

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

A F	or the	2012 calendar year, or tax year beginning $10/01$, 2012, and ending	_		09/3	0, 20 13			
		C Name of organization DALLAS TOURISM PUBLIC IMPROVEMENT DISTRICT CORPORATION	D E	mployer ide	ntificatio	n number			
D Ch	eck if appli	61-168	9405						
	Address change	Doing Business As							
	Name ch	elephone nu	ımber		-				
Х	Initial re	Initial return 325 NORTH ST. PAUL STREET 700 (214) 57							
	Termina	City, town or post office, state, and ZIP code							
	Amende	Gross receipt	s \$	11,45	9,717				
X	Applicat pending	F Name and address of principal officer HAROLD RAPOZA	H(a)	Is this a grou	p return for	Yes	X		
	. ,	325 NORTH ST. PAUL ST., #700 DALLAS, TX 75201	Н(b)	affiliates? Are all affiliat	tes includer	12 Yes			
1 7	Tax-exen	npt status 501(c)(3) X 501(c) (6) ◀ (insert no) 4947(a)(1) or 527		If "No," attac	halist (se	e instructions)			
J	Nebsite	▶ WWW.DTPID.COM	H(c)	Group exemp	otion numbe	er 🕨			
K	orm of	organization X Corporation Trust Association Other ▶ L Year of fo					· T>		
Pai		Summary				3			
\Box		riefly describe the organization's mission or most significant activities							
		N SUPPPORT OF DALLAS' EFFORT TO BE A TOP 5 DESTINATION	FOR						
Governance		ONVENTIONS AND TOURISM, THE DTPID'S PRIMARY PURPOSE IS		JANCE 2	ĀND				
E		ROMOTE BUSINESS WITHIN THE HOTEL AND TOURISM INDUSTRY I							
Š	_	heck this box I if the organization discontinued its operations or disposed of more than							
					I I		9		
න්	J 19	umber of voting members of the governing body (Part VI, line 1a)			3		9		
Activities	4 N	umber of independent voting members of the governing body (Part VI, line 1b)			4				
ᇵ	5 T	otal number of individuals employed in calendar year 2012 (Part V, line 2a)			5				
nue Ac	6 T	otal number of volunteers (estimate if necessary)			6				
	7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12			7a				
\rightarrow	b N	et unrelated business taxable income from Form 990-T, line 34			7b				
]			Pri	or Year		Current	rear		
익	8 C	ontributions and grants (Part VIII, line 1h)			0				
eu (9 P	rogram service revenue (Part VIII, line 2g)			0	11,45	∂, 717		
Revenue	10 Ir	vestment income (Part VIII, column (A), lines 3, 4, and 70)			이				
	11 C	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 10 EIVED:			0				
1	12 T	otal revenue - add lines 8 through 11 (must equal Panto [II, column (A), line 12)			0	11,45	€,717		
	13 G	rants and similar amounts paid (Part IX, column (A), 19 1-3AUG 1 9 2014			0				
		enefits paid to or for members (Part IX, column (A), Ine4)			0		-		
ွ	15 9	planes other compensation employee henefits (Part IV cold Por AD 17-2-15 (OT			o				
-se	16a P	rofessional fundraising fees (Part IX, column (A), line (1e)			0		-		
Expenses	h T	rofessional fundraising fees (Part IX, column (A), line 11e).			\rightarrow				
ωĵ	-	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			0	11,45	717		
		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)			0	11,45			
				———	0	11,75	7, 111		
	19 R	evenue less expenses Subtract line 18 from line 12				F-4-6V			
Net Assets or Fund Balances	20 -	}	eginning	of Current Y	ear	End of Ye			
Bala	20 T	otal assets (Part X, line 16)					9,936		
발		otal liabilities (Part X, line 26)	_		0	87	9,936		
		et assets or fund balances Subtract line 21 from line 20			0				
Pai		Signature Block							
Und	er penal correct	ties of perjury, I declare that I have examined this return, including accompanying schedules and statement and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a	nts, and to	the best of	my know	vledge and i	selief, it		
	T	April 1	TIY KITOWICE	1 0 /	1				
eia.	.	Miller 10 (fones		8/1	<u>'4] [4</u>	; 			
Sig:		V Signature of officer	·	/Date/	/				
ner	e	Matthew A. JOHS EUP/CFO							
		Type or print name and title							
		Print/Type preparer's name Preparer's signature Date	1	Check	if PTIN	••			
Paid		BRUCE LEVI Sure 70 8/14/	<i> </i>	self-employe	ed	P00047	409		
Prep	1 5	urm's name ► LANE GORMAN TRUBITT, PLLC	Eum'	s EIN 🕨		44330			
Use	опіу 📙	Firm's address > 2626 HOWELL STREET, SUITE 700 DALLAS, TX 75204-4064	Phon			71-750	0		
Mav		6 discuss this return with the preparer shown above? (see instructions)		6110			T		
			· · · · ·	<u></u>	للننث		No		
rorb	-aperw	ork Reduction Act Notice, see the separate instructions.				Form 99	U (201		

