Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

and ending MAR

OMB No. 1545-0047

2024

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning

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

2023

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2023
Open to Public Inspection
mspection

B (Check if pplicable	C Name of organization		D Employer	identific	cation number
	Addres	S DILLIG GIRIDE GLUD				
	Change			51-0	15779	9.2
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone		
F	Final return/	13709 GAMMA ROAD	Troom, outo		980-9	
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipt		12,250,673.
	Ameno			H(a) Is this a		
F	Application			7	rdinates	
	pendin			H(b) Are all sub		····· — —
1 7	Гах-ехе	mpt status: \square 501(c)(3) $\boxed{\mathbf{X}}$ 501(c) ($\boxed{4}$) (insert no.) \square 4947(a)(1)	or 527	1 ' '		list. See instructions
	Nebsit			H(c) Group e	xemptio	n number
KF	orm of	organization: X Corporation Trust Association Other	L Year			1 State of legal domicile: TX
Pa	art I	Summary				
•	1	Briefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$	ORGANI	ZATION'	S MIS	SSION IS TO
Activities & Governance		CONSERVE WILDLIFE AND WILDERNESS LANDS; T	O EDUC	CATE THE	YOU	TH AND THE
rna	2	Check this box if the organization discontinued its operations or dispo	sed of more	than 25% of it	s net ass	
ove.						17
ح ح		Number of independent voting members of the governing body (Part VI, line 1b)				17
es		Total number of individuals employed in calendar year 2023 (Part V, line 2a)				14
Νİ		Total number of volunteers (estimate if necessary)				525
Acti	1	Total unrelated business revenue from Part VIII, column (C), line 12				355,026.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11				11,810.
	_		<u> </u>	Prior Year		Current Year
ne	8	Contributions and grants (Part VIII, line 1h)		3,921, 869,		3,937,587.
en/	9	Program service revenue (Part VIII, line 2g)			535.	956,163.
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		3,005,		<u>441,442.</u> 2,668,367.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,895,		8,003,559.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,893,		670,000.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)		100,	0.	0.
	45	Salaries, other compensation, employee benefits (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,566,		1,979,325.
Expenses	15	Professional fundraising fees (Part IX, column (A), line 11e)		1,500,	0.	0.
ens	h	Foliassional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	40.			
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,728,	883.	3,073,696.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,095,	092.	5,723,021.
	1	Revenue less expenses. Subtract line 18 from line 12		2,800,		2,280,538.
				ginning of Curre		End of Year
ets	20	Total assets (Part X, line 16)		15,183,		16,767,755.
ASS	21	Total liabilities (Part X, line 26)		4,090,		3,389,385.
Net	20 21 22	Net assets or fund balances. Subtract line 21 from line 20		11,092,		13,378,370.
Pa	art II	Signature Block				
Und	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the b	est of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparer	has any knowled	lge.	
Sig		Signature of officer		Date		
Her	е	RICHARD BIGGERS, TREASURER				
		Type or print name and title		Data		T DTIN
		Print/Type preparer's name Preparer's signature	I	Date	Check L	PTIN
Paid		HANNAH HODGE HANNAH HODGE	<u> </u>	2/16/25		
-	oarer	Firm's name BONADIO & CO., LLP		Firm's	SEIN T	6-1131146
use	Only	Firm's address 7557 RAMBLER RD, SUITE 600			/ =	QE\ 301 1000
	, alo - 15	DALLAS, TX 75231		Phon	e no. (5	
		S discuss this return with the preparer shown above? See instructions Paperwork Reduction Act Notice, see the separate instructions. 332001	10.01.00			X Yes No Form 990 (2023)
_ 1/	V I'UI	i apel work i teurcuoti met Nouce, see life sepai ale ilisu uelioiis. — 33200 i	14-41-43			1 01111 000 (2020)

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE ORGANIZATION'S MISSION IS TO CONSERVE WILDLIFE AND WILDERNESS
	LANDS; TO EDUCATE THE YOUTH AND THE GENERAL PUBLIC AND TO PROMOTE AND
	PROTECT THE RIGHTS AND INTERESTS OF HUNTERS WORLDWIDE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 218,529 • including grants of \$) (Revenue \$ 393,248 •)
	THE ORGANIZATION PUBLISHES THE FOLLOWING PUBLICATIONS SOLELY FOR THE
	ORGANIZATION'S MEMBERSHIP: GAME TRAILS MAGAZINE WHICH IS PUBLISHED
	QUARTERLY AND THE ORGANIZATION'S ONLINE NEWSLETTER.
	~
4b	(Code:) (Expenses \$3 , 434 , 447including grants of \$670 , 000) (Revenue \$)
710	THE ORGANIZATION PROVIDES GRANTS TO FURTHER ITS MISSION OF WILDLIFE
	CONSERVATION, EDUCATION AND HUNTER ADVOCACY. APPROXIMATELY 44% OF THE
	GRANTS GO TOWARD CONSERVATION, 36% FOR EDUCATION AND 20% FOR HUNTER
	ADVOCACY. ABOUT TWO THIRD OF THE GRANTS SUPPORT PROJECTS BEYOND TEXAS
	BORDERS. EXAMPLES INCLUDE CONSERVATION INITIATIVES FOR LIONS,
	ELEPHANTS, GIRAFFES, AND LEOPARDS, DEVELOPING CONSERVATION STRATEGIES
	IN CANADA, AND ADVOCATING FOR HUNTER INTERESTS IN WASHINGTON D.C. THE
	REMAINDER OF THE GRANTS SUPPORT TEXAS INITIATIVES SUCH AS DESERT
	BIGHORN SHEEP RESTORATION, QUAIL HABITAT IMPROVEMENTS, MULE DEER
	RESEARCH AND EXPANDING CONSERVATION CURRICULUM.
4c	(Code:) (Expenses \$
-10	PROGRAM SERVICES FOR MEMBERS INCLUDING MONTHLY MEETINGS, GUEST
	SPEAKERS, COMPETITION EVENTS AND OPEN HOUSES.
4.4	Other program convices (Describe on Schodule O.)
40	Other program services (Describe on Schedule O.)
4-	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 3,923,091.
<u>4e</u>	Total program service expenses 3,923,091.

