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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury ► The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 Name of organization DALLAS SEMINARY FOUNDATION D Employer identification number B Check if applicable Please use IRS label or Address change 75-2188543 Doing Business As E Telephone number Name change print or type. See Specific (214) 824-8241 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G Gross receipts** \$ 4,388,291 Termination tions. City or town, state or country, and ZIP + 4 Dallas, TX 752046411 _____Amended return Application pending Name and address of Principal Officer **H(a)** Is this a group return for Richard Freeman affiliates? 3909 Swiss Avenue Dallas, TX 752046411 H(b) Are all affiliates included? **✓** 501(c) (3) **◄** (insert no) **✓** 4947(a)(1) or **✓** 527 (If "No." attach a list See instructions) Group Exemption Number 🕨 Web site: ► dsfplan org **K** Type of organization
✓ Corporation

trust
association L Year of Formation 1987 M State of legal domicile TX Part I Summary Briefly describe the organization's mission or most significant activities Promote and further the interests of Dallas Theological Seminary and institutions served by DTS' alumni by encouraging gifts Activities & Governance through providing charitable gift planning and administrative services Check this box 🗍 if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) . 12 Number of independent voting members of the governing body (Part VI, line 1b) . 9 0 Total number of employees (Part V, line 2a) . . . Total number of volunteers (estimate if necessary) . 0 0 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) . 7a Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 4,776,910 8 2.837.213 Program service revenue (Part VIII, line 2g) . 0 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 855.222 -196,350 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 286.390 257.480 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 5,918,522 2,898,343 12) 13 4.262.267 2.388.747 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-498.869 474,104 10) Professional fundraising fees (Part IX, column (A), line 11e) 16a 0 (Total fundraising expenses, Part IX, column (D), line 25 $\underline{134,857}$ b Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 275,541 17 253,256 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 5,036,677 3,116,107 18 Revenue less expenses Subtract line 18 from line 12 -217,764 19 881,845 Assets or d Balances **Beginning of Year End of Year** 20 Total assets (Part X, line 16) 44,164,675 38,961,090 21 Total liabilities (Part X, line 26) 27,183,030 23,105,024 Net / 22 Net assets or fund balances Subtract line 21 from line 20 16,981,645 15,856,066 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please 2010-04-23 Sign Signature of officer Here Richard Freeman Treasurer Type or print name and title Check if Preparer's PTIN (See Gen Inst) Preparer's signature Paid empolyed 🕨 🦵 Preparer's Firm's name (or yours FIN F if self-employed), address, and ZIP + 4 **Use Only**

May the IRS discuss this return with the preparer shown above? (See instructions) .

Yes

Cat No 11282Y

Νο

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organiza The mission of Dallas Semin		de the highest quality estate and charita	ble gift planning services for Dallas Sem	inary friends and the Christian
	community in order to optim	nize contributions to the Lo	ord's work consistent with achieving fami	ly financial goals	
2	Dıd the organızatıon u the prıor Form 990 or		ant program services during the y		┌ Yes ┌ No
	If "Yes," describe thes	se new services on So	chedule O		
3	services?		nake significant changes in how it	conducts any program	┌ Yes ┌ No
	If "Yes," describe thes	e changes on Sched	ule O		
4	Section 501(c)(3) and	l (4) organızatıons an	s for each of the organization's th d 4947(a)(1) trusts are required any, for each program service rep	to report the amount of grants as	
4a	(Code) (Expenses \$	2,451,642 including grants of \$	2,388,747) (Revenue \$	0)
			the support of Dallas Theological Semin s, 40 charitable trusts, over 100 gift anni		
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	(, (=::F=::=== +		, (,	,
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program service	•	, , , , , , , , , , , , , , , , , , ,	- 1 1-	
	(Expenses \$	0 inc	luding grants of \$	0) (Revenue \$	0)
4e	Total program servic	e expenses \$	2,451,642 Must equal Part	t IX, Line 25, column (B).	

art IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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	Yes	
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νo
36	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		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	or U.S. Information Returns. Enter -U- II not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
U	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		.,	
-	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	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			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country CJ			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νo
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		Νo
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
f		7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the			ь.
	year?	8		No
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νo
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

a boat ponion		,
Section A. Governing	Body and Mana	gement

			Yes	NO
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, $pr\infty$ esses, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 12			
Ь	Enter the number of voting members that are independent 1b 9			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No

Section B. Policies

		Yes	No
Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
Does the organization have a written whistleblower policy?	13	Yes	
Does the organization have a written document retention and destruction policy?	14	Yes	
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
The organization's CEO, Executive Director, or top management official?	15a	Yes	
Other officers or key employees of the organization?	15b	Yes	
Describe the process in Schedule O			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Does the organization have a written conflict of interest policy? If "No", go to line 13 . Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Richard Freeman 3909 Swiss Avenue Dallas,TX 752046411 (214) 824-8241

