and should not have any bearing upon the reasonableness of DSC Foundation's compensation determinations. DSC Foundation will record the overall results of all votes on compensation arrangements and all actions taken by the Board, and will retain all written comparability data relied on for the purpose of taking such action. DSC Foundation's compensation policy is attached as **Exhibit D**.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 9

Part V, Line 5(a)

DSC Foundation has adopted a conflict of interest policy by resolution of the Board, a copy of which is attached as **Exhibit E**.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 10

Part V, Lines 9(a) to 9(f)

The Foundation will receive donated office space from the Dallas Safari Club. The Foundation and the Dallas Safari Club share overlapping Board members. In the event that the Foundation makes payment in the future to the Dallas Safari Club for such office space, the Foundation shall do so at a fair market value and per the terms of a written agreement between the Foundation and the Dallas Safari Club.

ATTACHMENT 11

Part VI, Lines 1(a) to 1(b) and Line 2

In fulfillment of its charitable and educational mission to promote wildlife conservation and to increase education and research surrounding wildlife consumption and sustainability, DSC Foundation may, in the future, provide goods, services, and funds to other organizations and to individuals that promote the Foundation's mission, as described in ATTACHMENT 4. For example, the Foundation may provide grants to individuals or organizations that study declining wildlife populations.

In the event that the Foundation provides such goods, services, or funds to individuals or organizations, it will only do so pursuant to established procedures which require written applications and detailed reporting to ensure such provided goods, services, or funds are utilized solely for appropriate purposes, as described in ATTACHMENT 16.

DSC Foundation will not limit the provision of goods, services, or funds to a specific individual or group of specific individuals.

ATTACHMENT 12

Part VIII, Line 4(a) and Line 4(d)

DSC Foundation will engage in fundraising efforts designed to raise awareness of DSC Foundation and its mission and to generate financial support for the Foundation. Raising funds is integral to DSC Foundation's ability to carry on its educational and charitable activities and, thus, is in furtherance of its tax-exempt purposes. DSC Foundation anticipates that it may seek grants from governments, private sources (including individuals and entities), other tax-exempt organizations (in particular Dallas Safari Club), public charities, and private foundations to support its activities.

Such fundraising activities may be conducted throughout the United States in various states and local jurisdictions in any number of ways, including by mail, in person, by phone, or through the Internet. Prior to commencing any fundraising activities, the Foundation will comply with applicable state and local registration requirements for such activity.

ATTACHMENT 13

Part VIII, Line 10

The Foundation will trademark and own the rights in its name and any associated logos or acronyms that it may develop in the future. The Foundation will retain the intellectual property rights associated with its website and any publications or other informational and educational items that it may develop in furtherance of its exempt purposes. Any such materials will be made available to the general public either for free or at reasonable cost.

ATTACHMENT 14

Part VIII, Line 11

DSC Foundation does not plan to solicit contributions of any of the items listed in this question. However, DSC Foundation may accept such contributions if so offered. In the event that DSC Foundation does accept one or more contributions of items listed in this question, it plans to do so in a manner that is consistent with all applicable federal, state, municipal, and other laws and regulations.

ATTACHMENT 15

Part VIII, Line 12

DSC Foundation may provide grants to NGOs in Canada, British Columbia, South Africa, Namibia, Tanzania, Zimbabwe, and Mozambique. Where not prohibited by domestic and international restrictions or sanctions, DSC Foundation may work with and support conservation efforts of governments and governmental agencies in these countries.

The Foundation will conduct appropriate due diligence on each organization with which it works and provide grants in accordance with its grant-making procedures described in ATTACHMENT 16. These procedures include requiring each potential recipient to submit a signed application form and requiring each recipient to sign a written grant agreement to ensure that Foundation funds are spent in furtherance of the Foundation's tax-exempt purposes. As part of its foreign operations, DSC Foundation will implement appropriate anti-money laundering (AML) and similar controls to ensure that its foreign operations comply with all U.S. laws and regulations as further described in ATTACHMENTS 16 and 17.