Form 990 (2023) DALLAS SAFARI CLUB Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		₩
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b	Х	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	- 25	
13		15	х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	.0		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19	х	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Form 990 (2023) DALLAS SAFARI CLUB
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
2 4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			,,,
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
ام	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u> 24u</u>		
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	23a		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а				
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			X
00	"Yes," complete Schedule L, Part IV	28c 29	Х	
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	_29		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			\ _V
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Pai	Note: All Form 990 filers are required to complete Schedule O † V Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>	1 22	L
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	(0000)
		_	C 16 1/ 1	(0000)

332004 12-21-23

	990 (2023) DALLAS SAFARI CLUB	Ţ	51-0157	<u> 792</u>	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
				3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over	а			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?		4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	,	•			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organizatior	n solicit			37
	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts				1
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					37
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	•		7a		X
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_		v
	to file Form 8282?	i i		7c		X
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co			7e 7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contral if the organization received a contribution of qualified intellectual property, did the organization file Fo		auirod?	71 7g		\vdash
g h	If the organization received a contribution of qualified intellectual property, did the organization file of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file of the organization file organization file of the organization file organization file of the organization file organization file of the organization file of the organization file of the organization file of the organization file organization			79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		11 1030-0:	711		
Ü	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.			Ť		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
				9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ı ı				
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				37
	* * * * * * * * * * * * * * * * * * * *			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					v
	excess parachute payment(s) during the year?			15		X
46	If "Yes," see the instructions and file Form 4720, Schedule N.	in a ang - O		40		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?		16		\vdash
17	If "Yes," complete Form 4720, Schedule O.	tivities				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	that would result in the imposition of an excise tax under section 4301, 4302 of 4303?			1/		

Form **990** (2023) 332005 12-21-23

If "Yes," complete Form 6069.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any	other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
-	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
-	persons other than the governing body?			7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea					
а	The governing body?	-	-	8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			0.0		
3	organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	vonue Coe	Vo. 1			
	This Section B requests information about policies not required by the internal he	veriue Coc	<i>ie.</i>)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?		1	10a	X	140
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			ioa		
b		-		10b	X	
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	DCIOIC III	rig the form:	11a		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "y			IZD	- 21	
С		,		100	Х	
10	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13 14	X	
14	Did the organization have a written document retention and destruction policy?			14	71	
15	Did the process for determining compensation of the following persons include a review and approva	-	endent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45-	Х	
a	The organization's CEO, Executive Director, or top management official			15a	X	
a	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			15b	77	
10-						
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen			10-		Х
	taxable entity during the year?			16a		Λ
d	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the	•	eipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's				
800	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	na 990-T (s	ection 501(c)(3)s	only)	availab	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	ntlict of int	erest policy, and	tinano	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and red	cords			
	RICHARD BIGGERS - 972-980-9800					
	13709 GAMMA ROAD. DALLAS. TX 75244					

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

X Check this box if neither the organization	nor any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable 	Estimated
	hours per					s both or/trus		compensation	compensation	amount of
	week (list any	Į.						from the	from related organizations	other compensation
	hours for	direct				p		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	·	and related
	below	vidua	itutio	cer	Key employee	hest c	Former			organizations
	line)	ju j	ısı	Officer	Ke	e Ei	For			
(1) MASON, COREY	40.00	4					37	220 020	0	0
FORMER EXECUTIVE DIRECTOR	40 00	<u> </u>					Х	329,839.	0.	0.
(2) FIENHOLD, BRIAN	40.00	┨				37		010 275	0	0
DIR. OF DEVELOPMENT	10 00	\vdash				Х		210,375.	0.	0.
(3) LEWIS, TERRI	40.00	-				\		106 140	0.	0
EXHIBITS MANAGER (4) STANFORD, LORI	40.00	\vdash				Х		186,148.	0.	0.
AUCTION MANAGER	40.00	1				x		121,426.	0.	0.
(5) BRAZIL, TATIANE	40.00					1		121,420.	0.	<u></u>
EXHIBITS MANAGER	1000	1				x		109,505.	0.	0.
(6) MULHOLLAND, RAY	5.00							,	-	
PRESIDENT		X		Х				0.	0.	0.
(7) BURDON, RICHARD	3.00									
VICE PRESIDENT		X		X				0.	0.	0.
(8) JEANES, JAMES	3.00									
DIRECTOR		X						0.	0.	0.
(9) OLMSTEAD, NATHAN	3.00									
ASSISTANT VP		X		Х				0.	0.	0.
(10) BROWN, AUSTIN	3.00	ļ								
ASSISTANT VP		X		X				0.	0.	0.
(11) BENAVIDES, TOM	3.00									•
ASSISTANT VP	1 2 00	Х		Х				0.	0.	0.
(12) FOLTZ, ROGER	3.00	X		.				0.	0.	0.
SECRETARY (13) PATTERSON, JOHN	10.00	^		Х				0.	0.	0.
IMMEDIATE PAST PRES	10.00	X		х				0.	0.	0.
(14) ANGELIDES, MIKE	3.00	^		^				0.	0.	0.
ASSISTANT VP	3.00	Х		х				0.	0.	0.
(15) PUCKETT, BROOKS	3.00	125						•	•	•
VICE PRESIDENT	1 2 3 3 0	x		х				0.	0.	0.
(16) STACY, RUSSELL	3.00	† <u> </u>								
DIRECTOR		х						0.	0.	0.
(17) BIGGERS, RICHARD	10.00									
TREASURER		Х		Х				0.	0.	0.