77584.300

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

Form 990 (2012)

Page 4

Par	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		i —	
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		 	
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated			x
04	employees? If "Yes," complete Schedule J	23		
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a	L	Х
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		<u> </u>
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1		
	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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
_		20-		x
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	201		x
	Schedule L, Part IV	28b		_^
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	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31		- `
55	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	10 Note: The Control of the Control	J 30		

0111				age e
Par				
	Check if Schedule O contains a response to any question in this Part V		• • •	لسان
		استندمت	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	4	**	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		***	
С		100	496	Ž.
	reportable gaming (gambling) winnings to prize winners?	1c		77.
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.	***		
	Statements, med for the calendar year ending with or within the year covered by this return.	4		l
Đ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
2 -	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a	1	Х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		 ^`
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
40	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		x
b	If "Yes," enter the name of the foreign country ▶	384s	*	
_	See instructions for 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	, ,	x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
	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 as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
	Organizations that may receive deductible contributions under section 170(c).		2. ~ T	34.0
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		127.4	. 19
	and services provided to the payor?	7a	ļ <u></u>	
	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		-
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		. `
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	-
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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	15	۱.	78.
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	300		,
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		
10	Section 501(c)(7) organizations. Enter	7.		' .
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
11	Section 501(c)(12) organizations. Enter	,		
	Gross income from members or shareholders	ļ. "į	,,	
D	Gross income from other sources (Do not net amounts due or paid to other sources	133	* 1	***
42.	against amounts due or received from them)	122	1 st	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		-4.,,
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	**		To Section
_	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O			·
b	Enter the amount of reserves the organization is required to maintain by the states in which] '	
_	the organization is licensed to issue qualified health plans		١.	
С	Enter the amount of reserves on hand	<u> -</u>	:	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х

14b

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х Did the organization delegate control over management duties customarily performed by or under the direct 3 х supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 X 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, x 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8b is there any officer, director, 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Nο Yes 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х [11a 11a Has the organization provided a complete 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 Х 12a 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Х 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." Х 12c Х 13 13 14 Did the organization have a written document retention and destruction policy?............ 14 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 decision? x 15b 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 X If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safequard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_NONE 17 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶MATTHEW JONES 325 NORTH ST. PAUL STREET, STE 700 DALLAS, TX 75201 214-571-1000

F

rui	111	J	30	1/2	·	12)
Б	٠.	i	Ň.	/11	Г	

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 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

· -					^\				<u> </u>	
(A) Name and Title	(B) Average hours per week (list any	officer and a director/trustee)				ıs both	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) FRED EULER	1.00									
VICE CHAIRMAN/TREASURER		x		х				0	o	
(2) HAROLD RAPOZA	1.00		\vdash							
DIRECTOR	0	Х) o	0	
(3) MARK WOELFFER	1.00		\vdash						-	
SECRETARY	-	Х		Х				0	o	
(4) RAYMOND S. HAMMER	1.00									
CHAIRMAN	0	Х		Х				0	0	
(5) MICHAEL D. MCGILLIGAN	1.00									
DIRECTOR	0	Х	1					0	0	
(6) JOHN EVERETT DIRECTOR	1.00	х						0	0	
(7) DARRYL JETT	1.00	 	\vdash							<u> </u>
DIRECTOR	-	Х					Ì	0	0	
(8) LARRY MCAFEE	1.00		t				<u> </u>			
DIRECTOR		x						l o	o	
(9) ROBERTO VAN GEENEN	1.00									
DIRECTOR	-	X						l 0	0	
(10) PHILLIP J. JONES	1.00		T		\vdash					 ·
EX-OFFICIO	0	Х			İ			0	0	
(11)									-	
(12)	- 									
(13)	- 									
(14)	 				_					