Part VIII, Line 13

DSC Foundation has not yet made any grants but intends to engage in grant-making in the future as described in ATTACHMENT 4. Such grants in furtherance of the Foundation's educational and charitable mission will support conservation programs and initiatives to advance the Foundation's goals of advancing wildlife conservation research and educating the public about preserving and interacting with the natural environment.

The Foundation intends to provide grants to non-profits, NGOs, individuals, and other hunting organizations. The following are examples of causes for which the Foundation may award grants:

- Anti-poaching initiatives;
- Youth education initiatives;
- Scientific research for the conservation of wildlife;
- Preservation and protection of wild habitat;
- Initiatives to reduce or mitigate human/wildlife interaction;
- Initiatives advocating for sustainable use wildlife management policies; and
- International symposia studying wildlife and wild habitat issues.

Likely, some of the Foundation's grant recipients will be organizations to which the Dallas Safari Club has also previously provided grants. Additionally, some of the Foundation's grant recipients may be new organizations with which neither the Foundation nor the Dallas Safari Club has a prior relationship.

In order to select grant recipients, the Foundation will appoint a blue ribbon advisory panel consisting of conservationists, educators, biologists, etc. This panel will recommend grants to the Foundation's Board. The Board will review all grant requests and will consider the recommendations of the blue ribbon panel before approving grants. The grant request will be conditioned on a commitment to provide scheduled reports with financial information to the Foundation and on the execution of a grant agreement. No subsequent grant will be issued to any organization that fails to provide the required feedback.

When the Foundation commences grant-making activities, the Foundation will require grant recipients to sign a binding grant agreement with the Foundation, which will specify the responsibilities of the parties, obligates the grantee to use funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges DSC Foundation's authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused.

DSC Foundation will ensure that the granted funds are used for the specific intended purpose through mandatory reporting requirements and e-mail follow up as described in its grant application, a copy of which is attached as **Exhibit F**.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

The Foundation will maintain documentation from all approved grant requests and a copy of the application from all requesters who were rejected. The Foundation will also maintain documentation to show all grants approved by fiscal year and the funding date of each grant.

Part VIII, Line 14

DSC Foundation plans to make grants to foreign entities. The Dallas Safari Club has supported many such entities and the Foundation will likely continue that support and be open to supporting other foreign entities in furtherance of its educational and charitable mission.

Examples of potential international grant recipients include:

- Southern African Wildlife College (South Africa);
- Conservation Visions (Canada);
- Professional Hunters Association of South Africa (PHASA);
- Namibia Professional Hunters Association (NAPHA);
- Guides and Outfitters of British Columbia (GOABC);
- Various safari tour operators to support anti-poaching efforts;
- Oxford University for lion research in Zimbabwe and Zambia;
- Frankfurt Zoological Society for anti-poaching measures in Zambia and a project coordinated by Amy Dickman in Tanzania to help villagers build bomas (corrals) that would better protect livestock from lion and leopard predation;
- New projects that will most likely be supported include the Zululand Rhino Reserve in South Africa (a rehabilitation facility for black rhinos);
- A game scout incentive program administered by the South Africa National Parks System to reward game scouts or patrols that go above and beyond the call of duty in respect to anti-poaching activities; and
- Professional hunter associations to help them in maintaining the self-policing of guides and outfitters to ensure ethical practices, the administration and enforcement of proper sustainable use wildlife management practices, and to allow the associations to continue with to work with their wildlife conservation bodies and agencies in their respective countries.

Foreign organizations submitting requests for grants from the Foundation will be vetted through the grant submission and review process as described in ATTACHMENT 16. The Foundation will employ the same oversight procedures for grants to foreign organizations as described in ATTACHMENT 16 and the additional mechanisms described below.