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- * List all of the organization's current officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees Enter -0 - in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did not compensate any officer, director, trustee or key employee										
		(C) Position (check all that apply)							(-)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key amployaa	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Jerry Reeves , President	40	Х		Х				0	112,947	14,396
Mark L Bailey , Director	40	Х						0	238,241	16,021
Robert Riggs , Secretary	40	Х		Х				0	99,651	14,703
George Underwood , Director	50	Х						0	0	0
Lee Lydick , Director	50	X						0	0	0
Norman E Miller , Director	50	Х						0	0	0
Larry Jobe , Director	50	X						0	0	0
Fred Sewell , Director	50	X						0	0	0
Robert Murchison , Director	50	Х						0	0	0
Robert McCulloch , Director	50	X						0	0	0
Michael Hemp , Director	50	Х						0	0	0
James Stroud , Director	50	X						0	0	0
Richard Freeman , Treasurer	40			Х				0	67,337	0

Part VII Continued

(A) Name and Title	(B) Average hours per week	Individual Trustees or Prector	o at Institutional Trustee	(che	у)	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total							►	0	518,176	45,120

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶0

			163	140
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual			
	on time 1a. 11 res, complete schedules for such mulvidual	3		Νo
4	For any individual listed online 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	Yes	

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

(A) Name and business address	(B) Description of services	(C) Compensation			
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation					

0

Sta	tem	ent	of	Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or
14 -				. 0				514
캺	1a	Federated camp	_					
g d	Ь		es 1b					
્રે. #	C	Fundraising eve	ents 1c					
Contributions, gifts, grants and other similar amounts	d	_	rations 1d					
ž.	e	Government grants	s (contributions) 1e	0				
	f	All other contribution	ons, gifts, grants, and 1f of included above	2,437,213				
é¥	g		butions included in					
草草		lines 1a-1f \$ _						
ರಹ	h	Total (Add line	s 1a-1f)		2,837,213			
œ.				Business Code				
en:	2a							
2€	Ь	-						
e.	С							
ž	d							
ॐ	e							
듄	f	All other progra	ım service revenue					
Program Serwce Revenue	_	Total Addis-	- 22-2f					
	g	O Total. Add lines	s 2a-2f	 \$				
	3		ome (including dividen		420.040	0	0	420.010
			nounts) tment of tax-exempt bond		420,040	0	0	420,040
	4		•		0	0	0	0
	5	Royalties	() Page	1	0	0	0	
	6a	Gross Rents	(ı) Real	(II) Personal				
	h	Less rental						
		expenses	0	0				
	C	Rental income or (loss)		0				
	d	Net rental inco	me or (loss)	•				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	873,558	0				
		than inventory						
	b	Less cost or other basıs and	1,489,948	0				
	_	sales expenses Gain or (loss)	-616,390	0				
	c d		s)	<u> </u>	-616,390	0	0	-616,390
	8a	Gross income f			010,010			010,000
		events (not inc						
<u> </u>			reported on line 1c)					
둢		See Part IV, lin	e 18 <i>G if total exceeds</i>					
ě			a	0				
Œ	ь	Less direct ex	penses b					
Other Revenue	c		loss) from fundraising	events 🏲				
δ	9a		rom gamıng actıvıtıes					
		See part IV, lin	e 19 ule G ıf total exceeds					
		\$15,000	are o ii totai exceeds					
			а					
	Ь		penses b					
	С		loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	* *					
	١.		a					
	Ь р		oods sold b loss) from sales of inve	entory ►				
	С	Miscellaneous		Business Code				
	11a	Administrative		561,000	257,480	257,480	0	0
	ь	<u>- anninstrative</u>		,	,	•		
	_							
	C	-			0	0	0	0
	d	All other revenu	· · · · · · · · · · · · · · · · · · ·		0	0	0	
	e	Total. Add lines	s 11a-11d	 \$ 257,480				
	12	Total Revenue.	Add lines 1h, 2g, 3, 4,	5, 6d, 7d, 8c,	2,898,343	257,480	0	-196,350
		9c. 10c. and 11	le	▶				