Part VII Section A. Officers, Directors, Tro	ustees, Ke	y En	plo	ye	es,	and I	Higl	hest Compensat	ed Employees	(continue	d)
. (A) Name and title	(B) Average hours per week (list any hours for	box,	unle: er an	Pos heck ss pe	rson Irect	e than c	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	n am	(F) timated nount of other pensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	org:	om the anization d related inizations
						:					
							-				
				-							
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	<u></u>						> 10	0 0 0		0 0 0	0 0 0
reportable compensation from the organization		(-, ***					V N-
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schede	er, directo	or, or chund	tru	uste ual	e,	key e	emp	loyee, or highest	compensated	3	Yes No
4 For any individual listed on line 1a, is the organization and related organizations graindividual	sum of rep eater than	ortab \$15	le c	om 007	pen	satioi "Yes	n ar 6," (nd other compens	sation from the	-	x
5 Did any person listed on line 1a receive or	accrue co	mpen	satı	on 1	fron	n any	uni	related organization	on or individual		_
for services rendered to the organization? If "Ye Section B. Independent Contractors	es, compie	te Scr	eau	iie J	TOF	sucn	pers	son	· · · · · · · · · · · · · · · · · · ·	5	X
Complete this table for your five highest com- compensation from the organization. Report of year	pensated ii compensation	ndepe	nde the	ent o	con	tracto lar ye	rs t ar e	hat received more ending with or with	than \$100,000 in the organizati	of on's tax	-
(A) Name and business add	fress							(B) Description of se	rvices	(C) Compens	ation
NONE											
							-				
2. Total number of independent contract (aniudiae t		1,			4 L -		atad about t	received :-		
2 Total number of independent contractors (in						thos ∩	e li	sted above) who	received 3-		

PAGE 8

Par	t VIII	Statement of Rever Check if Schedule O co		nse to any ques	tion in this Part VII	I		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grant and similar amounts not included Noncash contributions included Total Add lines 1a-1f	1b 1c 1d 1d 1e 1s, above 1f 1					See
Program Service Revenue	2a b c d	HOTEL ASSESSMENT FEES		Business Code 900099	11,459,717.	11,459,717.		
Progr	f g	All other program service rev	<u> </u>	<u> ▶</u>	11,459,717.	2 - 4 24 , 2		
	3 4 5	Investment income (including other similar amounts) Income from investment of the Royalties	ax-exempt bond p	oroceeds ▶	0 0			
	6a b c d	Gross rents		(II) Other			,	
	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)						u
Other Revenue	8a	Gross income from fundra events (not including \$ of contributions reported on See Part IV, line 18	lising line 1c)					
Othe	b c 9a	Less direct expenses Net income or (loss) from fur Gross income from gaming a See Part IV, line 19	ndraising events activities a	· · · · · · · · · · · · · · · · · · ·	Control of the contro			
	10a	Less direct expenses Net income or (loss) from ga Gross sales of invent returns and allowances	aming activities . ory, less a					
	b c	Less cost of goods sold Net income or (loss) from sa Miscellaneous Rever	les of inventory.	Business Code			•	
	11a b c d	All other revenue Total. Add lines 11a-11d .			11 450 717	 		

	ction 501(c)(3) and 501(c)(4) organizations mu	st complete all columns	s. All other organizati	ons must complete colu				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX								
	not include amounts reported on lines 6b, 7b, 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 United States See Part IV, line 21.	0						
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0						
3	Grants and other assistance to governments, organizations, and individuals outside the United States 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	0						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	O						
7	Other salaries and wages	0						
8	Pension plan accruals and contributions (include section	o						
9	401(k) and 403(b) employer contributions)	0						
10	Payroll taxes	0						
11	Fees for services (non-employees)	O						
a b	Management	0						
С	Accounting	0						
	Lobbying	0						
	Professional fundraising services See Part IV, line 17 Investment management fees	0		_				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0						
12	Advertising and promotion	0						
13	Office expenses	0						
14 15	Information technology	0						
16	Royalties	0						
17	Travel	0						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	o						
19	Conferences, conventions, and meetings	0						
20	Interest	0						
21 22	Payments to affiliates	0						
23	Insurance	0						
24	Other expenses Itemize expenses not covered							
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column							
	(A) amount, list line 24e expenses on Schedule ()							
	PROGRAM SERVICE FEES	11,442,217.	 					
b	COLLECTION FEES	17,500.		-				
d	· [
е	All other expenses	11 450 313						
2 <u>5</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	11,459,717.						
	fundraising solicitation Check here ☐ if following SOP 98-2 (ASC 958-720)	o						