332007 12-21-23

	SAFARI CL	10E	3						51-0157	792 Page 8
Part VII Section A. Officers, Directors, Tr	ustees, Key Em _l	oloy	ees,	anc	l Hi	ghes	st Co	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not ch		itior		one	Reportable	Reportable	Estimated
	hours per	box	, unles	s per	rson i	s both	n an	compensation	compensation	amount of
	week (list any	—	Ceran	uau	recto	i/irus	lee)	from	from related	other
	hours for	irecto						the organization	organizations (W-2/1099-M I SC/	compensation from the
	related	e or d	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee		1099-NEC)	10001120)	and related
	below	idua	ntion	-	Key employee	est co oyee	- GL	,		organizations
	line)	Indiv	Instit	Officer	Key e	High	Former			
(18) LEYENDECKER, JAY	3.00									
DIRECTOR		Х						0.	0.	0.
(19) WILMOT, MIKE	3.00									
VICE PRESIDENT		X		X				0.	0.	0.
(20) WARREN, RICK	3.00									
PRESIDENT ELECT		Х		Х				0.	0.	0.
(21) OROPALLO, MICHAEL	3.00									
ASSISTANT VP		Х		Х				0.	0.	0.
(22) RIATTI, GRAY	3.00									
ASSISTANT VP		Х		Х				0.	0.	0.
(23) SCHNEIDER, MICHAEL	3.00									
ASSISTANT VP		Х		Х				0.	0.	0.
(24) SAMPLE, KNIGHTON	3.00									
DIRECTOR		Х						0.	0.	0.
(25) SIMONS, GREG	3.00									
DIRECTOR		Х						0.	0.	0.
(26) SWAN, JOEL	3.00									
DIRECTOR		Х						0.	0.	0.
1b Subtotal								957,293.	0.	0.
c Total from continuation sheets to Part	VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								957,293.	0.	0.
2 Total number of individuals (including but) w/b	0.0	coived more than \$100	000 of reportable	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

			Yes	No_
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	Х	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services	_	·	
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
OMNI HOTEL & RESORT		
555 SOUTH LAMAR, DALLAS, TX 75202	HOTEL SERVICES	538,081.
THE EXPO GROUP		
5931 CAMPUS CIRCLE WEST, IRVING, TX 75063	DECORATOR	456,623.
KBH CONVENTION CENTER		
650 S. GRIFFIN, DALLAS, TX 75202	CONVENTION RENT	395,978.
SAFARI CLASSICS		
5206 MCKINNEY AVE., #101, DALLAS, TX 75205	ADVERTISING	391,250.
ALFORD MEDIA SERVICES INC.		
2965 SOUTH FREEPORT PKWY, COPPELL, TX 75019	MEDIA	342,547.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 10		
200 DADE 1111 2000101 3 20100111111001011 2111		000

SEE PART VII, SECTION A CONTINUATION SHEETS

	AFARI CI									7792
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd F	ligh	est (Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(c		Pos	C) ition that		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensatior from the organization and related organizations
27) ALLISON, KYLE TRECTOR	3.00	X						0.	0.	0
28) GOSS, COREY	3.00	_						0.	0.	U
IRECTOR	3.00	X						0.	0.	0
29) HEARD, KEN	3.00	25						0.	0.	
IRECTOR	7.00	Х						0.	0.	0
		1								
		1								
		-								
		-								
			_				_			
		1								
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		1								
							_			
		1								
		1								
		1								
		1								
							ı	I .	1	

Form 990 (2023) DALLAS
Part VIII Statement of Revenue

			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			oncok ii concadio o containo a response	or rioto to arry in	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
(0, (0	4	_	Federated campaigns 1a					000000000000000000000000000000000000000
Contributions, Gifts, Grants and Other Similar Amounts	١.							
ij								
fts,			Fundraising events 1c					
ig gi			Related organizations 1d					
ns, Sirr			Government grants (contributions) 1e					
atio		T	All other contributions, gifts, grants, and	2 027 507				
ë			similar amounts not included above 1f	3,937,587.				
out		-	Noncash contributions included in lines 1a-1f	3,200,007.	2 027 507			
<u>С</u>		n	Total. Add lines 1a-1f	Di	3,937,587.			
	_		MEMBER GILLD DIVING	Business Code	E02 724	E02 724		
ice	2	а	MEMBERSHIP DUES	541800 900099	503,724.	503,724.	205 120	
e S		~	ADVERTISING		393,248.	108,120.	285,128.	
n S		С	CHAPTER REVENUE	900099	59,191.	59,191.		
ra Be		d						
Program Service Revenue		e						
ъ.			All other program service revenue		056.163			
			Total. Add lines 2a-2f		956,163.			
	3		Investment income (including dividends, intere		441 440			441 440
	_		other similar amounts)		441,442.			441,442.
	4		Income from investment of tax-exempt bond p					
	5		Royalties(i) Real	(ii) Personal				
	_			(II) Personal				
	6		Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
				(:) Others				
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
•		b	Less: cost or other basis					
un			and sales expenses 7b					
Revenue			Gain or (loss) 7c	1				
Ä	_		Net gain or (loss)	<u> </u>				
ther	8	а	Gross income from fundraising events (not					
ġ			including \$ of					
			contributions reported on line 1c). See	6 210 206				
			Part IV, line 18					
			Less: direct expenses 8b	•	2 544 497			2544497.
			Net income or (loss) from fundraising events	<u> </u>	2,544,497.			234443/.
	9	а	Gross income from gaming activities. See	381 155				
			Part IV, line 19					
			Less: direct expenses 9b		-83,179.	-83,179.		
					-03,173.	-03,173.		
	10	а	Gross sales of inventory, less returns	177 000				
			and allowances 10					
			Less: cost of goods sold [10]	0 107,991.	60 909		60 000	
		С	Net income or (loss) from sales of inventory .	Business Code	69,898.		69,898.	
ဋ	م. م	-	MANAGEMENT FEES	900099	130,000.	130,000.		
Miscellaneous Revenue	11			900099	· · · · · · · · · · · · · · · · · · ·	,		
llan		~	MISC	300033	7,151.	7,151.		
Sce Be		C	All others server s					
Ĕ			All other revenue		137,151.			
		е	Total. Add lines 11a-11d		· · · · · · · · · · · · · · · · · · ·	725 007	355 026	2985939.
	12		Total revenue. See instructions		8,003,559.	725,007.	355,026.	4905939.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX **(B)** Program service expenses (C) Management and general expenses **(D)** Fundraising expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 520,000. 520,000. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 150,000. 150,000. Benefits paid to or for members Compensation of current officers, directors, 339,148. 118,702. 101,744. 118,702. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,358,581. 860,902. 219,961. 277,718. Other salaries and wages 7 Pension plan accruals and contributions (include 8,651. 26,342. 45,653. 10,660. section 401(k) and 403(b) employer contributions) 68,986. 27,917. 119,559. 22,656. Other employee benefits 9 116,384. 67,154. 22,054. 27,176. Payroll taxes 10 Fees for services (nonemployees): 199,992. 199,992. a Management 60,769. 60,769. Legal 146,774. 146,774. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 1,422,044. 1,026,265. 395,779. Advertising and promotion 12 170,714. 170,714. Office expenses 13 64,118. 64,118. Information technology 14 Royalties 15 214,242. 214,242. 16 Occupancy 169,268. 169,268. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 7,724.40,333. 23,673. 8,936. 22 Depreciation, depletion, and amortization 73,884. 73,884. 23 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) MEMBERSHIP EXPENSE 270,115. 270,115. READERSHIP COSTS 218,529. 218,529. 22,914. 22,914. DUES & SUBSCRIPTIONS d REALLOCATIONS FROM AUDI 1,598,688. -1,794,040.195,352. All other expenses 5,723,021. 3,923,091. 737,690. 1,062,240. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Pai	rt X	Balance Sheet				
		Check if Schedule O contains a response or note to any line i	n this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		415,310.	1	939,834
	2	Savings and temporary cash investments		13,314,828.	2	14,135,745
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		179,379.	4	215,742
	5	Loans and other receivables from any current or former office				
		trustee, key employee, creator or founder, substantial contrib	utor, or 35%			
		controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (
		under section 4958(f)(1)), and persons described in section 49	958(c)(3)(B) L		6	
S	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		95,018.	8	138,876
Ä	9	Prepaid expenses and deferred charges		204,985.	9	353,239
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 10b	1,476,168.			
	b	Less: accumulated depreciation 10b	491,849.	959,598.	10c	984,319
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		14,640.	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)		15,183,758.	16	16,767,755
	17	Accounts payable and accrued expenses	1,891,708.	17	1,123,377	
	18	Grants payable		18		
	19	Deferred revenue		2,098,488.	19	2,192,474
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Sch			21	
es	22	Loans and other payables to any current or former officer, dir				
ij		trustee, key employee, creator or founder, substantial contrib	utor, or 35%			
Liabilities					22	
_	23	Secured mortgages and notes payable to unrelated third part			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to rela				
		parties, and other liabilities not included on lines 17-24). Com	·	100 700		72 524
		of Schedule D		100,790.		73,534
	26	Total liabilities. Add lines 17 through 25		4,090,986.	26	3,389,385
s		Organizations that follow FASB ASC 958, check here				
Jce		and complete lines 27, 28, 32, and 33.				
alaı	27	Net assets without donor restrictions	F		27	
d B	28	Net assets with donor restrictions			28	
Ľ.		Organizations that do not follow FASB ASC 958, check he	re X			
or F		and complete lines 29 through 33.	- 1	0.	00	0
ts.	29	Capital stock or trust principal, or current funds		0.	29	0.
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund		11,092,772.	30	13,378,370
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other		11,092,772.	31	13,378,370
ž	32	Total liebilities and not assets (fund balances		15,183,758.	32	16,767,755
	33	Total liabilities and net assets/fund balances		10,100,100.	33	10,/0/,/33