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
Do	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,388,747	2,388,747							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0							
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0	0							
4	Benefits paid to or for members	0	0							
5	Compensation of current officers, directors, trustees, and key employees	190,750	0	130,700	60,050					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0					
7	Other salaries and wages	208,391	0	0	32,209					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0	0	0	0					
9	Other employee benefits	48,585	0	39,480	9,105					
10	Payroll taxes	26,378	0	20,281	6,097					
11	Fees for services (non-employees)									
а	Management	0	0	0	0					
b	Legal	237	0	237	0					
c	Accounting	21,650	0	21,650	0					
d	Lobbying	0	0	0	0					
e	Professional fundraising See Part IV, line 17	0			0					
f	Investment management fees	51,750	0	51,750	0					
g	Other	0	0	0	0					
12	Advertising and promotion	12,399		6,199	6,200					
13	Office expenses	22,878	0	15,669	7,209					
14	Information technology	40,403	0	30,302	10,101					
15	Royalties	0	0	0	0					
16	Occupancy	0	0	0	0					
17	Travel	5,333		4,000	1,333					
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0	0	0	0					
19	Conferences, conventions and meetings	2,512	0	2,512	0					
20	Interest	0	0	0	0					
21	Payments to affiliates	0	0	0	0					
22	Depreciation, depletion, and amortization	10,211	0	7,658	2,553					
23	Insurance	5,558	0	5,558	0					
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
а	Professional Dues	868	0	868	0					
Ь	Subscriptions & Books	2,430	0	2,430	0					
С	Miscellaneous	14,132	0	14,132	0					
f	All other expenses	62,895	62,895	0	0					
25	Total functional expenses. Add lines 1 through 24f	3,116,107	2,451,642	529,608	134,857					
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				900 (2008)					

Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			Beginning of year	1	End or year
	2	Savings and temporary cash investments	• •		994,739	2	1,306,225
	3	Pledges and grants receivable, net		004,700	3	1,000,220	
	4	Accounts receivable, net			6,394	4	
	5	Receivables from current and former officers, directors, trustees	kov o	mployees or	0,554		
		other related parties $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$				5	
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S				6	
	7	Notes and loans receivable, net			420,000	7	420,000
	8	Inventories for sale or use				8	
\$	9	Prepaid expenses and deferred charges			6,403	9	4,506
Assets	10a	Land, buildings, and equipment cost basis					
_	ь	Less accumulated depreciation Complete Part VI of	10a	<u> </u>	-		
		Schedule D	10b	56,294	114,957	10 c	639,553
	11	Investments—publicly traded securities			41,609,845	11	36,102,038
	12	Investments—other securities See Part IV, line 11 Complete Part Schedule D	f	1,012,337	12	488,768	
	13	Investments—program-related See Part IV, line 11 Complete Pa			13		
	14	Intangible assets				14	
	15	Other assets See Part IV , line 11 Complete Part IX of Schedule					
		D				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			44,164,675	16	38,961,090
	17	Accounts payable and accrued expenses .	2,281,653	17	73,381		
	18	Grants payable		18			
	19	Deferred revenue	306,152	19	2,480		
	20	Tax-exempt bond liabilities		20			
<u>, 6</u>	21	Escrow account liability Complete Part IV of Schedule D				21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
- =		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D			24,595,225	25	23,029,163
	26	Total liabilities. Add lines 17 through 25			27,183,030	26	23,105,024
		Organizations that follow SFAS 117, check here ▶ 🔽 and compl	ete lin	es 27			
9		through 29, and lines 33 and 34.					
Balance	27	Unrestricted net assets			8,209,275	27	7,772,702
es B	28	Temporarily restricted net assets			6,868,347	28	2,562,668
Ξ	29	Permanently restricted net assets			1,904,023	29	5,520,696
or Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	lete				
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31		
AS	32	Retained earnings, endowment, accumulated income, or other fur	nds			32	
Ŋĕţ	33	Total net assets or fund balances			16,981,645	33	15,856,066
_	34	Total liabilities and net assets/fund balances			44,164,675	34	38,961,090
D-		Financial Statements and Parauting					
ГPа	rt XI	Financial Statements and Reporting					

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

			Yes	No	
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No	
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes		
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νo	
ь	If "Yes." did the organization undergo the required audit or audits?	3b			