JSA 2E 1052 1 000

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X

		Check if Schedule O contains a response to any question in this Part	<u>X</u>	<u> </u>
			(A) Beginning of year	(B) End of year
	1 C	Cash - non-interest-bearing	Q 1	0
	2 S	Savings and temporary cash investments	Q 2	0
	3 P	Pledges and grants receivable, net	Q 3	0
ł	4 A	Accounts receivable, net	Q 4	879,936.
	5 L	oans and other receivables from current and former officers, directors,		
		rustees, key employees, and highest compensated employees		
	C	Complete Part II of Schedule L oans and other receivables from other disqualified persons (as defined under section	Q 5	0
	4 a	oans and other receivables from other disqualified persons (as defined under section 1958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	Q 6	0
ets	7 N	Notes and loans receivable, net	0 7	0
Assets	8 Ir	nventories for sale or use	Q 8	0
⋖	9 P	Prepaid expenses and deferred charges	0 9	0
1		and, buildings, and equipment cost or		
		other basis Complete Part VI of Schedule D 10a		
- 1		ess accumulated depreciation	q 10c	0
1		nvestments - publicly traded securities		0
	2 Ir	nvestments - other securities See Part IV, line 11		0
	3 Ir	nvestments - program-related See Part IV, line 11	0 13	0
- 1		ntangible assets		0
- 1		Other assets See Part IV, line 11		0
- 1	6 T	otal assets. Add lines 1 through 15 (must equal line 34)		879,936.
		Accounts payable and accrued expenses	0 17	879,936.
	8 G	Grants payable		0
- 1	19 D	Deferred revenue		0
2	20 T	ax-exempt bond liabilities	0 20	0
<u>ဖ</u> ျဉ်	21 E	scrow or custodial account liability Complete Part IV of Schedule D	0 21	0
Liabilities		oans and other payables to current and former officers, directors,		 -
g		rustees, key employees, highest compensated employees, and		
::: <u> </u>		Isqualified persons Complete Part II of Schedule L	d 22	0
2	23 S	Secured mortgages and notes payable to unrelated third parties	0 23	0
2		Insecured notes and loans payable to unrelated third parties	0 24	0
2		Other liabilities (including federal income tax, payables to related third		
		parties, and other liabilities not included on lines 17-24) Complete Part X		
1		of Schedule D	q 25	0
2		otal liabilities. Add lines 17 through 25	Q 26	879,936.
ses	O	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.		
E 2		Inrestricted net assets	Q 27	0
E Z	28 T	emporarily restricted net assets	C 28	0
[2	29 P	Permanently restricted net assets	0 29	0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34		
र्घ 3	30 C	Capital stock or trust principal, or current funds	30	
Net Assets	31 P	Paid-in or capital surplus, or land, building, or equipment fund	31	
Ž 3	32 R	Retained earnings, endowment, accumulated income, or other funds	32	
a 3	3 T	otal net assets or fund balances	Q 33	0
3	34 T	otal liabilities and net assets/fund balances	0 34	879,936.

	33, Column (B))			
art	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u> </u>
		Form	990	(2012

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

20**12** Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

DALLAS TOURISM PUBLIC IMPROVEMENT DISTRICT

Employer identification number

COI	PORATION			61-1669405
Pa	Organizations Maintaining Donor Adorganization answered "Yes" to Form	vised Funds or Other Similar Funds o 990, Part IV, line 6		·
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			·
3	Aggregate grants from (during year)			·
4	Aggregate value at end of year			·
5	Did the organization inform all donors and donor	advisors in writing that the assets held in	n dono	r advised
	funds are the organization's property, subject to the	-		F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6	Did the organization inform all grantees, donors, a			
•	only for charitable purposes and not for the bene			
	conferring impermissible private benefit?			1 1 1 1
Pa				
1	Purpose(s) of conservation easements held by the		• • • • • • • • • • • • • • • • • • • •	
	Preservation of land for public use (e.g., rec		of an h	nistorically important land area
	Protection of natural habitat	L L		ertified historic structure
	Preservation of open space		0. 0.	Trained motorio di dotare
2	Complete lines 2a through 2d if the organization	neld a qualified conservation contribution i	n the f	orm of a conservation
_	easement on the last day of the tax year			
	, .			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easemen		L .	
С	Number of conservation easements on a certified		1	
d	Number of conservation easements included in (
	historic structure listed in the National Register.		2d	
3	Number of conservation easements modified, tra			by the organization during the
	tax year ▶			, ,
4	Number of states where property subject to cons	ervation easement is located ▶		
5	Does the organization have a written policy regar	ding the periodic monitoring, inspection, h	andling	g of
	violations, and enforcement of the conservation e			
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation ea	semer	nts during the year
	>			
7	Amount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation easeme	ents du	iring the year
	▶ \$	•		-
8	Does each conservation easement reported on li	ne 2(d) above satisfy the requirements of s	ection	170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	• • •		1 1 1 1
9	In Part XIII, describe how the organization reports			
	balance sheet, and include, if applicable, the text	of the footnote to the organization's finan	cial sta	itements that describes the
	organization's accounting for conservation easem	ents		

