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DLN: 93493253001455

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

OMB No 1545-0047

Open to Public Inspectio<u>n</u>

foundations) ▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

generally cannot redact the information on the form Internal Revenue Service ► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u> A For the 2013 calendar year, or tax year beginning 11-01-2013 , 2013, and ending 10-31-2014 C Name of organization SALESMANSHIP CLUB OF DALLAS D Employer identification number B Check if applicable Address change 75-0717135 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 106 E TENTH ST E Telephone number Terminated (214)943-9700 Amended return City or town, state or province, country, and ZIP or foreign postal code DALLAS, TX 752032296 Application pending **G** Gross receipts \$ 10,674,154 Name and address of principal officer $\mathbf{H}(\mathbf{a})$ Is this a group return for TERI ISAACS Yes 🔽 No subordinates? 106 E TENTH ST SUITE 200 DALLAS,TX 75203 **H(b)** Are all subordinates included? Tax-exempt status **▽** 501(c)(3) **▽** If "No," attach a list (see instructions) Website: ► WWW SCDALLAS ORG H(c) Group exemption number ► K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1921 M State of legal domicile TX Part I Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE THE EDUCATIONAL AND MENTAL HEALTH SERVICES FOR CHILDREN AND THEIR FAMILIES IN THE **GREATER DALLAS AREA** Activities & Governance 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 18 4 18 f 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 24 Total number of volunteers (estimate if necessary) . . . 6 642 0 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 7a **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 9,849,950 10,091,329 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . 0 90,887 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 90,848 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 491,341 466,060 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 10,432,139 10,648,276 9,415,539 13 8,008,711 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines **15** 1,980,937 2,030,430 Expenses 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 367,952 **17** -391,502 -492,084 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,004,974 9,547,057 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -572.835 19 Revenue less expenses Subtract line 18 from line 12 1,101,219 Assets or d Balances **Beginning of Current End of Year** Year 16,117,423 20 Total assets (Part X, line 16) . 14,839,177 21 Total liabilities (Part X, line 26) . . . 4,173,370 4,207,733 22 Net assets or fund balances Subtract line 21 from line 20 10,665,807 11,909,690 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2015-09-10 Signature of officer Sign Here PATTY PICKARD SR DIR OF FINANCE Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | Rachel Spurlock P00520729 self-employed Paid Firm's name FCROWE HORWATH LLP Firm's EIN 🕨

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

Fırm's address ► 750 N ST PAUL SUITE 850

Preparer

Use Only

Phone no (214) 777-5200

✓ Yes No

Par			ice Accomplishments conse or note to any line in this	Part III	
1	Briefly describe	e the organization's missior	1		
DALL PRO	LAS AREA THRO VIDES THE SAL	UGH AN AFFILIATED NO ESMANSHIP CLUB YOUTH	N-PROFIT OPERATING CORF HAND FAMILY CENTERS (DB	CHILDREN AND THEIR FAMILIE PORATION THE SALESMANSHI A MOMENTOUS INSTITUTE) WI GRAMS AND FACILITY'S NEEDS	IP CLUB OF DALLAS ITH OPERATING FUNDS
2			ant program services during th	e year which were not listed on	
	If "Yes," descri	be these new services on S	chedule O		
3			make significant changes in ho		
	If "Yes," descri	be these changes on Scheo	lule O		
4	expenses Sect	ion 501(c)(3) and 501(c)(4		its three largest program service report the amount of grants and a l	
4a	(Code) (Expenses \$	8,595,421 including grants o	f \$ 8,008,711) (Revenue \$	466,060)
-	THE SALESMANSH INSTITUTE) , INC GRADE, MOMENT	IIP CLUB OF DALLAS (SCD) SPONS LUDING FAMILY THERAPY CENTE OUS SCHOOL IN OAK CLIFF BOTH	SORS THE PROGRAMS OF SALESMANSI RS IN OAK CLIFF AND NORTHWEST DA I LOCATIONS PROVIDE COUNSELING,	HIP CLUB YOUTH AND FAMILY CENTERS() ALLAS AND A LABORATORY SCHOOL FOR PARENT EDUCATION, PSYCHOLOGICAL A: EN AND THEIR FAMILY MEMBERS WERE /	THREE YEARS THROUGH FIFTH SSESSMENT, AND CASEWORK
4b	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
	-				
	•				
4c	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
4-1					
4d	Other program	n services (Describe in Sch	edule O)		
40	Other program (Expenses \$	·	edule O) luding 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)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
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		Νo
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		
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		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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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		Νo
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		Νo
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 and XII	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 and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," 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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	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 hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	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 through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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 IV			
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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 11b and 19?	20	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 11			
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	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b		
·	The rest, to line 3d of 3B, and the organization meronin occorrection.	5c		
	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		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		Νo
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	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 organization, have excess business holdings at any time during the year?	8		
9	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		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	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)			
12a	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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			
c	In which the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI 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			
			Yes	No
1 a	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request 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 ▶Patty Pickard 106 E Tenth St Ste 200 Dallas, TX 75203 (214) 943-9700