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As Filed Data -

DLN: 93493113002060

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

DALLA:	S SEMI	NARY FOUNDAT	TION									
									-218854			
	rt I			harity Status (to be co					Instruct	ions)		
	organi —			ation because it is (Please					/ A \ / ! \			
1	<u> </u>	•		nurches, or association of ch			Section 1	L/U(B)(1)((A)(I).			
2	<u> </u>			tion 170(b)(1)(A)(ii). (Attac								
3	<u> </u>	•	·	e hospital service organizati			-		• •		•	
4	ı		-	zation operated in conjuncti	on with a l	hospital d	escribedi	n Section :	170(Б)(1)	(A)(III). ⊨	nter the	
_	_	•	name, city, and									
5	ı			or the benefit of a college or	universit	y owned o	r operated	by a gove	ernmental	unit desc	ribed in	
	_			(Complete Part II)								
6	<u> </u>	•	-	overnment or governmental								
7	V			ally receives a substantial p		support fro	om a gove	rnmental u	ınıt or fron	n the gene	ral publi	С
	_		-	o)(1)(A)(vi) (Complete Par	•							
8	<u> </u>		•	ped in Section 170(b)(1)(A)		•	•					
9	ı	-		ally receives (1) more than					•	•		SS
		•		lated to its exempt functions	-		•	, ,	•			
			<u>-</u>	estment income and unrelate						() from bu	sınesses	
	_		_	on after June 30, 1975 See					•			
10	<u> </u>	_	-	and operated exclusively to	-		-				-	
11	ı	one or more the box tha	e publicly suppo	and operated exclusively foorted organizations describe type of supporting organiza	d in section	on 509(a) omplete li	(1) or sec	tıon 509(a hrough 11	a)(2) See	Sect ion 5		.Check
е	Γ	other than	foundation man	rtify that the organization is agers and other than one or			•			•		
f		section 50 If the organ	nization receive	d a written determination fro	m the IRS	S that it is	a Type I,	Type II o	r Type III	supportir	ng organi:	zation,
g			ıst 17, 2006, h	as the organization accepte	d any gift	or contrib	utıon from	any of the	!			,
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No
		and (III) bel	ow, the govern	ng body of the the supported	d organıza	tion?				11g	(i)	
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(ii)	<u> </u>
		(iii) a 35%	controlled ent	ty of a person described in ((ı) or (ıı) al	bove?				11g(iii)	<u> </u>
h		Provide the	following infor	mation about the organizatio	ns the org	janızatıon	supports					
							1					
	• •	ame of	(ii) EIN	(iii) Type of organization	l	s the		ou notify	l	s the		nount of
		oorted nization		(described on lines 1-9 above or IRC section	organiz col (i)	ation in listed in	_	nization Lof vour		ation in Transped	supp	ort
	o i gui	ii Zutioii		(See Instructions))		verning		In col (i) of your col (i) organized support? In the U.S.?				
						ment?						
					Yes	No	Yes	No	Yes	No		

Total

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	keu tile box oi	11 lille 3, 7, 01	o or Part 1.)				
	ıblic Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and	2 207 042	2 176 002	2 626 614	2.776.010		2 027 212	14 024 662
	membership fees received (Do not	3,397,043	3,176,882	2,636,614	2,776,910		2,837,213	14,824,662
_	include any "unusual grants ") Tax revenues levied for the organization's							
2	benefit and either paid to or expended on							
	its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3	3,397,043	3,176,882	2,636,614	2,776,910		2,837,213	14,824,662
5	The portion of total contribution by each							
	person (other than a government unit or							
	publicly supported organization) included							4,577,694
	on line 1 that exceed 2% of the amount							, ,
	shown on line 11, column							
_	(f)							
6	Public Support subtract line 5 from line 4							10,246,968
т,	otal Support		L					
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(a)	2008	(f) Total
	A mounts from line 4	3,397,043	511,556	2,636,614	2,776,910	(6)	2,837,213	14,824,662
7	Gross income from interest, dividends,	3,337,013	311,330	2,030,014	2,770,510		2,037,213	11,021,002
8	payments received on securities loans,							
	rents, royalties and income from similar	396,251	511,556	494,770	569,971		420,040	2,392,588
	sources							
9	Net income from unrelated business							
-	activities, whether or not the business is							
	regularly carried on							
10	Other income Do not include gain or loss							
	from the sale of capital assets (Explain in	200,433	222,230	254,408	286,390		257,480	1,220,941
	Part IV)							10.100.101
	Total Support (Add lines 7 through 10)							18,438,191
12	Gross receipts from related activities, etc	(See instruction	s)			12		
13	First Five Years. If the Form 990 is for the	organızatıon's fır	st, second, third	d, fourth, or fifth	tax year as a 5	01(c)(
	organization, check this box and stop here						ļ	▶┌
	omputation of Public Support Perc							
14	Public Support Percentage for 2008 (line 6	column (f) dıvıd	ed by line 11 co	olumn (f))		14		55.575 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, lıne 26f			15		56.54 %
16a	33 1/3% Test - 2008. If the organization did	d not check the b	oox on line 13, a	ind line 14 is 33	1/3% or more,	check	this box	-
	and stop here. The organization qualifies as				•			►V
b	33 1/3% Test - 2007. If the organization di	d not check the l	box on line 13 o	r 16a, and line 1	.5 is 33 1/3% o	r more	, check thi	S
	box and stop here. The organization qualifie	es as a publicly s	supported organ	ızatıon				▶□
17a	10% Facts and Circumstances Test - 2008.	-						
	more, and if the organization meets the "fac							
	organization meets the "facts and circumst							► □
b	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fac the organization meets the "facts and circu							▶□
18	Private Foundation. If the organization did							-1
	instructions			_,,, _, _, _, _, _, _, _, _, _, _,	,	JUN WI		▶ □

Pa	Support Schedule for On (Complete only if you ched)(2)		
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
·	line 6)						
To	tal Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or loss						
12	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organization's fi	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶□
	mputation of Public Support Perc						
15	Public Support Percentage for 2008 (line		•	olumn (f))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
	mputation of Investment Income			40 1 1			
17	Investment Income Percentage for 2008 (-))	17	
18	Investment Income Percentage from 2007	'Schedule A , Pa	rt IV-A, line 27	h		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

