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DLN: 93493192009112

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

A Fo	or the	2010 ca	lendar vear, or tax vear begin	ning 10-01-2010 and ending 09-30-20	11			
		applicable	C Name of organization			D Employer	identification number	
	dress cl		Dallas Convention & Visitors Bure	au		75-2456	622	
┌ Na	me cha	ange	Doing Business As			E Telephone	number	
┌ Ini	tıal retu	um	Number and street (or P.O. box	If mail is not delivered to street address)	Room/suite	(214) 57	1-1000	
Г Те	rmınate	ed	325 N ST PAUL STREET SUITE 70		ikoom, suite	(221)07		
		return n pending	City or town, state or country, an DALLAS, TX 75201	nd ZIP + 4		G Gross recei	pts \$ 14,233,112	
	•	, ,	F Name and address of p	orincipal officer	Ц(ъ)		liates? Yes V No	
			Phillip Jones	nine.par emeer	n(a) is th	nis a group return for affi	liates / Yes / No	
			325 N St Paul St 700 Dallas, TX 75201		H(b) Are	all affiliates included	d?	
							t (see instructions)	
I Ta	ıx-exen	mpt status	501(c)(3) 501(c)(6)	◀ (insert no)	H(c) Gr	oup exemption n	umber 🟲	
j W	ebsit	e:► www	w VISITDALLAS COM		7			
K For	m of or	rganization	Corporation Trust Associa	ation Other ►	L Year of	formation 1992	M State of legal domicile TX	
	rt I		mary	•				
Governance		CONVE		sion or most significant activities TIONS, CONVENTION REGISTRATION ROMOTIONS	N SERVICES	, OTHER CONV	ENTION SERVICES	
E								
že Že	,	Chastati	ue hov 🖳 if the organization	discontinued its operations of discontinued	of mara three	250/- of the	accate	
			,	discontinued its operations or disposed		1	1	
Activities &	1			erning body (Part VI, line 1a)		3	40	
₽	1			rs of the governing body (Part VI, line 1)		. 4	40	
Ř	1			in calendar year 2010 (Part V, line 2a)		6	0	
ă	1		mber of volunteers (estimate	n Part VIII, column (C), line 12		7a	6,555	
	1			e from Form 990-T, line 34		7a 7b	-85,254	
	+ -	Wet anne	Tacca basiness taxable meom	- Hom Form 550 1, mic 51 1	Р	rior Year	Current Year	
	8	Contril	hutions and grants (Part VIII	, line 1h)	•	0	411,785	
9	9		im service revenue (Part VIII	·	11,409,901	13,104,891		
Revenue	10			mn (A), lines 3, 4, and 7d)		72,817	12,473	
Ť	11			A), lines 5, 6d, 8c, 9c, 10c, and 11e)	•	659,874	703,963	
	12	Total r	revenue—add lines 8 through	11 (must equal Part VIII, column (A), lu	ne	12,142,592	14,233,112	
	13			art IX, column (A), lines 1–3)		0	0	
	14			tIX, column (A), line 4)		0	0	
	15		es, other compensation, emplo	-				
Expenses		5-10)		, , , , , , , , , , , , , , , , , , , ,		6,275,569	6,637,131	
<u>ā</u>	16a	Profes	0	0				
ă	b	Total fu	ndraising expenses (Part IX, column	(D), line 25) ► 0				
	17), lines 11a-11d, 11f-24f)		6,212,895	7,194,206	
	18			must equal Part IX, column (A), line 25)		12,488,464	13,831,337	
	19	Reven	ue less expenses Subtract lii	ne 18 from line 12		-345,872	401,775	
Net Assets or Fund Balances					Beginn	ing of Current Year	End of Year	
4 de 1	20	Totala	assets (Part X, line 16)			8,456,598	8,463,555	
뿧	21					5,874,391	5,479,573	
žÏ	22			ct line 21 from line 20		2,582,207	2,983,982	
Pa	1300	_			· ·			
Pa Unde know	rt III r pena	Sign alties of pe and belief	ature Block erjury, I declare that I have exan	ct line 21 from line 20		l statements, and	to the best of my	
		Ti			I			
c: -	_	***** Signa	** ature of officer			2012-05-31 Date		
Sigr Her		'	LP JONES PRESIDENT & CEO			240		
			or print name and title					
		Print/Type		Preparer's signature	Date	Check if self-	PTIN	
Paid		preparer's	name Matthew D Peck me LANE GORMAN TRUBITT PLLC	Matthew D Peck		employed 🕨 🦳		
Prep	arer		Firm's EIN					
Use		rımı's add	dress 2626 HOWELL STREET SUITE	<u>-</u> /00			Phone no ▶ (214) 871- 7500	