Pai	TXI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				<u>59.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u>21.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3				<u> 38.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,	<u>092</u>	<u>, 7'</u>	<u>72.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		5	,0	<u>60.</u>
9	Other changes in net assets or fund balances (explain on Schedule O)					0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	13,	378	, 3'	<u>70.</u>
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b		
				orm §	990 ((2023)

SCHEDULE C

(Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number DALLAS SAFARI CLUB 51-0157792 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$______ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (a) Name (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2023

Part II-A C	Complete if the organ	ALLAS SAFA	RI CLUB	501(a)(2) and file	0 Form 5769 (a)	etion under
	section 501(h)).	iization is exen	npt under section		a romi 5766 (ele	ection under
				D . B		
A Check L		=		Part IV each affiliated	group member's nam	e, address, EIN,
- ~	expenses, and share of		• •			
B Check L		n checked box A ar on Lobbying Expe	nd "limited control" pro	visions apply.	(a) Filing	(b) Affiliated group
			ints paid or incurred.)		organization's totals	totals
1a Total lobby	ying expenditures to influer	nce public opinion (grassroots lobbying)			
b Total lobby	ying expenditures to influer	nce a legislative boo	ly (direct lobbying)			
c Total lobby	ying expenditures (add line	s 1a and 1b)				
d Other exer	mpt purpose expenditures					
e Total exem	npt purpose expenditures (add lines 1c and 1d)			
f Lobbying r	nontaxable amount. Enter t	he amount from the	e following table in both	n columns.		
If the amou	nt on line 1e, column (a) or (l) is: The lob	bying nontaxable am	ount is:		
not over \$5	500,000,	20% of	the amount on line 1e.			
over \$500.	,000 but not over \$1,000,0	00, \$100,00	00 plus 15% of the exc	ess over \$500,000.		
	0,000 but not over \$1,500.		00 plus 10% of the exc			
	0,000 but not over \$17,000		00 plus 5% of the exces			
over \$17,0		\$1,000,	•			
	s nontaxable amount (enter	OFO/ of line 46		1		
•	ne 1g from line 1a. If zero o	,				
	ne 1f from line 1c. If zero o					
	an amount other than zero	,				<u> </u>
-	section 4911 tax for this year				1	Yes No
roporting	oction for tax for time you		eraging Period Under			
	(Some organizations that		• •	• •	f the five columns b	elow.
		See the separa	ate instructions for lir	nes 2a through 2f.)		
	1	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		1
	endar year /ear beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying r	nontaxable amount					
	ne 2a, column(e))					
c Total lobby	ying expenditures					
	s nontaxable amount					
	s ceiling amount ne 2d, column (e))					
f Grassroots	s lobbying expenditures					