Part II, Line 10 (Other Income) - Administrative Fee Income

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

► Attach to Form 990. To be completed by organizations that

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer identification number Name of the organization DALLAS SEMINARY FOUNDATION 75-2188543 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 58 0 Total number at end of year 0 Aggregate Contributions to (during year) 1,296,393 0 3 Aggregate Grants from (during year) 1,486,664 Aggregate value at end of year 6,404,764 0 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No √ Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other □ No impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

- >

(ii) Assets included in Form 990, Part X

- \$

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- a Revenues included in Form 990, Part VIII, line 1

- \$

Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Treasuı</u>	res, or Othe	<u>r Similar Asse</u>	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne fol	lowing that are	a sıgnıfıcant u	se of its collection	ו	
а	Public exhibition		d	Γ	Loan or exch	ange programs			
ь	Scholarly research		e	Γ	Other				
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	ın hov	w the	v further the o	rganization's ex	empt purpose in		
•	Part XIV	medicine and explain			, raremar emo or	gamzanono	.cmpc parpose		
5	During the year, did the organization solicit						ıılar —	Yes	_
Day	assets to be sold to raise funds rather than t								∏ No
Pal	Trust, Escrow and Custodial A Part IV, line 9, or reported an an					iization answ	ered res to re	פ ווו ופ	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					r other assets 1		Yes	
b	If "Yes," explain why in Part XIV and comple	te the following tabl	e						
							A mou	ınt	
c	Beginning balance					1 c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				Г	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete	f the organization	ans	were	ed "Yes" to F	orm 990, Par	t IV, line 10.		
		(a)Current Year	(b) Prior	Year (c)Two	Years Back (d)	Three Years Back (e) Four Y	ears Back
1a	Beginning of year balance	6,591,363							
b	Contributions	260,013							
c	Investment earnings or losses	-655,153							
d	Grants or scholarships	227,259							
e	Other expenditures for facilities and programs	0							
f	Administrative expenses	6,109							
g	End of year balance	5,962,855							
2	Provide the estimated percentage of the yea	r end halance held a							
a	Board designated or quasi-endowment	0 %							
_	•								
b	remailent endowment P								
C D-	renn endowment F	6					Al		
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	ition	tnata	are neid and ad	iministerea for	tne	Yes	No
	(i) unrelated organizations						3a(i)		No
	(ii) related organizations						3a(ii)		Νο
b	If "Yes" to 3a(II), are the related organizatio	ns listed as required	d on S	ched	lule R?		3b		
4	Describe in Part XIV the intended uses of th	e organızatıon's end	lowm	ent fu	ınds				
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm 990, Pa	rt X, line 10.			
	Description of investment				a) Cost or other sis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Bo	ook value
1a	Land				176,000	0			176,000
b	Buildings				434,240	0	0		434,240
c	Leasehold improvements				0	0	0		0
d	Equipment				0	85,607	56,294		29,313
e	Other				0	0	0		0
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colun	ın (B,), lıne	10(c).)		►		639,553
							Schedule D (I	orm 9	90) 2008

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products		203201 0114-01-	y sar market value
Closely-held equity interests	488,768		F
Other	100,700		<u>'</u>
o their			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	488,768		
Total. (Column (b) Should equal Form 990, Part X, Col (b) line 12)	400,700		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		d of valuation
	. ,	Cost or end-of-	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			41.5
(a) Descrip	ption		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line in			
Part X Other Liabilities. See Form 990, Part X	ľ		
(a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
Annuity Obligations	2,238,142		
A mounts held on behalf of others	13,146,774		
Liabilities under split-interest agreements	7,594,447		
Refundable advances	49,800		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	23,029,163		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,898,343
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,116,107
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-217,764
4	Net unrealized gains (losses) on investments	4	-1,423,515
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	1,823,330
8	Other (Describe in Part XIV)	8	-1,307,630
9	Total adjustments (net) Add lines 4 - 8	9	-907,815
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-1,125,579
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	167,198
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		·
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-2,731,145
3	Subtract line 2e from line 1	3	2,898,343
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,898,343
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	3,116,107
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
с	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		_
е -	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	3,116,107
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0		
b	Other (Describe in Part XIV)		_
с -	Add lines 4a and 4b	4c	2.116.107
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	3,116,107

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Ret urn Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	To provide scholarship funds to Dallas Theological Seminary
SchD_P10_S00_L00	Schedule D, Part X	N/A
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	Change in value of split-interest agreements
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Change in value of split-interest agreements

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Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No 1545-0047

DLN: 93493113002060

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Open to Public Inspect ion Employer identification number

DALLAS SEMINARY FOUNDA	TION					75-2188543	
Part I General Infor 1 Does the organization mathe selection criteria use 2 Describe in Part IV the organization	aıntaın records to s ed to award the grar	nts or assistance?	of the grants or assista				▼ Yes □
Form 990, Part Part IV and Sch	IV, line 21 for ar iedule I-1 if addii	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the of the first the office of the conference of	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	,	(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of seconganizations					•	<u> </u>	37
5 Enter total number of oth			· · · · · · ·				edula I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Grants made are almost exclusively donor directed When a request is received, confirmation of tax-exempt status of the donee organization is attained. Research is also performed to determine mission and doctrinal position of organization to ensure it does not conflict with purpose of Dallas Seminary Foundation.