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

┌Yes ┌No

(Expenses \$

including grants of \$

) (Revenue \$

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		No
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		No
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? <i>If</i> "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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
C	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		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

	,			
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b-24d and complete Schedule K. If "No," go to line 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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? 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		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		No
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		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	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 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
la.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 15			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
la l	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 on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes	
a	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		No
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	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 line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.]		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
	13c			_
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	, ,	

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

Se	ection A. Governing Body and Management					
		Г		Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	40				
b	Enter the number of voting members included in line 1a, above, who are independent	40				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with other officer, director, trustee, or key employee?		2		Νo	
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?	t	3		No	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 wa filed?	_	4		No	
5	Did the organization become aware during the year of a significant 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 governing body?		7a		No	
b	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 year by the following	the				
а	The governing body?	. <u>.</u> L	8a	Yes		
b	Each committee with authority to act on behalf of the governing body?	· · L	8b	Yes		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No	
	ection B. Policies (This Section B requests information about policies not required by the Intervenue Code.)	ernal				
		_		Yes	No	
	Does the organization have local chapters, branches, or affiliates?	-	10a		Νo	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapte affiliates, and branches to ensure their operations are consistent with those of the organization?		10b			
11a	11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	. <u>L</u> :	12a	Yes		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give to conflicts?		12b	Yes		
С	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		
13	Does the organization have a written whistleblower policy?	[13	Yes		
14	Does the organization have a written document retention and destruction policy?	· · <u> </u>	14	Yes		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and deci	sion?				
а	The organization's CEO, Executive Director, or top management official	· • [15a	Yes		
b	Other officers or key employees of the organization	· [:	15b	Yes		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement taxable entity during the year?		16a		Νo	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate it					
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard to organization's exempt status with respect to such arrangements?	ľ	16b			
Se	ection 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 Form 1023 (or 1024 if applicable), 990, and 990-T (50 (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request	1(c)				

- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization SHERRY ANDRUS
 325 N ST PAUL ST 700

<u>Part VIII</u> 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 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, and **current** key employees 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 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 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, 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

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 neither the organ	nization nor any r	sated any current officer, director, or trustee								
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
See Additional Data Table										

\$100,000 in compensation from the organization $\blacktriangleright 0$

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) Average hours per		tion (that a	•		II		(D) Reportable compensatior from the	(E) Reportable compensatio		Estima amount o	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (V 2/1099-MISC	/- organization:	s	from organizat relat organiza	the ion and ed
See A	ddıtıonal Data Table												
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								Ļ			_		
1b 	Sub-Total						· ·	•			\dashv		
d	Total (add lines 1b and 1c) .						•	-	1,995,51	1	0	:	205,422
2	Total number of individuals (inc \$100,000 in reportable comper	ludıng but not lın	nıted to	thos	e lıs		above) who	received more	than			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sc				e, k	ey e	mploy	ee, o	r highest compe	nsated employee			1
4	For any individual listed on line					nens	• sation	• and o	other compensat	ion from the	3		No
•	organization and related organiz												1
5	Individual	receive or accri		• nanca	tion	• fror	n anv	• unrel	ated organization	n or individual for	4	Yes	
J	services rendered to the organiz									· ·	5		No
	ection B. Independent Cor												
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent o	contra	ctors	that received m	ore than			
	Na	(A) me and business ad	dress						De	(B) escription of services		(C Comper	
NONE												, ==	
	Total number of independent cont	ractors (includir	a but n	ot lin	outor	l to	those	lictor	d above) who rec	erved more than			