In all cases, DSC Foundation will perform appropriate due diligence on all recipients prior to providing any grants to such recipient. In addition, once grants are paid, DSC Foundation will monitor use of the funds to ensure that they are used for exempt purposes under Internal Revenue Code Section 501(c)(3) through mandatory reporting requirements and e-mail follow up as described in its grant application, a copy of which is attached as **Exhibit F**. In this regard, the Foundation will also adopt comprehensive policies and procedures based on the U.S. Department

of the Treasury's Anti-Terrorist Financing Guidelines: Voluntary Best Practices for U.S.-Based Charities.

To this end, the Foundation will implement the following due diligence procedures in advance of grant-making:

DSC Foundation will collect the following basic information about grantees:

1. The grantee's name in English, in the language of origin, and any acronym or other names used to identify the grantee;
2. The jurisdictions in which a grantee maintains a physical presence;
3. Any reasonably available historical information about the grantee that assures the charity of the grantee's identity and integrity, including:
 - a. The jurisdiction in which a grantee organization is incorporated or formed;
 - b. Copies of incorporating or other governing instruments;
 - c. Information on the individuals who formed and operate the organization; and
 - d. Information relating to the grantee's operating history;
4. The available postal, email and URL addresses and phone number of each place of business of a grantee;
5. A statement of the principal purpose of the grantee, including a detailed report of the grantee's projects and goals;
6. The names and available postal, email, and URL addresses of individuals, entities, or organizations to which the grantee currently provides or proposes to provide funding, services, or material support, to the extent reasonably discoverable;
7. The names and available postal, email and URL addresses of any subcontracting organizations utilized by the grantee;
8. Copies of any public filings or releases made by the grantee, including the most recent official registry documents, annual reports, and annual filings with the pertinent government, as applicable; and
9. The grantee's sources of income, such as official grants, private endowments, and commercial activities.

DSC Foundation will vet funding candidates in the following ways:

1. Conduct a reasonable search of publicly available information to determine whether the grantee is suspected of activity relating to terrorism, including terrorist financing or other support.
2. Confirm that grantees do not appear on OFAC's master list of Specially Designated Nationals (the "SDN List"), maintained on OFAC's website at <https://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx> and are not otherwise subject to OFAC sanctions.

3. Obtain the full name in English, in the language of origin, and any acronym or other names used; nationality; citizenship; current country of residence; and place and date of birth for key employees, members of the governing board, or other senior management at a grantee's principal place of business, and for key employees at the grantee's other business locations.
4. Review any relevant foreign country lists setting forth designated terrorist-related individuals, entities, or organizations pursuant to national obligations arising from United Nations Security Council Resolution 1373 (2001).
5. As a pre-condition to the issuance of a charitable grant, require grantees to certify that they are in compliance with all laws, statutes, and regulations restricting U.S. persons from dealing with any individuals, entities, or groups subject to OFAC sanctions, or, in the case of foreign grantees, that they do not deal with any individuals, entities, or groups subject to OFAC sanctions or any other persons known to the foreign grantee to support terrorism or to have violated OFAC sanctions.

Finally, DSC Foundation will include the following types of provisions in its grant agreements, among others, to ensure that grants are used for their intended purpose:

1. Clear scope of use explanations;
2. Prohibited use clauses;
3. Compliance with U.S. economic sanctions and related laws and regulations;
4. Ongoing monitoring and reporting;
5. Representations; and
6. Indemnification.

The Foundation will require periodic reports from grantees on their operational activities and their use of the disbursed funds. The Foundation will also reserve the right to perform routine, on-site audits of grantees to the extent reasonable – consistent with the size of the disbursement, the cost of the audit, and the risks of diversion or abuse of charitable resources – to ensure that the grantee has taken adequate measures to protect its charitable resources from diversion to, or abuse or influence by, terrorists or their support networks.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 18

Part VIII, Line 15

DSC Foundation is a supporting organization of the Dallas Safari Club, an organization recognized as exempt from federal income taxes under Internal Revenue Code 501(c)(4). In accordance with DSC Foundation's Bylaws, Article IV, Section 4.4 (see **Exhibit C**), Dallas Safari Club appoints all of DSC Foundation's Directors, and, as such, DSC Foundation has a "close connection" with Dallas Safari Club.