Software ID: 08000095

Software Version: v1.00

EIN: 75-2188543

Name: DALLAS SEMINARY FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

rorin 990,3chedule 1, Pai	t 11, Grants a	ila Other Assistant	e to doverninents	and Organization	is in the officed Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICA NEW LIFE MINISTRIES INTERNATIONALP O BOX 909 PORTLAND,OR 972070909	48-1291935	501(C)(3)	330,000				GENERAL SUPPORT
ALAMO CITY CHRISTIAN FELLOWSHIP6500 N IH 35 SAN ANTONIO,TX 78218	000000000	501(c)(3)	12,000				GENERAL SUPPORT
AMERICAN COUNCIL OF THE ACA OF INDIAP O BOX 118516 CARROLLTON, TX 750116076	23-7329998	501(c)(3)	7,500				GENERAL SUPPORT
BENT TREE BIBLE FELLO WSHIP4141 INTERNATIO NAL PKWY CARROLLTON,TX 75007	00000000	501(c)(3)	10,000				GENERAL SUPPORT
BETHEL HILL BAPTIST CHURCH2691 WHITE HOUSE RD NELSON,VA 24580	000000000	501(c)(3)	5,850				GENERAL SUPPORT
BIG APPLE CHAPEL449 W 44TH ST APT 2E NEW YORK, NY 10036	00000000	501(c)(3)	10,200				GENERAL SUPPORT
CAM INTERNATIONAL8625 LA PRADA DR DALLAS,TX 752285098	75-0800624	501(c)(3)	5,560				GENERAL SUPPORT
CAMPUS CRUSADE FOR CHRISTP O BOX 628222 ORLANDO,FL 328628222	95-6006173	501(c)(3)	21,375				GENERAL SUPPORT
CROSSBRIDGE COMMUNITY CHURCH 14427 BROOK HOLLOW 343 SAN ANTONIO,TX 78232	00000000	501(c)(3)	6,000				GENERAL SUPPORT
DALLAS PREGNANCY RESOURCE CENTER6214 MIMOSA LANE DALLAS,TX 752305133	75-1853520	501(c)(3)	9,850				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States **(b)** EIN (d) A mount of cash (e) A mount of non-(a) Name and address of (c) IRC Code (f) Method of (q) Description of (h) Purpose of grant organization section arant cash valuation (book. non-cash orassistance ıf applıcable FMV, appraisal, or government assistance assistance other) 75-0827008 1,077,383 DALLAS THEOLOGICAL 501(c)(3) GENERAL SUPPORT SEMINARY3909 SWISS AVENUE DALLAS, TX 75204 DE REGRESO AL HOGAR 33-0891808 10,000 501(c)(3) GENERAL 17821 SEVENTEEN SUPPORT STREET SUITE 150 TUSTIN, CA 92780 **DEAF PRISON** 20-1247544 501(c)(3) 86.400 GENERAL MINISTRIES NETWORK SUPPORT WOODHAVEN BAPTIST **DEAF CHURCH** 9920 LONG POINT HOUSTON, TX 77055 30-0190309 6,000 GENERAL EQUIPPED FOR LIFE 501(c)(3) MINISTRIES6809 PARK SUPPORT LANE DALLAS, TX 75225 **ETHIOPIAN** 00000000 501(c)(3) 20,150 GENERAL SUPPORT **EVANGELICAL BAPTIST** CHURCH2822 S JUPITER RD GARLAND, TX 75041 95-6006173 141,000 FAMILY LIFEP O BOX 501(c)(3) GENERAL 7111 SUPPORT LITTLE ROCK, AR 72223 000000000 24,114 FREDONIA HILL 501(c)(3) GENERAL SUPPORT **BAPTIST CHURCH1711** SOUTH STREET NACOGDOCHES, TX 75961 GOSPEL FOR ASIA1800 73-1099096 501(c)(3) 18,000 GENERAL **GOLDEN TRAIL CT** SUPPORT CARROLTON, TX 75010 GRACE BIBLE CHURCH 00000000 501(c)(3) 7,500 GENERAL 11306 INWOOD ROAD SUPPORT DALLAS, TX 752293099 76-0057699 15,600 HOUSTON GRADUATE 501(c)(3) GENERAL SCHOOL OF THEOLOGY SUPPORT 2501 CENTRAL PKWY SUITE A19