orm 99							Pag	ge 9
Part \	/111 1	Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
, grants mounts	b	Federated campaigns 1a Membership dues 1b Fundraising events 1c						513, or 514
Contributions, gifts, grants and other similar amounts	d e f	Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$		411,785				
a Co	-	Total. Add lines 1a-1f	.		411,785			
Program Service Revenue	b	REGISTRATION SERVICE HOUSING RESERV REV MEMBERSHIP DUES & ADMINISTRATION FEES		900099 900099 900099	50,893 4,952 981,607	·		
Service	d e	FEES & CONTRACTS FROM GOVERNMENT AGEN	CIES	900099	12,067,439			
rogram	f	All other program service revenue						
	3	Total. Add lines 2a-2f	s, interest ►		13,104,891 12,473 0			12,473
	6a b c	Royalties	eal	(II) Personal	0			
	b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)		(II) Other	0			
Other Kevenue	8a	Net gain or (loss)	<u> </u>					
- - -	С	Less direct expenses I Net income or (loss) from fundraising e	vents 🏲	10,624	0			
	b c	Less direct expenses Net income or (loss) from gaming activ	b	•	10,624			
	b	Gross sales of inventory, less returns and allowances . a Less cost of goods sold b Net income or (loss) from sales of inve	ntory 🏲		0			
-	11a	Miscellaneous Revenue SUBLEASE INCOME ROYALTY INCOME		Business Code 900099 541860	·		6,555	45,89
		PARTNERSHIPS AND SPONSORSHIPS All other revenue		900099	506,315 134,577	,		
		Total revenue. See Instructions			693,339			
	14	iocal revenue. See Instructions	. •		14,233,112	13,745,783	6,555 rm 990 (20	

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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 no	ot include amounts reported on lines 6b, o, 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 $$ See Part IV $,$ line 21 $$	0	·		· ·			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0						
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0						
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors, trustees, and key employees	947,394						
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						
7	Other salaries and wages	4,664,398						
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	170,570						
9	Other employee benefits	482,925						
10	Payroll taxes	371,844						
а	Fees for services (non-employees) Management	0						
b	Legal	42,101						
C	Accounting	13,240						
d	Lobbying	0						
e	Professional fundraising services See Part IV, line 17	0						
f	Investment management fees	0						
g	Other	746,474						
12	Advertising and promotion	923,563						
13	Office expenses	934,948						
14	Information technology	0						
15	Royalties	0						
16	Occupancy	537,702						
17	Travel	903,611						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0						
19	Conferences, conventions, and meetings	80,275						
20	Interest	45,412						
21	Payments to affiliates	0						
22	Depreciation, depletion, and amortization	135,238						
23	Insurance	52,776			<u> </u>			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)							
а	WRITING / SPECIAL PROJECTS	2,287,995						
b	CREATIVE / PRODUCTION	163,432						
c	OTHER EXPENSES	327,439						
d								
e								
f	All other expenses							
25	Total functional expenses. Add lines 1 through 24f	13,831,337						
26	Joint costs. Check here ▶ ┌ If following							
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a							
	combined educational campaign and fundraising solicitation							