Schedule C (Form 990) 2023

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

h "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k)
obbying activity.	Yes	No	Amo	unt
uring the year, did the filing organization attempt to influence foreign, national, state, or				
cal legislation, including any attempt to influence public opinion on a legislative matter				
referendum, through the use of:				
olunteers?				
aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
edia advertisements?				
lailings to members, legislators, or the public?				
ublications, or published or broadcast statements?				
rants to other organizations for lobbying purposes?				
irect contact with legislators, their staffs, government officials, or a legislative body?				
allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
ther activities?				
otal. Add lines 1c through 1i				
id the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
"Yes," enter the amount of any tax incurred under section 4912				
"Yes," enter the amount of any tax incurred by organization managers under section 4912				
	504/ \/5		1.	
	1 501(c)(5)	, or sec	tion	
			Yes	N
/ere substantially all (90% or more) dues received nondeductible by members?		1		
		1		
xpenses for which the section 527(f) tax was paid).				
urrent year		2a		
notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ss			
oes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	litical			
xpenditures next year?		. 4		
axable amount of lobbying and political expenditures. See instructions		1 _		
V Supplemental Information		5		
exable amount of lobbying and political expenditures. See instructions		_ _		
	referendum, through the use of: plunteers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)? edia advertisements? ailings to members, legislators, or the public?	referendum, through the use of: plunteers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)? edia advertisements? ailings to members, legislators, or the public? ublications, or published or broadcast statements? rants to other organizations for lobbying purposes? rect contact with legislators, their staffs, government officials, or a legislative body? allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ther activities? btal. Add lines 1c through 1i dt the activities in line 1 cause the organization to not be described in section 501(c)(3)? "Yes," enter the amount of any tax incurred under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6). The ere substantially all (90% or more) dues received nondeductible by members? dt the organization make only in-house lobbying expenditures of \$2,000 or less? dt the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (I answered "Yes." ues, assessments and similar amounts from members action 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). urrent year arryover from last year	referendum, through the use of: Jointeers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)? edia advertisements? allings to members, legislators, or the public? Jolications, or published or broadcast statements? rants to other organizations for lobbying purposes? rect contact with legislators, their staffs, government officials, or a legislative body? alliles, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ther activities? the activities in line 1 cause the organization to not be described in section 501(c)(3)? "Yes," enter the amount of any tax incurred under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). The substantially all (90% or more) dues received nondeductible by members? d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part I answered "Yes," ues, assessments and similar amounts from members socition 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). urrent year 2a arryover from last year 2b day gyregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	referendum, through the use of: Junteers? Junteers? Junteers? Junteers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)? edia advertisements? aillings to members, legislators, or the public? Julications, or published or broadcast statements? rect contact with legislators, their staffs, government officials, or a legislative body? allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ther activities? Julications in line 1 cause the organization to not be described in section 501(c)(3)? "Yes," enter the amount of any tax incurred under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 Tyes," enter the amount of any tax incurred by organization managers under section 4912 Tyes," enter the amount of any tax incurred by organization managers under section 4912 Tyes," enter the amount of any tax incurred by organization managers under section 4912 Tyes," enter the amount of any tax incurred by organization managers under section 4912 Tyes," enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes The Gomplete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Tyes Ty

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Inspection

Name of the organization DALLAS SAFARI CLUB **Employer** identification number 51-0157792

Pai	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		or Accounts. Complete if the
	organization answered 165 off officially, in	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acqu		
	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
7	Amount of avanage incurred in manitoring inspecting has	lling of violations, and enforcing concerns	tion accompate duving the year
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and emorcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2d above	seatisfy the requirements of section 170/b	\/4\/B\/i\
0	4 7 4 7 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
9	In Part XIII, describe how the organization reports conservation	on pasements in its revenue and expense	
3	balance sheet, and include, if applicable, the text of the footr	·	
	organization's accounting for conservation easements.	lote to the organization a infancial statem	chia that describes the
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	i8, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its finar	·	•
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items.		,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	<u>.</u>		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		\$ <u> </u>
	Assets included in Form 990, Part X		

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

Schedule D (Form 990) 2023

Pai	t III Organizations Maintaining Co	ollections of Art	t, Histo	orical Tre	asures, or	Other	r Simila	r Assets	(continu	ied)
3	Using the organization's acquisition, accessio	n, and other records	s, check	any of the f	ollowing that	make si	gnificant	use of its		
	collection items (check all that apply).									
а	Public exhibition	d	L	_oan or exc	hange progra	am				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's col	lections and explain	how the	ey further th	ne organizatio	n's exen	npt purpo	se in Part	XIII.	
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be mai								Yes	☐ No
Pai	t IV Escrow and Custodial Arrang								ne 9, or	
	reported an amount on Form 990, Part									
1a	Is the organization an agent, trustee, custodia	ın, or other intermed	liary for o	contribution	s or other as	sets not	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a									
									Amount	
С	Beginning balance						1c			
d	Additions during the year									
е	Distributions during the year									
f	Ending balance						1f			
2a	Did the organization include an amount on Fo						ity?		Yes	□ No
b	If "Yes," explain the arrangement in Part XIII.								_	
Pai							0.			
	•	(a) Current year		rior year	(c) Two year			years back	(e) Four y	ears back
1a	Beginning of year balance	514,420.								
b	Contributions	261,274.								
c	Net investment earnings, gains, and losses	48,558.								
d	Grants or scholarships	0.								
e	Other expenditures for facilities									
•	and programs									
f	Administrative expenses									
g	End of year balance	824,252.								
2	Provide the estimated percentage of the curre		e (line 1a	column (a))) held as:	-				
– a	Board designated or quasi-endowment	one your one balance	%	, σσιατιπτ (α)	,, riola ao.					
b	Permanent endowment 100	%	– ′°							
c	Term endowment 9									
Ū	The percentages on lines 2a, 2b, and 2c shou	-								
3a	Are there endowment funds not in the posses	•	tion that	are held ar	nd administer	ed for th	е			
-	organization by:								[·	Yes No
									3a(i)	X
										X
b	If "Yes" on line 3a(ii), are the related organizat									X
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipme									
	Complete if the organization answered		, Part I V,	, line 11a. S	ee Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or o			or other		ccumulat	ed T	(d) Book	value
	2 coonplicit of property	basis (investm			(other)		preciation		(4) 200.	74
	Land	,			2,740.				242	,740.
b	Buildings				9,702.	-	255,6	72.		,030.
~	Leasehold improvements				- , · • - •					,
d	Equipment	1		2.7	3,726.	-	236,1	77.	37	,549.
	Other				-,		, _		<u> </u>	,
	. Add lines 1a through 1e. (Column (d) must ed		X line 10	nc column	(B))				984	,319.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 DALLAS SAFAR	RI CLUB	51-	-0157792 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes" o			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
Part X Other Liabilities			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DUE DSC FOUNDATION			10,101.
(3) SALES TAX PAYABLE			46,541.
(4) PAYROLL LIABILITIES			15,892.
(5) DUE TO OTHER ORGANIZATIONS			1,000.