HOUSTON, TX 77092

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section grant cash valuation (book, non-cash assistance or assistance or government ıf applıcable FMV, appraisal, assistance other) INHERIT A BLESSING 75-1459777 501(c)(3) 9,000 GENERAL SUPPORT 18940 BASE CAMP RD MONUMENT, CO 80132 LIFE ACTION 38-2157686 501(c)(3) 66,500 GENERAL MINISTRIESP O BOX 31 SUPPORT BUCHANAN, MI 491070031 MEN'S LEADERSHIP 71-0691080 501(c)(3) 7,500 GENERAL SUPPORT MINISTRIES4801 LEGENDARY DR FRISCO,TX 75034 95-3793975 GENERAL MERCY SHIPSP O BOX 501(c)(3) 18,000 2020 SUPPORT GARDEN VALLEY, TX 757712020 93-0398802 16,000 MULTNOMAH BIBLE 501(c)(3) GENERAL COLLEGE8435 NE SUPPORT GLISAN STREET PORTLAND, OR 972205814 00000000 60,000 NORTHWEST BIBLE 501(c)(3) GENERAL CHURCH8505 DOUGLAS SUPPORT DALLAS, TX 752253211 NORTHWEST 00000000 501(c)(3) 10,000 GENERAL COMMUNITY CHURCH SUPPORT 8900 GUILBEAU RD SAN ANTONIO, TX 78250 36-3206639 501(c)(3) 60,000 GENERAL PEACEMAKER MINISTRIESP O BOX SUPPORT 81130 BILLINGS, MT 59108 501(c)(3) PIONEERS10123 52-1206938 7,350 GENERAL WILLIAM CAREY DRIVE SUPPORT ORLANDO, FL 328276020 6,300 75-1416858 GENERAL PROBE MINISTRIES 501(c)(3) SUPPORT 2001 W PLANO PKWY PLANO, TX 750758362

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REASONS TO BELIEVEP O BOX 5978 PASADENA,CA 91117	33-0168048	501(c)(3)	12,000				GENERAL SUPPORT			
RREACH5500 W PLANO PARKWAY 100 PLANO,TX 750934836	75-2181879	501(c)(3)	46,750				GENERAL SUPPORT			
SHERMAN BIBLE CHURCH2617 N FM1417 SHERMAN,TX 75092	000000000	501(c)(3)	23,458				GENERAL SUPPORT			
SIM-USAP O BOX 7900 CHARLOTTE, NC 28241	22-1936391	501(c)(3)	5,450				GENERAL SUPPORT			
THE NAVIGATORSP O BOX 6000 COLORADO SPRINGS, CO 80934	000000000	501(c)(3)	23,800				GENERAL SUPPORT			
WYCLIFFE BIBLE TRANSLATORSP O BOX 628200 ORLANDO,FL 328628200	95-1831097	501(c)(3)	5,450				GENERAL SUPPORT			
YOUNG LIFE720 W MONUMENT COLORADO SPRINGS, CO 809010520	84-0385934	501(c)(3)	16,050				GENERAL SUPPORT			

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DLN: 93493113002060

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990. To be completed by organizations
that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization DALLAS SEMINARY FOUNDATION **Employer identification number**

75-2188543

Pa	art I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of t 990, Part VII, Section A, line 1a Complete Part III to provide an			
	First class or charter travel Hous	ing allowance or residence for personal use		
	Travel for companions Payn	nents for business use of personal residence		
	Tax idemnification and gross-up payments Heal	th or social club dues or initiation fees		
	☐ Discretionary spending account ☐ Person	onal services (e g , maid, chauffeur, chef)		
b	If line 1a is checked, did the organization follow a written policy re provision of all the expenses described above? If "No," complete			
2	Did the organization require substantiation prior to reimbursing or officers, directors, trustees, and the CEO/Executive Director, reg			
3	Indicate which, if any, of the following the organization uses to est organization's CEO/Executive Director Check all that apply	ablish the compensation of the		
		en employment contract		
		pensation survey or study		
	Form 990 of other organizations	oval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Sect	cion A , line 1a		
а	Receive a severance payment or change of control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualifi	ed retirement plan?		Νo
С	Participate in, or receive payment from, an equity-based compens	sation arrangement?		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the app	licable amounts for each item in Part III		
	501(c)(3) and 501(c)(4) organizations only must complete lines 5	i-8.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the compensation contingent on the revenues of	e organization pay or accrue any		
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the compensation contingent on the net earnings of	e organization pay or accrue any		
а	The organization?	6a		Νo
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did th payments not described in lines 5 and 6? If "Yes," describe in Pa	•		No
8	Were any amounts reported in Form 990, Part VII, paid or accure subject to the initial contract exception described in Regs section in Part III			No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(i) Base (ii) Bonus & (iii) Other compensation (iii) Compensation (iii) Compensation (iii) Other compensation (iiii) Other compensation (iiiii) Other compensation (iiiii) Other compensation (iiiiiiii) Other compensation (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		(C) Deferre compensati		(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ	
Mark L Bailey	(I) (II)	0 238,241		0		0	0 16,021	0 254,262	0 235,000
	(ii)								
	(ii)								
	(ii)								
	(i) (ii)								
	(i) (ii)								
	(i) (ii)								
	(i)								
	(ii) (i)								
	(ii)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