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			636,019	1	1,168,894
	2	Savings and temporary cash investments			2,063,504	2	1,511,032
	3	Pledges and grants receivable, net				3	_
	4	Accounts receivable, net			899,776	4	1,081,161
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	employees, and				
		Schedule L			5		
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing ensponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	rs, and				
S S		Schedule L				6	
Assets	7	Notes and loans receivable, net			2,721,811	7	2,606,256
⋖	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		70,033	9	73,387	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	2,272,723			
	b	Less accumulated depreciation	10b	2,001,364	213,989	10c	271,359
	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			1,851,466	15	1,751,466
	16	Total assets. Add lines 1 through 15 (must equal line 34)			8,456,598	16	8,463,555
	17	Accounts payable and accrued expenses .			1,248,042	17	1,387,009
	18	Grants payable		18			
	19	Deferred revenue	2,706,940	19	2,588,862		
	20	Tax-exempt bond liabilities				20	
Se	21	Escrow or custodial account liability Complete Part IV of Schedule	₽D.	•		21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties		•	1,436,707	23	1,044,540
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			482,702	25	459,162
	26	Total liabilities. Add lines 17 through 25			5,874,391	26	5,479,573
5		Organizations that follow SFAS 117, check here ▶ 🗸 and comp	lete lir	nes 27			
e)		through 29, and lines 33 and 34.					
lan	27	Unrestricted net assets			2,582,207	27	2,983,982
Balance	28	Temporarily restricted net assets				28	
Fund	29	Permanently restricted net assets				29	
Fui		Organizations that do not follow SFAS 117, check here ▶ ┌ and	d com	olete			
2		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .	•			31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			2,582,207	33	2,983,982
	34	Total liabilities and net assets/fund balances			8,456,598	34	8,463,555

Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		14,2	233,11
2	Total expenses (must equal Part IX, column (A), line 25)	2		13,8	831,33
3	Revenue less expenses Subtract line 2 from line 1	3			401,77
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,5	582,20
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2,9	983,98
Pai	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII			୮	-
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
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 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

Software ID: Software Version:

EIN: 75-2456622

Name: Dallas Convention & Visitors Bureau

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

				_		_			
(B) Average hours		tıon (che	′)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation
week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
3 0	Х		х				0	0	0
3 0	Х		х				0	0	0
3 0	Х		х				0	0	0
3 0	Х		х				0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
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3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
3 0	Х						0	0	0
	A verage hours per week	Average hours per week 3 0	Average hours per week 3 0	Average hours per week 3 0	Average hours per week	Average hours Position (check all that apply) Week Position (check all that apply) Week Position (check all that apply) Position	Average hours per week	A verage hours per week	Average Position (check all that a pply) Position Check all that al

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and I	Independ	ent Co	ntr	act	ors					
(A) Name and Title	(B) Average hours		tion (that a	che)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
NATHAN MOORE DIRECTOR	3 0	Х						0	0	0
RON NATINKSY DIRECTOR	3 0	x						0	0	0
RICARDO ORTIZ DIRECTOR	3 0	Х						0	0	0
GUILLERMO PERALES DIRECTOR	3 0	Х						0	0	0
KENT RATHBUN DIRECTOR	3 0	X						0	0	0
AL ROJAS	3 0	X						0	0	0
DIRECTOR ALISSA SALAS										
DIRECTOR RICK SORRELLS EDD	3 0	Х						0	0	
DIRECTOR	3 0	Х						0	0	0
MERRILL SQUIRES DIRECTOR	3 0	Х						0	0	0
KEN THORNTON DIRECTOR	3 0	Х						0	0	0
ROBERTO VAN GEENEN DIRECTOR	3 0	X						0	0	0
TONY VEDDA DIRECTOR	3 0	Х						0	0	0
JERRY WALKER DIRECTOR	3 0	Х						0	0	0
PEGGY WEAVER DIRECTOR	3 0	Х						0	0	0
MARK WOELFFER DIRECTOR	3 0	Х						0	0	0
PHILLIP JONES PRESIDENT/CEO	50 0			Х				512,575	0	36,889
SHERRY ANDRUS SECRETARY/VP ADMIN	50 0			Х				157,723	0	19,308
MATTHEW A JONES TREASURER/CFO	50 0			Х				233,360	0	28,350
F ROSS CRUSEMAN	50 0				Х			227,615	0	24,868
SENIOR VP MARKETING CASSANDRA MATEJ	50 0				Х			197,895	0	28,405
SENIOR VP SALES/SERVICE CHERYL RICHARDS	50 0					Х		116,429	0	
VP STRATEGIC ALLIANCES KEVIN OWENS	50 0					Х		133,636	0	10,747
MARY ROSENBOHM	50 0					X		128,646		
REGIONAL DIRECTOR OF SALES ALAN SIMS	50 0					X		142,569	0	
DIRECTOR OF SALES PATRICIA TOWELL	50 0					X		145,063		
DIRECTOR OF CITYWIDES	300		l			^		113,003		