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

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

Schedule D (Form 990) 2023

(6) (7) (8)

73,534.

Part	XI Reconciliation of Revenue per Audited Financial Statement	ts Wit	h Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 T	otal revenue, gains, and other support per audited financial statements			1	12,004,374.
2 A	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a N	Net unrealized gains (losses) on investments	2a			
b [Oonated services and use of facilities	2b	188,000.		
c F	Recoveries of prior year grants	2c			
d C	Other (Describe in Part XIII.)	2d	3,812,815.		
e A	Add lines 2a through 2d			2e	4,000,815.
3 8	Subtract line 2e from line 1			3	8,003,559.
4 A	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a li	nvestment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c A	Add lines 4a and 4b			4c	0.
5 7	otal revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	8,003,559.
Part	XII Reconciliation of Expenses per Audited Financial Statemer	nts Wi	th Expenses per F	≀etur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 T	otal expenses and losses per audited financial statements			1	9,723,836.
2 A	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a D	Oonated services and use of facilities	2a	188,000.		
b F	Prior year adjustments	2b			
c	Other losses	2c			
d C	Other (Describe in Part XIII.)	2d	3,812,815.		
е А	Add lines 2a through 2d			2e	4,000,815.
3 8	Subtract line 2e from line 1			3	5,723,021.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a li	nvestment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c A	Add lines 4a and 4b			4c	0.
5 7	otal expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)			5	5,723,021.
Part	XIII Supplemental Information				
Provide	ϵ the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	', lines 1	Ib and 2b; Part V, line 4	; Part ?	X, line 2; Part X I ,
lines 2	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal info	ormation.		
PART	TV, LINE 4:				
THE	ENDOWMENT FUNDS ARE INTENDED TO SUPPORT TH	IE L	ONG-TERM SUS	TAI	NABILITY
OF C	OUR MISSION BY ENSURING WE CAN CONTINUE MAP	KING	AN IMPACT F	OR_	YEARS TO
COME	E. THE USE OF THESE FUNDS ALIGNS WITH DONG	R II	NTENT AND TH	<u>.E</u>	
<u>ORG</u>	ANIZATION'S STRATEGIC GOALS, WITH ANY FUTUF	RE D	ISTRIBUTIONS	MA]	NAGED IN
<u>ACCC</u>	ORDANCE WITH OUR BYLAWS. NO FUNDS HAVE YE	T B	EEN USED AS	THE	RE IS A
LEVE	<u>EL THAT MUST BE REACHED BEFORE EARNINGS ONI</u>	Y W	ILL BE ALLOW	ED '	TO BE
DISE	BURSED.				
PART	T XI, LINE 2D - OTHER ADJUSTMENTS:				
DIRE	ECT FUNDRAISING EXPENSES, REPORTED ON PART	VII	I LINE 8B		3,674,789.

COST OF GOODS SOLD, REPORTED ON PART VIII LINE 10B

107,991.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name	of the organization					Employer identifi	cation number
) A T.	LAS SAFARI C	LUB				51-015779	2
Parl			ctivities Out	side the United States. Comple	ete if the organ		
	Form 990, Part I\			or and the complete of the com	oto ii tiio organi	zation anoworda i	00 011
1			maintain record	ds to substantiate the amount of its gra	nts and other a	assistance,	
	-			he selection criteria used to award the			Yes X No
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and oth	ner assistance outsi	de the
	United States.						
3				n be duplicated if additional space is n			
	(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region		vity listed in (d)	(f) Total expenditures
		offices	agents, and	(by type) (such as, fundraising, pro-		gram service,	for and
		in the region	agents, and independent contractors	gram services, investments, grants to recipients located in the region)	1	specific type (s) in the region	investments
			in the region	redipiente redated in the region)	01 001 1100	(5) III tilo rogion	in the region
			_				
IORTH	H AMERICA	0	0	GRANTS TO RECIPIENTS	CONSERVATIO	N & EDUC.	150,000.
	Subtotal	0	0				150,000.
	Total from continuation		_				_
	sheets to Part I	0	0				0.
С	Totals (add lines 3a	1					

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

Schedule F (Form 990) 2023

and 3b)

150,000.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	WILDLIFE CONSERVATION	.000,27	CHECK	.0		
		NORTH AMERICA CANADA AND MEXICO, BUT NOT THE UNITED STATES	WILDLIFE CONSERVATION	75,000. CHECK	CHECK	•0		
	recipient organizatior nization by the IRS, o	is listed above that are rant for which the grantee c	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country, r ion 501(c)(3) equ	ecognized as a tax iivalency letter			
3 Enter total number of other organizations or entities	other organizations o	r entities						

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 DALLAS SAFARI CLUB

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

Schedule F (Form 990) 2023 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (c) Number of recipients cash grant Part III can be duplicated if additional space is needed (b) Region (a) Type of grant or assistance

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

Schedule F (Form 990) 2023

332075 11-29-23 Schedule F (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization						Employer ide	ntification number
DALLAS	SAFARI CLUB					51-0157	792
Part I Fundraising Activities required to complete this part	 Complete if the organization answet. 	red "Y	es" or	n Form 990, Part IV, li	ine 17	7. Form 990-EZ	filers are not
Indicate whether the organization rais	sed funds through any of the following e Solicitates f Solicitates g Special Special Part VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
List all states in which the organization or licensing.	on is registered or licensed to solicit c	ontrib	utions	or has been notified	it is e	exempt from req	gistration