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DLN: 93493113002060

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Non-Cash Contributions

Name of the organization DALLAS SEMINARY FOUNDATION Employer identification number

75-2188543

	iypes of Property							
		(a) Check	(b) Number of Contributions	(c) Revenues reported on	(d Method of d	-	nına	
		ıf applıcable		Form 990, Part VIII, line 1g	reven			
1	Art-Works of art	<u> </u>		,				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
_	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	21	394,292	Avg Mkt Value			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (describe)							
26	Other (describe)							
27	Other (describe)							
28	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828	· .	ar for contributions for	29			0
							Yes	No
30a	During the year, did the organization hold for at							
	least three years from the date of			not required to be used for e	exempt purposes			
_	for the entire holding period? .					30a		No
ь 31	If "Yes", describe the arrangem Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell r	non-cash	32a	Yes	
b	If "Yes", describe in Part II							
33	If the organization did not report	revenues i	n Column (c) for a type of p	property for which Column (a	ı) ıs			
	checked, describe in Part II							

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. Identifier ReturnReference Explanation SchM_P01_S00_L32b Schedule M, Part I, Line 32b The organization utilizes the services of an independent brokerage firm to sell donated securities

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DLN: 93493113002060

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization DALLAS SEMINARY FOUNDATION

Employer identification number

75-2188543

ldentifier	Return Reference	Explanation
F990_P05_S00_L02a	Form 990, Part V, Line 2a	Dallas Theological Seminary pays the salaries for Dallas Seminary Foundation and files the Form W-3 Dallas Seminary Foundation reimburses Dallas Theological Seminary for salary expenses

ldentifier	Return Reference	Explanation
F990_P06_S0A_L10	Form 990, Part VI, Section A, Line 10	Treasurer completes 990 w hich is then reviewed by the auditing firm. Audit committee then approves 990 for filing and a copy is made available to the board of directors before being submitted to the IRS.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Board members are required to sign a conflict of interest document once a year

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	For the president, the board determines a reasonable salary based on benchmarks. Annually, the president review's salary of the treasurer. Any increases are made within the structure of Dallas Theological Seminary. Board approves salary expenses.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Available upon request - hard copy format

DLN: 93493113002060

OMB No 1545-0047

2008

Open to Public

SCHEDULE R (Form 990)

Department of the Treasury

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

Related Organizations and Unrelated Partnerships

See separate instructions.

Inspection Internal Revenue Service **Employer identification number** Name of the organization DALLAS SEMINARY FOUNDATION 75-2188543 **Identification of Disregarded Entities** (A) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity Dallas Theological Seminary 501(c)(3) 3909 Swiss Avenue Education ΤX 170(b)(1)(A)(II) N/A Dallas, TX75204 75-0827421 Dallas Seminary Foundation Vision Fund Pooled common fund Dallas Seminary foundation established to 3909 Swiss Avenue ΤX 501(c)(3) 170(b)(1)(E)(III) Foundation support purpose of Dallas Dallas, TX75204 Seminary Foundation 75-2242740

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

(6)

Part V	Transactions with Related Organizatio	ns
--------	---------------------------------------	----

Pa	art V Transactions with Related Organizations					
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or mor	e related organizations listed in Parts II	-IV?			
а	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
ь	b Gift, grant, or capital contribution to other organization(s)			1b	Yes	
c	c Gift, grant, or capital contribution from other organization(s)			1c	Yes	
d	d Loans or loan guarantees to or for other organization(s)			1d		No
e	e Loans or loan guarantees by other organization(s)			1e		No
f	f Sale of assets to other organization(s)			1f		No
g	g Purchase of assets from other organization(s)			1g		No
h	h Exchange of assets			1h		No
i	i Lease of facilities, equipment, or other assets to other organization(s)			1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)			1j		No
k	k Performance of services or membership or fundraising solicitations for other organization(s)			1k	Yes	
ı	Performance of services or membership or fundraising solicitations by other organization(s)			11		No
m	m Sharing of facilities, equipment, mailing lists, or other assets			1m	Yes	
n	n Sharing of paid employees			1n	Yes	
0	Reimbursement paid to other organization for expenses			10	Yes	
р	p Reimbursement paid by other organization for expenses			1р		No
q	q O ther transfer of cash or property to other organization(s)			1q		No
r	r Other transfer of cash or property from other organization(s)			1r	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must compl	ete this line, including covered relations	hips and transaction thresholds			
	1	(B)	(c)			
	(A) Name of other organization(s)	Transaction type(a-r)	Amount Involved			
(1)	.)					
(2)						
(3)						
(4)						
(5)						

Part VI Unrelated Organizations Taxable as a Partnership

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

									_					
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No				
			•	•		•		Cabadul	D / Form					