DLN: 93493192009112

OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

chiai i cvende service F Attacii to	roilli 990. F See Separate ilistructions.				
Name of the organization Dallas Convention & Visitors Bureau		Emp	loyer identification	numbe	r
		75-2	2456622		
Part I Organizations Maintaining Donor organization answered "Yes" to Form		Funds	or Accounts. C	omplet	e if the
<u> </u>	(a) Donor advised funds	(b) Funds and othe	raccour	nts
. Total number at end of year					
Aggregate contributions to (during year)					
Aggregate grants from (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor ac funds are the organization's property, subject to th				Yes	┌ No
Did the organization inform all grantees, donors, ar used only for charitable purposes and not for the b conferring impermissible private benefit			r purpose _	Yes	┌ No
Part II Conservation Easements. Complet	e if the organization answered "Yes	" to Form	n 990, Part IV, lı	ne 7.	
Purpose(s) of conservation easements held by the Preservation of land for public use (e g , recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a que easement on the last day of the tax year	ation or pleasure) Preservation of Preservation of	fa certified	cally importantly land in the control of the contro		ı
cusement on the last day of the tax year			Held at the End	l of the	Year
a Total number of conservation easements		2a	ridia at tild Elle	or the	. cu.
b Total acreage restricted by conservation easemen	ts	2b			
c Number of conservation easements on a certified h		2c			
d Number of conservation easements included in (c)	, ,	2d			
Number of conservation easements modified, trans the taxable year Number of states where property subject to conse			e organızatıon durı	ng	
Does the organization have a written policy regard enforcement of the conservation easements it hold		andling of		Yes	┌ No
Staff and volunteer hours devoted to monitoring, in					
Amount of expenses incurred in monitoring, inspec			g the year ► \$		
Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?			·	Yes	┌ No
In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation eas	of the footnote to the organization's financ			es	
art III Organizations Maintaining Collect Complete if the organization answered			ner Similar Ass	sets.	
.a If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its	ld for public exhibition, education or rese	earch in fu			,
b If the organization elected, as permitted under SFA historical treasures, or other similar assets held for provide the following amounts relating to these items	r public exhibition, education, or researc				
(i) Revenues included in Form 990, Part VIII, line	1		► \$		
(ii) Assets included in Form 990, Part X			► \$		
If the organization received or held works of art, hi following amounts required to be reported under SF		s for finan			
a Revenues included in Form 990, Part VIII, line 1	-		▶ \$		

b Assets included in Form 990, Part X

Pari	Titl Organizations Maintaining Co	llections of Ar	t, His	tori	cal Ti	reasu	res, or C	the	r Similar Ass	sets (continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of th	he fol	owing	that are	e a significa	ant us	se of its collect	ion	
а	Public exhibition		d	Γ	Loan	or excl	nange prog	rams			
b	Scholarly research		e	\sqcap	Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co	allections and expla	ain hoi	w the	v furthe	er the o	rganization	ı's ex	emnt nurnose u	า	
	Part XIV										
5	During the year, did the organization solicition assets to be sold to raise funds rather than t									_ Yes	□ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ızatıor			<u> </u>		
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						or other ass	ets r		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follov	vıng t	able		-				
							-		Am	ount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	,					Г	_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1									
Pa	rt V Endowment Funds. Complete	f the organizatio	n ans	wer	ed "Ye						
		(a)Current Year	(b) Prior	Year	(c) Tw	o Years Back	(d) ¹	Three Years Back	(e) Four	Years Back
1a	Beginning of year balance							4			
b	Contributions							-			
C	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as						-		
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 🕨										
С	Term endowment ▶										
3a	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that	are hel	d and a	dmınıstere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations							•	3a(i		
_	(ii) related organizations								3a(i		
	If "Yes" to 3a(II), are the related organizatio	•						•	<u>3b</u>		
4 Dor	Describe in Part XIV the intended uses of the tVI Investments—Land, Building:					100 D-	rt V line	10			
Fell	t vi investments—Land, Bunding	s, and Equipme	iiit. S							. T	
	Description of investment				Cost o		(b) Cost or basis (oth		(c) Accumulated depreciation	1 (d)	Book value
1a	Land		•								
b I	Buildings									\perp	
c l	Leasehold improvements					0	15	8,955	141,49	95	17,460
d I	Equipment					0	1,32	1,041	1,219,32	23	101,718
						0	79	2,727	640,54	16	152,181
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B), line	10(c).,)					271,359
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colu	mn (B _,), line	10(c).,)		Ī	► Schedule D	(Form	