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

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro				s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			CONVENTION	, , , ,	(, , , , , , , , , , , , , , , , , , ,	col. (c))
<u>e</u>			(event type)	(event type)	(total number)	
Revenue	_		6 210 206			6 210 206
Re	1	Gross receipts	6,219,286.			6,219,286.
	2	Loos: Contributions				
		Less: Contributions				
	3	Gross income (line 1 minus line 2)	6,219,286.			6,219,286.
	Ŭ	Charles (mile 1 miles mile 2)	0,==0,=00			0,220,2001
	4	Cash prizes				
	5	Noncash prizes				
ses						
Sens	6	Rent/facility costs	1,275,275.			1,275,275.
Direct Expenses						
ect	7	Food and beverages	759,738.			759,738.
₫			16 602			16 602
		Entertainment	16,683.			16,683. 1,623,093.
			1,623,093.			3,674,789.
	10	. , ,	, ,			2,544,497.
Pa	rt l	Net income summary. Subtract line 10 from li Gaming. Complete if the organization a		990 Part IV line 19 or		2,344,437.
		\$15,000 on Form 990-EZ, line 6a.	answered res on rom	1 330, 1 art 14, iii 6 13, 01	reported more than	
		* · · · · · · · · · · · · · · · · · · ·	() 5	(b) Pull tabs/instant		(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
<u> </u>	1	Gross revenue			381,155.	381,155.
SS	2	Cash prizes				
ense					004 455	004 455
Direct Expenses	3	Noncash prizes			381,155.	381,155.
r S		D 16 111				
Dire	4	Rent/facility costs				
	_	Other direct expenses			83,179.	83,179.
_	_5	Other direct expenses	Yes %	Yes %	X Yes95.00 %	03,179.
	6	Volunteer labor		No Yes%	No Yes 93.00 %	
	١	volunteer labor	<u> </u>	140	140	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			464,334.
		3	(,,			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			<83,179.
9	En	ter the state(s) in which the organization condu	icts gaming activities: $ {f \underline{T}} $	X		
а	ls t	the organization licensed to conduct gaming ac	ctivities in each of these	states?		X Yes No
b	If "	No," explain:				
	_					
46					0	
		ere any of the organization's gaming licenses re				Yes X No
O	11 "	Yes," explain:				
	_					
	_					

Schedule G (Form 990) 2023

332082 09-13-23

Sch	edule G (Form 990) 2023 DALLAS SAFARI CLUB 51-	-0157792	Page 3
11	Does the organization conduct gaming activities with nonmembers?	X Yes	O No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	X No
13	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility	_{13a}	.00 %
	o An outside facility	13b	%
•	The file half and address of the person who propares the organization organization of garming, opposite overthe beside and resolves.		
	Name TRACY CORLISS		
	Name India Condition		
	Address 13709 GAMMA ROAD - DALLAS, TX 75244		
	Address 13709 GAMMA ROAD - DALLAS, TX 75244		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	X No
L	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
L.	of gaming revenue retained by the third party \$		
C	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name LORI STANFORD		
	Gaming manager compensation \$121,426.		
	Description of services provided MANAGES DONATIONS & AUCTIONS		
	Director/officer X Employee Independent contractor		
	shocker/emed.		
17	Mandatory distributions:		
	·		
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		X No
	retain the state gaming license?	L Yes	LAL NO
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
_	organization's own exempt activities during the tax year \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			

Schedule G (Fo	orm 990)	DALLAS	SAFARI	CLUB		51-0157792	Page 4
Part IV S	orm 990) Supplemental Infor	mation _{(cont}	inued)				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organizati

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

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

Attach to Form 990.

1545-0047	CC
N	C
OMB	C

Open to Public 2023

Inspection

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

Name of the organization DALLAS SAI	SAFARI CLUB						Employer identification number $51-0157792$
1 '= 1	nd Assistance						
Does the organization maintain records to substantiate the amount of the criteria used to award the grants or assistance?	o substantiate the	amount of the grants	or assistance, the ç	grantees' eligibility	for the grants or assis	ne grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	on Yes X No
2 Describe in Part IV the organization's procedures for monitoring the use	cedures for monit	oring the use of grant	of grant funds in the United States.	States.			
⊑	Domestic Organiz 85,000. Part II can	a tions and Domestic be duplicated if additi	Domestic Governments. Cd if additional space is neede	omplete if the orga ed.	nization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any ded.	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALASKA PROFESSIONAL HUNTERS ASSOCIATION - P.O. BOX 240971 - ANCHORAGE, AK 99501	92-0060165	50106	25,000.	.0			WILDLIFE CONSERVATION
DSC FOUNDATION INC. 13709 GAMMA ROAD DALLAS, TX 75244	47-5373716 501C3	501C3	300,000.	0.			WILDLIFE CONSERVATION
CONGRESSIONAL SPORTMEN'S FOUNDATION - 110 NORTH CAROLINA AVE., SE - WASHINGTON, DC 20003	52-1686163	501C3	75,000.	0.			WILDLIFE CONSERVATION
CONSERVATION FORCE 3240 S. I-10 SERVICE RD W, STE 200 METAIRIE, LA 70001	72-1364493	501C3	100,000.	0			WILDLIFE CONSERVATION
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	nd government org	lanizations listed in the table	e line 1 table				
Ι Δ.	e Instructions for	Form 990.					Schedule I (Form 990) 2023

Page 2

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

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. CLUB'S MISSION IS TO CONSERVE WILDLIFE AND WILDERNESS THAT REPORT BACK TO THE DALLAS SAFARI CLUB REGARDING THEIR USE OF THE FUNDS AND THE BOARD OF DIRECTORS APPROVE ALL GRANTS AND MONITOR HOW THE AS PART OF AND SAFARI CLUB OFFERS GRANT/FINANCIAL SUPPORT TO GRANT FUNDS ARE USED. ORGANIZATIONS RECEIVING GRANTS PERIODICALLY THE USA AND ABROAD TO THOSE WHO SHARE THE SAME MISSION GRANT FUNDS (d) Amount of non-cash assistance PUBLIC AND TO PROMOTE PROTECT THE RIGHTS AND INTERESTS OF HUNTERS WORLDWIDE. PROCEDURES FOR MONITORING THE USE OF (c) Amount of cash grant (b) Number of recipients THE GENERAL EDUCATE YOUTH AND (a) Type of grant or assistance THE DALLAS SAFARI 7 LINE THE DALLAS O E Z MISSION H CAUSES LANDS; GOALS. Part IV PART