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

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 (ASC 958), 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

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 (ASC 958) relating to these items

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

Schedule D (Form 990) 2012

Part III

Par	till Organizations Maintaining C	ollections o	f Art, His	torical	Treasu	ıres,	or Ot	her Sim	ilar Ass	ets (con	tınued)
`3	Using the organization's acquisition, ac collection items (check all that apply)	cession, and	other recor	_				_	are a sigr	nificant u	se of its
а	Public exhibition		d _	Loan	or exch	ange	prograi	ns			
b	Scholarly research		e	Other				. -			
С	Preservation for future generations	\$		_							
4	Provide a description of the organization	n's collections	s and expla	ain how t	they fu	rther	the or	ganization	's exemp	t purpose	ın Part
	XIII				•			_	•	•	
5	During the year, did the organization soli	cit or receive o	donations o	f art. hist	orical tr	reasu	res. or	other simi	lar		
	assets to be sold to raise funds rather tha									Yes	No
Par	Escrow and Custodial Arran line 9, or reported an amount	gements. C	omplete i	f the org							
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?									Yes	☐ No
Ь	If "Yes," explain the arrangement in Part 2	XIII and comp	lete the foli	owing tab	ole				_		
								-	Amount		
С	Beginning balance					1c					
đ	Additions during the year					1d					
е	Distributions during the year					1e					
f	Ending balance					1f					
2a	Did the organization include an amount of	on Form 990,	Part X, line	217						Yes	No
b	If "Yes," explain the arrangement in Part 2	XIII Check he	re if the ex	planation	has be	en pr	ovided	ın Part XIII			
Par	t V Endowment Funds. Complete										
	(a)	Current year	(b) Prio	r year	(c) Tw	vo year	s back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance										··
b	Contributions										· · · · · ·
С	Net investment earnings, gains,										
	and losses										
d	Grants or scholarships					~					
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses				 						
g	End of year balance										
2	Provide the estimated percentage of the	current vear e	nd balance	(line 1a	column) (a))	held as	L			
a	Board designated or quasi-endowment	>	%	, (i g,	00.0	. (2//					
b	Permanent endowment ▶	~	-"								
c	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c s		00%								
3a	Are there endowment funds not in the po	•		ition that	are hel	ld and	d admir	netered for	the		
	organization by		no organiza		are ner		J GGIIIII	iisterea ioi	uic .	ſ⊽	es No
	(i) unrelated organizations									3a(i)	65 140
	(ii) related organizations								• • • • •	3a(ii)	
b	If "Yes" to 3a(ii), are the related organization									3b	
4	Describe in Part XIII the intended uses of		•						• • • • •	30	
Par											
r au						Т			· · · · · ·		<u> </u>
	Description of property	(inves	other basis stment)	(b) Cost o	or other ba ther)	asis		cumulated eciation	(0	i) Book valu	e
1a	Land										
b	Buildings										
	Leasehold improvements	_									
	Equipment										
	Other	I									
Tota	I. Add lines 1a through 1e (Column (d) m	ust equal Forn	n 990, Part	X, columr	n (B), lin	ne 10	(c))	▶	<u> </u>		