Part IX

Line 15 – Contributions, Gifts, and Grants

Type of Expected Grant Recipient	Current Tax Year 01/2016-12/2016	06/2015-12/2015	01/2017-12/2017
Conservation projects – anti-poaching, scientific research grants such as the Wild Harvest project to study the amount and value of wild game harvested and consumed in North America, habitat protection projects such as the cleanup of RAMSAR sites and other protected sites, predator/prey research projects	\$ 350,000	\$ 0	\$ 450,000
Education initiatives – fund and assist seminar and symposia presenters and organizers, support for the Dallas Ecological Foundation Outdoor Adventures public school curriculum project, production and distribution of video reading the North American model of Conservation	\$ 250,000	\$ 0	\$ 300,000
Conservation advocacy projects in connection with the International Union for Conservation of Nature and other organizations to develop and conduct workshops with others on sustainable use policies, work with US Fish and Wildlife representatives to develop sound wildlife management policy, support for various professional hunter associations worldwide to develop ethical practice and management strategy,	\$ 350,000	\$ 0	\$ 450,000
TOTAL PROGRAM	\$ 950,000	\$ 0	\$ 1,200,000

Line 23 – Other Expenses

PROGRAM	Current Tax Year 01/2016-12/2016	06/2015-12/2015	01/2017-12/2017
Telephone /internet	\$ 1,440	\$ 533.00	\$ 1,440
printing	\$ 1,750	\$ 0	\$ 2,000
Internet domain acquisition, website design, maintenance and hosting	\$ 5,000	\$ 500.00	\$ 5,000
Social media platform content and maintenance	\$ 5,000	\$ 0	\$ 5,000

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

Postage	\$ 100	\$ 0	\$ 150
Travel to symposia, seminars and project development meetings	\$ 5,000	\$ 0	\$ 7,500
Board meeting expenses	\$ 500	\$ 0	\$ 500
Bank charges/wire transfer fees	\$ 500	\$ 0	\$ 750
TOTAL PROGRAM	\$ 19,290	\$ 1,033	\$ 22,340

Schedule D, Section I, Line 3

Dallas Safari Club Revenues (Part IX-A, Lines 1-13):

Type of revenue	Apr. 2014 - Mar. 2015	Apr. 2013 - Mar. 2014	Apr. 2012 - Mar. 2013	Apr. 2011 - Mar. 2012
REVENUES				
1. Gifts, grants, and contributions received (not including unusual grants)	2,004,859.46	1,881,514.32	1,662,500.33	1,570,678.00
2. Membership fees received	541,712.46	456,552.79	517,718.77	457,665.62
3. Gross investment income	18,918.21	19,225.07	31,459.59	37,767.86
4. Net unrelated business income	504,443.31	453,929.89	394,581.29	375,886.28
5. Taxes levied for the organization's benefit	-	-	-	-
6. Value of services or facilities furnished by governmental unit without charge (not including the value of services generally furnished to the public without charge)	-	-	-	-
7. Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list*)	251,124.92	272,461.84	211,516.40	207,543.04
8. Total of Lines 1 through 7	3,321,058.36	3,083,683.91	2,817,776.38	2,649,540.80
9. Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to exempt purposes (attach itemized list**)	4,924,477.33	4,596,028.61	4,143,408.20	3,801,666.61
10. Total of Lines 8 and 9	8,245,535.69	7,679,712.52	6,961,184.58	6,451,207.41