(a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	>	
Part VIII Investments—Program Related.	See Form 990. Part X. line 13	
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X		
(a) Des	cription	(b) Book value
(1) RENT DEPOSITS		51,466
(2) PREPAID RENT		1,700,000
Total (Column (b) should agual Form 000, Part V, cal (P) lu	20.15.)	1 751 466
Total. (Column (b) should equal Form 990, Part X, col.(B) III Part X Other Liabilities. See Form 990, Part		▶ 1,751,466
(a) December of Legheleter		
	(b) A mount	
Federal Income Taxes	0	
DEFERRED SUPPORT	440,907	
DEFERRED RENT	18,255	
	+	
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	▶ 459,162	
(- 1 475,102	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,233,11
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	13,831,33
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	401,77
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	92,23
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	92,23
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	494,01
_	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	14,325,35
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	92,23
3	Subtract line 2e from line 1	3	14,233,11
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	14,233,11
Par	XIIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Ret	urn
1	Total expenses and losses per audited financial statements	1	13,923,57
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	- -	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
е	Add lines 2a through 2d	2e	92,23
3	Subtract line 2e from line 1	3	13,831,33
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	1	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	13,831,33
Da	rt XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Identifier	Return Reference	Explanation
FIN 48 (ASC 740)	FORM 990, SCHEDULE D, PART X, LINE 2	FOLLOWING IS THE TEXT FROM THE FOOTNOTES OF THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS The Organization is exempt from federal income tax under 501(c)(6 of the United States Internal Revenue Code, except to the extent it has unrelated business income For the years ended September 30, 2011 and 2010, unrelated business income did not result in any material net taxable income, therefore no provision for income tax has been provided in the accompanying financial statements. The Organization is required to file an annual Form 990-T with the United States Internal Revenue Service for any unrelated business income. In 2010, the Organization adopted the guidance in accounting for uncertainty in income taxes. This guidance requires the evaluation of tax positions taken or expected to be taken in the course of preparing the Organization's tax returns to determine whether the tax positions are more likely than not of being sustained by the applicable tax authority. Tax positions not deemed to meet the more likely than not threshold would be recorded as a tax benefit or expense in the current year. As of September 30, 2011 and 2010, the Organization had no uncertain tax positions. The Organization is relying on its tax-exempt status and its adherence to all applicable laws and regulations to preserve that status. However, the conclusions regarding accounting for uncertainty in income taxes will be subject to review and may be adjusted at a later date based on factors including, but not limited to, ongoing analysis of tax laws, regulations, and interpretations thereof. The adoption did not have a material impact on the Organization. The Organization recognizes interest and penalties, if any, related to uncertain tapositions as income tax expense. The Organization's informational returns are generally subject to examination for three years after the later of the due date or date of filing. As a result, the Organization is no longer subject to income tax examinations by tax authorities for years prior to 2008.