Schedule D (Form 990) 2012

ວລ	20	- 2

Part VII	Investments - Other Securities. See	Form 990, Part X, line	12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mark	tion set value
(1) Financia	al derivatives			
	-held equity interests			
/ A \				
(D)				
(D)				
(E)		+		
(F)		+		···
(G)				
(H)				
(I)				
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII			: 13	
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)			Oct of child of year man	ter value
(2)				
(3)				
(4)				
(5)				
_(6)				
(7)				
(8)				· · · · · · · · · · · · · · · · · · ·
(9) (10)				
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X,	line 15		·····
		a) Description		(b) Book value
(1)				-
(2)				
(3)	W			
(4)	- 10 M At -		-1	
(5) (6)				
(7)				
(8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, col (B)			
Part X	Other Liabilities. See Form 990, Part	· · · · · · · · · · · · · · · · · · ·		
1.	(a) Description of liability	(b) Book value		*
	ral income taxes			*
(2)				•
(4)			 .	•
(5)				_
(6)				•
(8)				
_(9)				
(10)				
(11)	no (h) must occupi 5 000 D	, ,		
	nn (b) must equal Form 990, Part X, col (B) line 25			
liability for ur	ASC 740) Footnote In Part XIII, provide the text ncertain tax positions under FIN 48 (ASC 740) Ch	eck here if the text of the fo	ganizacion's financial statements that re otnote has been provided in Part XIII	eports the organization's

Schedule D (Form 990) 2012

Supplemental Information (continued) Part XIII

FIN 48 (ASC 740) FOOTNOTE

SCHEDULE D, PART X, LINE 2:

FOLLOWING IS THE TEXT FROM FOOTNOTES OF THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS:

THE ORGANIZATION HAS APPLIED FOR EXEMPTION FROM FEDERAL INCOME TAXES WITH THE INTERNAL REVENUE SERVICE UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE. THE ORGANIZATION BELIEVES IT MEETS THE REQUIREMENTS FOR EXEMPTION AND EXPECTS ITS APPLICATION TO BE APPROVED. AN APPROVED EXEMPTION WOULD MAKE THE ORGANIZATION NOT LIABLE FOR FEDERAL INCOME TAXES, EXCEPT TO THE EXTENT IT HAS UNRELATED BUSINESS INCOME. FOR THE YEAR ENDED SEPTEMBER 30, 2013, THE ORGANIZATION DID NOT HAVE ANY UNRELATED BUSINESS INCOME; THEREFORE, NO PROVISION FOR INCOME TAX HAS BEEN PROVIDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE ORGANIZATION WOULD BE REQUIRED TO FILE AN ANNUAL FORM 990-T WITH THE UNITED STATES INTERNAL REVENUE SERVICE FOR ANY UNRELATED BUSINESS INCOME.

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. ORGANIZATION HAD NO TAXABLE INCOME AND ALL FUNDS WERE EXPENDED TO SUPPORT ITS STATED MISSION. AS SUCH, NO PROVISION IS CONTAINED HEREIN FOR FEDERAL INCOME TAXES PAYABLE. THE ORGANIZATION IS RELYING ON ITS

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

ADHERENCE TO ALL APPLICABLE LAWS AND REGULATIONS AS WELL AS ITS EXPLICIT SUPPORT OF THE ORGANIZATION'S MISSION TO SUPPORT THIS ASSERTION. 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 ORGANIZATION RECOGNIZES INTEREST AND PENALTIES, IF ANY, RELATED TO UNCERTAIN TAX POSITIONS 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. AT SEPTEMBER 30, 2013, ALL TAX FILINGS FOR THE ORGANIZATION SINCE INCEPTION IN 2012 ARE AVAILABLE FOR EXAMINATION BY TAXING AUTHORITIES.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open To Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

DALLAS TOURISM PUBLIC IMPROVEMENT DISTRICT

Employer identification number 61-1689405

COD	PORATION	TX C
COR	FOWIT	714

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

1	(a) Name of disqualified person	(b) Relationship between disqualified person	(c) Description of transaction	(d) Correc		
•	(a) Name of disquained person	and organization	(c) Description of transaction	Yes	No	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
2		y the organization managers or disqualified pers	• •			
3	Enter the amount of tax, if any, on	line 2, above, reimbursed by the organization .	▶ \$			

organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or n the ization?	the principal amount		1 1				(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												<u> </u>
(4)												
(5)												
(6)												
(7)												
(8)						_						
(9)							-					
(10)												
Total					▶\$							

Grants or Assistance Benefiting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
10)				

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

Schedule L (Form 990 or 990-EZ) 2012

Schedule L (Form 990 or 990-EZ) 2012

Page 2

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	sted person and the transaction			aring of zation's nues?
				Yes	No
(1) PHILLIP JONES	DCVB OFFICER	11,442,217	PROGRAM SERVICE FEES		х
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)		1		1	
(10)					