DSC Foundation, Inc.
 EIN: 47-5373716
 Attachments to Form 1023

11. Net gain or loss on sale of capital assets	-	-	-	-
12. Unusual grants	-	-	-	-
13. Total Revenue Add Lines 10 through 12	8,245,535.69	7,679,712.52	6,961,184.58	6,451,207.41

*Itemized list of Line 7:

7. Any revenue not otherwise listed above or in lines 9-12.	Apr. 2014 - Mar. 2015	Apr. 2013 - Mar. 2014	Apr. 2012 - Mar. 2013	Apr. 2011 - Mar. 2012
Revenue Rebate Forfeitures	-	(22,510.00)	-	-
Show Special Rebate for Convent	(31,170.00)	-	(23,970.00)	(26,350.00)
Monthly Meetings - Meals	42,845.00	47,557.04	43,420.00	47,560.00
Raffles	194,895.75	178,615.17	161,950.10	143,256.66
Other Income	63,448.95	90,838.98	33,132.79	42,491.66
TOTAL	270,019.70	294,501.19	214,532.89	206,958.32

**Itemized list of Line 9:

9. Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to exempt purposes.	Apr. 2014 - Mar. 2015	Apr. 2013 - Mar. 2014	Apr. 2012 - Mar. 2013	Apr. 2011 - Mar. 2012
Exhibitor Booths	3,424,762.50	3,117,005.00	2,786,625.00	2,436,619.66
Day Traffic Income	363,969.01	342,237.20	286,766.40	270,888.00
Member Activities & Special Events	62,824.00	58,864.00	47,576.00	37,303.00
Trophy Competition - Entries	4,020.00	3,880.00	3,620.00	4,790.00
Safety Event Activity Fee	35.00	-	-	-
Registration & Banquets	415,814.00	373,544.00	401,462.00	349,935.00
Corporate Sponsorships	543,631.25	573,700.00	473,425.00	544,570.00
Affinity Programs	31,194.77	50,650.91	70,949.29	90,803.75
Trophy Competition - Sponsors	10,250.00	10,350.00	10,350.00	10,350.00
DEF Management Fee	67,976.80	65,797.50	62,634.51	56,407.20
TOTAL	4,924,477.33	4,596,028.61	4,143,408.20	3,801,666.61

Dallas Safari Club Revenue from Sources other than the Public (Part X, Lines 6(b)(ii)(a) and (b) and Line 7):

Amounts received from disqualified persons:

Officer/Director Name	Apr. 2014 - Mar. 2015	Apr. 2013 - Mar. 2014	Apr. 2012 - Mar. 2013	Apr. 2011 - Mar. 2012
Abernethy	350.00	225.00	170.00	324.00
Allen	270.00	255.00	6,940.00	283.00
Allison	118,575.50	4,470.00	5,328.00	14,800.00