332291 04-01-23

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

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

DALLAS SAFARI CLUB

Employer identification number 51-0157792

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		_X_
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:		77	
		5a	Х	37
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			37
a	The organization?	6a		X
b	Any related organization?	6b		_A_
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_		v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u> X</u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	_		v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	ı	1

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

Schedule J (Form 990) 2023

Page 2

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

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

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

		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MASON, COREY	≘	329,839.	0	0	0	0	329,839.	0
FORMER EXECUTIVE DIRECTOR	≘	0	0	0	• 0	0	• 0	0
(2) FIENHOLD, BRIAN	Ξ	210,375.	0	0	0	0	210,375.	0
DIR, OF DEVELOPMENT	(ii)		0	0	0	0	0	0
(3) LEWIS, TERRI	Ξ	186,148.	0	0	0	0	186,148.	0
EXHIBITS MANAGER	Œ	0.	0.	.0	0	0.	0.	0.
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							Schedu	Schedule J (Form 990) 2023

332112 11-06-23

5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
4c, 5a, 5b,
4a, 4b, 4
, 1b, 3,
ines 1a
Part I, I
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or descripti
 , explanation,
 ormation, (
e the inf
Provide

ART I, LINE 5:
HE BONUS PLAN FOR THE EXECUTIVE DIRECTOR AND STAFF IS BASED ON CERTAIN
NUE TARGETS AND EXPENSE SAVINGS. THE BONUS PLAN FOF
VE/COMPENSATION COMMITTEE AND SUBMITTE
THE TREASURER AND THE BOARD OF DIRECTORS.
I
Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

2023
Open to Public Inspection

OMB No. 1545-0047

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

Name of the organization

DALLAS SAFARI CLUB

Employer identification number 51-0157792

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GENERAL PUBLIC AND TO PROMOTE AND PROTECT THE RIGHTS AND INTERESTS OF
HUNTERS WORLDWIDE.
FORM 990, PART VI, SECTION B, LINE 11B:
THE TAX RETURN IS PREPARED BY AN INDEPENDENT CPA FIRM, REVIEWED AND SIGNED
BY THE TREASURER AND SUBMITTED TO THE BOARD OF DIRECTORS FOR REVIEW AND
QUESTIONS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
THE BOARD OF DIRECTORS MEET ONCE PER MONTH AND ARE RESPONSIBLE FOR
MONITORING AND ENFORCING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY.
FORM 990, PART VI, SECTION B, LINE 15:
THE PROCESS FOR DETERMINING COMPENSATION INCLUDES USE OF OUTSIDE MARKET
EVALUATION FIRM, THEN RECOMMENDATIONS ARE REVIEWED BY THE ADMIN COMMITTEE.
FORM 990, PART VI, SECTION C, LINE 19:
ALL GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Open to Public Inspection 2023

OMB No. 1545-0047

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

Employer identification number 51-0157792 Ξ **e** <u>ত</u> Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. છ 9 DALLAS SAFARI CLUB (a) Name of the organization Department of the Treasury Internal Revenue Service Part I

	Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
Part II	Identification of Related Tax-Exempt Organizations. Complete in organizations during the tax year.	ions. Complete if the organization ans	f the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt	t IV, line 34, because	it had one or more re	lated tax-exempt

organizations during the tax year.							
(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct controlling	(g) Section 512(b)(13) controlled	(6)
ol related organization		toreign country)	section	status (ii section 501(c)(3))	eritity	entity? Yes No	ا ا
DSC FOUNDATION INC 47-5373716							
13709 GAMMA RD					DALLAS SAFARI		
DALLAS, TX 75244	CONSERVATION	TEXAS	501(C)(3)	LINE 12A, I	сгив	×	

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

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 DALLAS SAFARI CLUB

51-0157792

Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(K	General or Percentage managing ownership partner?									
9	aneral or anaging artner?	Yes No								
(i)	Code V-UBI amount in box m 20 of Schedule B	K-1 (Form 1065) Y								
(h)	rtionate ions?	શ								
	Dispro	Yes								
(6)	Share of end-of-year assets									
(f)	Share of total income									
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)								
(p)	Direct controlling entity									
(c)	Legal domicile (state or foreign	country)								
(q)	Primary activity		 							
(a)	Name, address, and EIN of related organization									

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

1	l			<u> </u>	1
(i) ction (b)(13) rrolled tity?					
Sect 512(b) contro					
(h) Section Section (i) Section (ii) Ownership controlled entity?					
(g) Share of end-of-year assets					
(f) Share of total income					
(e) Type of entity (C corp, S corp, or trust)					
(d) (e) Direct controlling Type of entity S corp, S corp, or trust)					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of related organization					

Schedule R (Form 990) 2023

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

	<u>۳</u>	₽ ₽ ₽ ₽	2 4 4 9		D & # D # = =	D = # E 4 = = *	+ + + + + + + + + + + + + + + + + + +	+ = + + + + = + + +	 	 	 	 	 	 		 	 		
														elationships and transaction thresholds. (d) Method of determining amount	elationships and transaction thresholds. (d) Method of determining amount FMV PER CONTRACT MGMT AGRE:	alationships and transaction thresholds. (d) Method of determining amount FMV PER CONTRACT MGMT AGRE: FMV	alationships and transaction thresholds. (d) Method of determining amount FMV FMV FMV FMV FMV FMV	alationships and transaction thresholds. (d) Method of determining amount FMV FMV FMV FMV	lationships and transaction thresholds. (d) Method of determining amount FMV FMV FMV FMV FMV
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Schedule R (Form 990) 2023 DALLAS SAFARI CLUB

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) Percentage	ownership				
(j) eneral or F	managing partner? Yes No				
(i) Code V-UBI	amount in box 20 of Schedule K-1 (Form 1065)				
(h) Dispropor-	allocations?				
	_				
0	total income				
Are all partners sec.	501(c)(3) orgs.? Yes No				
(d) Predominant income	(related, unrelated, excluded from tax und sections 512-514)				
(c) egal domicile	(state or foreign country)				
(b) Primary activity					
(a) Name, address, and EIN Prim	of entity				