Supplemental Information Part V

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

BUSINESS TRANSACTIONS WITH INTERESTED PERSONS

SCHEDULE L, PART IV, LINE 1:

PHILLIP JONES IS PRESIDENT & CEO OF THE DALLAS CONVENTION CENTER AND VISITORS BUREAU (DCVB) AND IS AN EX-OFFICIO DIRECTOR OF THE ORGANIZATION. ON AUGUST 1, 2012 THE ORGANIZATION AND DCVB ENTERED INTO A CONTRACT WITH A TERM OF 60 MONTHS FOR THE PROVISION OF VARIOUS SERVICES BY DCVB TO PROMOTE VISITATION AND HOTEL ACTIVITY THROUGH INCREASED CONVENTION, GROUP, AND LEISURE TRAVEL. IN CONNECTION WITH THE FORMATION OF THE DISTRICT, A SPECIAL ASSESSMENT FEE WAS APPROVED FOR ITS MEMBERS, HOTELS WITH MORE THAN 100 ROOMS SUBJECT TO THE CITY OF DALLAS' (THE CITY) HOTEL OCCUPANCY TAX, AT A RATE OF 2% OF ROOM RENTAL AMOUNTS. ASSESSMENTS, WHICH ARE PRESENTLY THE ONLY SOURCE OF REVENUE FOR THE ORGANIZATION, ARE REMITTED TO THE CITY CONTROLLER'S OFFICE AND THEN DIRECTLY TO DCVB FROM THE CITY TO FUND THE SERVICES UNDER THE CONTRACT MENTIONED ABOVE BETWEEN THE ORGANIZATION AND DCVB.

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

DALLAS TOURISM PUBLIC IMPROVEMENT DISTRICT

CORPORATION

Employer identification number 61-1689405

CONFLICT OF INTEREST POLICY

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

EACH BOARD MEMBER ANNUALLY SIGNS A CONFLICT OF INTEREST FORM TO DISCLOSE

ANY POTENTIAL MATERIAL FINANCIAL INTERESTS.

REVIEW OF FORM 990

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

THE FORM 990, INCLUDING ALL FORMS AND ATTACHMENTS, ARE PROVIDED TO

MEMBERS OF THE BOARD OF DIRECTORS BEFORE FILING WITH THE IRS.

AVAILABILITY OF DOCUMENTS TO THE PUBLIC

FORM 990, PART VI, SECTION C, LINE 19:

THE DTPID'S GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

COMPENSATION

FORM 990, PART VI, SECTION B, LINES 15(A) AND 15(B):

NO COMPENSATION IS PROVIDED TO THE OFFICERS AND BOARD OF DIRECTORS.

Name of the organization

DALLAS TOURISM PUBLIC IMPROVEMENT DISTRICT

Employer identification number 61-1689405

CORPORATION 61-16894

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

IN SUPPORT OF DALLAS' EFFORT TO BE A TOP 5 DESTINATION FOR CONVENTIONS AND TOURISM, THE DALLAS TOURISM PUBLIC IMPROVEMENT DISTRICT (DTPID) WENT INTO EFFECT IN AUGUST 2012. THE DISTRICT IS MADE UP OF HOTEL PROPERTIES IN THE CITY LIMITS OF DALLAS WITH 100 OR MORE HOTEL ROOMS. THESE PROPERTIES PAY A 2% ASSESSMENT ON THEIR OCCUPIED ROOMS FOR THE PURPOSE OF GENERATING FUNDS TO MARKET AND PROMOTE DALLAS AS A CONVENTION AND TOURISM DESTINATION.

THE INITIAL TERM FOR THE DTPID IS FIVE YEARS AND IS EXPECTED TO BRING IN APPROXIMATELY \$10 MILLION PER YEAR IN SUPPORT OF ITS MISSION. A BOARD OF DIRECTORS CONSISTING OF PARTICIPATING DTPID HOTELIERS DIRECT THE USE OF ALL FUNDS GENERATED. THE CITY OF DALLAS AUTHORIZED THE CREATION OF THE DISTRICT AND MUST ANNUALLY APPROVE A BUDGET. THE BOARD HAS CONTRACTED WITH THE CITY TO COLLECT THE FUNDS, AND WITH THE DALLAS CONVENTION AND VISITORS BUREAU TO ADMINISTER THE PROGRAMS AND USE OF FUNDS.