DSC Foundation, Inc.
 EIN: 47-5373716
 Attachments to Form 1023

Andreola	650.00	3,191.25	32,167.00	44,700.00
Barnes	1,760.99	1,140.25	1,345.00	1,171.10
Blachly	296.00	971.00	956.00	944.00
Bond	735.00	570.00	572.00	1,760.00
Carter	4,285.00	615.00	299.50	621.50
Causey, Lisa	-	326.00	512.00	543.80
Chamblee	4,460.00	4,625.00	8,417.00	5,291.00
Cheatham	2,774.00	1,402.00	1,196.00	6,844.00
Eads	6,925.50	1,022.00	7,503.00	3,814.00
Evans	2,625.00	12,432.50	4,684.00	10,983.24
Hammons	1,199.25	2,566.00	5,277.00	2,115.00
Hansard	1,926.00	1,504.25	1,090.00	110.00
Hudson	8,133.50	5,032.00	1,257.00	5,381.00
Kielwasser	6,455.00	1,790.00	1,800.00	891.00
Miller	9,893.99	3,021.81	13,581.00	17,470.63
Moore	6,905.00	1,008.00	47,203.00	8,244.50
Mumfrey	60.00	25.00	25.00	86.00
Nayfa	6,692.00	4,759.00	17,973.00	8,915.00
Nyhus	140.00	145.00	-	2,265.00
Oakes	17,644.00	13,924.00	4,357.00	13,445.00
O'Grady	385.00	1,578.00	1,505.00	1,275.00
Oliver	8,372.50	646.00	10,096.00	12,580.00
Patterson	2,687.50	1,733.00	11,652.50	3,354.00
Phillips	3,927.42	4,171.00	13,953.00	10,394.25
Pratt	6,200.00	6,166.00	24,733.00	15,785.00
Price, Jr.	2,615.00	2,642.00	4,480.00	2,374.00
Puckett	7,980.00	3,040.00	2,554.60	2,370.74
Purvis	70.00	-	-	427.00
Rose	16,739.25	4,252.25	34,310.00	14,560.00
Salmeron	-	35.00	187.00	480.00
Sams	5,774.99	425.00	3,200.00	7,780.00
Scott	9,195.00	1,881.00	4,526.00	2,426.19
Spicer	350.00	-	96.00	75.00
Studdard	-	-	31.00	40.00
Tolson	56,572.50	4,447.00	147,392.00	70,219.50
Wayne	9,624.75	2,008.00	16,155.00	4,500.00
Weinberg	-	-	31.00	74.00
Wolfe IV	-	70.00	-	624.00
Wooley	2,225.00	1,705.00	695.00	774.00
Yeatts	680.00	765.00	915.00	972.00
TOTAL	336,154.64	100,584.31	439,164.60	302,087.45

Amounts received that were more than 1% of line 10 above in 2012-2015:

Date	Donor Name	Revenue Amount	Description
2012	Orion/Versus	140,000	Advertising

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

2014	McGuire & Hines Studios	87,500	Donated original acrylic painting
------	-------------------------	--------	-----------------------------------

The Dallas Safari Club did not receive any unusual grants in 2012, 2013, 2014, or 2015.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

ATTACHMENT 21

Schedule D, Section II, Line 1 and Section III, Line 1(a)

Per Article IV, Section 4.4 of DSC Foundation's Bylaws, "all directors of the Foundation in office shall be elected by the action of the board of Directors of the Dallas Safari Club." See **Exhibit C** for a full copy of DSC Foundation's Bylaws.

In addition, and as set forth in Article Five of the Restated Certificate of Formation, the mission of DSC Foundation includes to "support Dallas Safari Club." See **Exhibit B** for a full copy of DSC Foundation's Restated Certificate of Formation.

DSC Foundation, Inc.
EIN: 47-5373716
Attachments to Form 1023

EXHIBITS:

EXHIBIT A— Certificate of Formation and Amendments

EXHIBIT B— Restated Certificate of Formation

EXHIBIT C—Bylaws

EXHIBIT D—Executive Compensation Policy

EXHIBIT E—Conflict of Interest Policy

EXHIBIT F—Grant Application



Department of the Treasury Internal Revenue Service

Notice 1382

(Rev. October 2013)

Changes for Form 1023

- Mailing address
- Parts IX, X, and XI

Reminder: Do Not Include Social Security Numbers on Publicly Disclosed Forms

Because the IRS is required to disclose approved exemption applications and information returns, exempt organizations should not include Social Security numbers on these forms. Documents subject to disclosure include supporting documents filed with the form, and correspondence with the IRS about the filing.

Changes for Form 1023, Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

Change of Mailing Address

The mailing address shown on Form 1023 Checklist, page 28, the first address under the last checkbox; and in the Instructions for Form 1023, page 4 under *Where To File*, has been changed to:

Internal Revenue Service
P.O. Box 12192
Covington, KY 41012-0192

To file using a private delivery service, mail to:

201 West Rivercenter Blvd.
Attn: Extracting Stop 312
Covington, KY 41011

Changes for Parts IX and X

Changes to Parts IX and X are necessary to comply with new regulations that eliminated the advance ruling process. Until Form 1023 is revised to reflect this change, please follow the directions on this notice when completing Part IX and Part X of Form 1023. For more information about the elimination of the advance ruling process, visit us at IRS.gov. In the top right "Search" box, type "Elimination of the Advance Ruling Process" (exactly as written) and select "Search."