DLN: 93493192009112

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Dallas Convention & Visitors Bureau	Employer identification number
	75-2456622
Part I Questions Regarding Compensation	

			Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of the following t			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant in	· · · · · · · · · · · · · · · · · · ·		
		e or residence for personal use		
		ness use of personal residence		
	<u> </u>	ub dues or initiation fees		
	Discretionary spending account Personal services	(e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written reimbursement orprovision of all the expenses described above? If "No," comp	lake Denk III to sombon	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expofficers, directors, trustees, and the CEO/Executive Director, regarding the ite		Yes	
3	Indicate which, if any, of the following the organization uses to establish the co organization's CEO/Executive Director Check all that apply			
	✓ Compensation committee ✓ Written employme			
	☐ Independent compensation consultant ☐ Compensation sui	I		
	Form 990 of other organizations Approval by the b	pard or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a or a related organization	with respect to the filing organization		
а	Receive a severance payment or change-of-control payment from the organiza	tion or a related organization? 4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement	plan? 4b		Νο
c	Participate in, or receive payment from, an equity-based compensation arrange	ement? 4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amour	its for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the revenues of	n pay or accrue any		
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III		ĺ	
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the net earnings of	n pay or accrue any		
а	The organization?	6a		
b	Any related organization?	6b		
	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 the organization payments not described in lines 5 and 6? If "Yes," describe in Part III	on provide any non-fixed 7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to subject to the initial contract exception described in Regs section 53 4958-4 in Part III			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption p section 53 $4958\text{-}6(c)^{?}$	rocedure described in Regulations		

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 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		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) PHILLIP JONES	(I) (II)	322,575 0	190,000 0	0	12,250 0	24,639 0	549,464 0	
(2) SHERRY ANDRUS	(I) (II)	129,223 0	28,500 0	0	6,338 0	12,970 0	177,031 0	
(3) MATTHEW A JONES	(I) (II)	184,360 0	49,000 0	0	8,123 0	20,227 0	261,710 0	
(4) F ROSS CRUSEMAN	(I) (II)	185,115 0	42,500 0	0	8,057 0	16,811 0	252,483 0	
(5) CASSANDRA MATEJ	(I) (II)	154,895 0	43,000 0	0	8,302 0	20,103 0	226,300 0	
(6) ALAN SIMS	(I) (II)	113,634 0	28,935 0	0	5,679 0	6,098 0	154,346 0	
(7) PATRICIA TOWELL	(I) (II)	112,538 0	32,525 0	0	5,281 0	6,096 0	156,440 0	
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

Identifier	Return Reference	Explanation
Benefits to Listed	Form 990, Schedule J,	The organization provides a wellness benefit for 24HR fitness for all employees if they choose to use it, and a YMCA membership for Phillip Jones, President/CEO These benefits are taxable since they are reimbursed on their paycheck for the benefit
Persons	Part I, Line 1 (a)	

Schedule J (Form 990) 2010

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2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990 or 990-EZ

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization
Dallas Convention & Visitors Bureau

75-2456622

	ldentifier	Return Reference	Explanation
I	Form 990 Review Process	Form 990, Part VI, Line 11	The Form 990 is provided to the board upon request by Sherry Andrus

ldentifier	Return Reference	Explanation
Compliance with Written Conflict of Interest Policy		Annually, employees receive a revised Policy and Procedures Manual and must sign a form stating they have read and understand all policies and guidelines set forth in the manual if something is brought to the attention of the officers and directors, it is investigated and appropriate action is taken

ldentifier	Return Reference	Explanation
Compensation Review Of Management	Section B, Line 15 (a) and 15(b)	The Finance Committee reviews the President/Chief Executive Officer's goals and sets the annual compensation. All other employees are reviewed by their managers in a formal compensation review process based on performance by goals and objectives. The VP of Administration reviews all rated forms for consistency of ratings across the organization. The Executive VP reviews questionable ratings and both review those with the managers for further backup and explanation or corrections are made.

ldentifier	Return Reference	Explanation
Documents Available to Public	Section C, Line 19	The organization makes its governing documents, conflict of interest policy, and financial statements available to the public by accepting requests in writing and scheduling an appointment to review the requested documents