Part IX. Financial Data

The instructions at the top of Part IX on page 9 of Form 1023 are now as follows. For purposes of this schedule, years in existence refer to completed tax years.

1. If in existence less than 5 years, complete the statement for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of:
 - a. Three years of financial information if you have not completed one tax year, or
 - b. Four years of financial information if you have completed one tax year.

(Continued)

2. If in existence 5 or more years, complete the schedule for the most recent 5 tax years. You will need to provide a separate statement that includes information about the most recent 5 tax years because the data table in Part IX has not been updated to provide for a 5th year.

Part X. Public Charity Status

Do not complete line 6a on page 11 of Form 1023, and do not sign the form under the heading "Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code."

Only complete line 6b and line 7 on page 11 of Form 1023, if in existence 5 or more tax years.

Part XI. Increase in User Fees

User fee increases are effective for all applications postmarked after January 3, 2010.

1. \$400 for organizations whose gross receipts do not exceed \$10,000 or less annually over a 4-year period.
2. \$850 for organizations whose gross receipts exceed \$10,000 annually over a 4-year period.

For the current user fee amounts, go to IRS.gov and in the "Search" box at the top right of the page, enter "Exempt Organizations User Fees." You can also call 1-877-829-5500.

Application for reinstatement and retroactive reinstatement. An organization must apply to have its tax-exempt status reinstated if it was automatically revoked for failure to file a return or notice for three consecutive years. The organization must:

- (1) Complete and file Form 1023 if applying under section 501(c)(3) or Form 1024 if applying under a different Code section;
- (2) Pay the appropriate user fee and enclose it with the application;
- (3) Write "Automatically Revoked" at the top of the application and mailing envelope; and
- (4) Submit a written statement supporting its request if applying for retroactive reinstatement.

If the application is approved, the date of reinstatement generally will be the postmark date of the application, unless the organization qualifies for retroactive reinstatement. Alternate submissions and standards apply for retroactive reinstatement back to the date of automatic revocation. See Notice 2011-44, 2011-25 I.R.B. 883, at http://www.irs.gov/irb/2011-25_IRB/ar10.html, for details.

Changes for the Instructions for Form 1023

- Change to Part III. Required Provisions in Your Organizing Documents
- Clarification to Appendix A. Sample Conflict of Interest Policy

(Continued)

Changes to Instructions for Form 1023, Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code (Rev. June 2006)

Part III. Required Provisions in Your Organizing Document

Applicable to organizations in the state of New York. Changes are necessary to comply with Rev. Proc. 82-2, 1982-1 C.B. 367, to incorporate the state of New York as a jurisdiction that complies with the *cy pres* doctrine to keep a charitable testamentary trust from failing the requirement for a dissolution clause under Regulations section 1.501(c)(3)-1(b)(4), when the language of the trust instrument demonstrates a general intent to benefit charity. Therefore, the instructions on page 8, line 2c, after the third paragraph now include the state of New York in the state listing as an authorized state. Since the state of New York allows testamentary charitable trusts formed in that state and the language in the trust instruments provides for a general intent to benefit charity, you do not need a specific provision in your trust agreement or declaration of trust providing for the distribution of assets upon dissolution.

Appendix A. Sample Conflict of Interest Policy

Appendix A, Sample Conflict of Interest Policy, is only intended to provide an example of a conflict of interest policy for organizations. The sample conflict of interest policy does not prescribe any specific requirements. Therefore, organizations should use a conflict of interest policy that best fits their organization.