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t				Repor compen from organizat	(D) Reportable compensation from the organization (W-2/1099-MISC) (E) Reportable compensation from related organizations (W-2/1099-MISC)			compensatio V- from the			
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizati relate organiza	ed b
1b	Sub-Total		<u> </u>	<u> </u>	<u> </u>			<u></u>						
c	Total from continuation sheet	ts to Part VII, S	ection A	۸.				 -						
d	Total (add lines 1b and 1c) .							Þ		627,090		0		59,480
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an			
											-		Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee	, or highest	t compen • •	sated employee	3		No
4	For any individual listed on line organization and related organ													
	ındıvıdual					•		•				4	Yes	
5	Did any person listed on line 1 services rendered to the organ										or individual for	5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization	ve highest comp											ax vear	
		(A) Name and business									(B) cription of services		(C Comper	
												\top		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

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

Part V	ДÙ	•
	1a	
ants unts	ь	
Gra	c	
iffts, ar A	d	
imil	d e f	
rtion er S	f	
g ii	g	
Contributions, Giffs, Grants and Other Similar Amounts	g h	
even	2a b c d e f	
a H	c	
er w	d	
S =	е	
Program Service Revenue	f	
<u>~</u>	g 3	
	3	
	4 5	
	6a	
	b	
	c	
	d	
	7a	
	b	
	c	
	d	
Φ	8a	
E E		
Reveni		
<u> </u>	ь	
Other	c	
	9a	
	ь	
	10a	
	100	
	ь	
	С	
	11a	
	b	
	c	
	d	
	12	
	12	

20	013)						Page 9
	Statement of Revenue Check if Schedule O contains a re	spon	nse or note to any lu	ne in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
,	Federated campaigns	1a					
b	Membership dues	1b	388,528				
С	Fundraising events	1c					
d	Related organizations	1d	8,481,639				
e	Government grants (contributions)	1e					
F	All other contributions, gifts, grants, and similar amounts not included above	1f	1,221,162				j j
g	Noncash contributions included in lines						
h	1a-1f \$ Total. Add lines 1a-1f			10,091,329			
			Business Code				
a				0			
b		-		0			
С		_		0			
d		-		0			
e F	All other program service revenue	-		0	0	0	0
~				0		0	
y	Total. Add lines 2a-2f Investment income (including div	· ıdend		_			
	and other similar amounts). Income from investment of tax-exempt by	•	•	57,471			57,471
	Royalties	•	> locceeds	0			
	(ı) Real		(II) Personal				
a	Gross rents Less rental						
	expenses	0	0				
-I	or (loss)			0			
d	(i) Securities	·	(II) Other	, and the second			
а	Gross amount from sales of 59,29	4					
	assets other than inventory						
b	Less cost or other basis and 25,876	8					
С	Sales expenses Gain or (loss) 33,410	6	0				
d	Net gain or (loss)			33,416			33,416
а	Gross income from fundraising events (not including						
	\$ of contributions reported on line 1	_{c)}					
	See Part IV, line 18						
b	Less direct expenses	a b					
	Net income or (loss) from fundrais	ing e	events 🛌	0			
a	Gross income from gaming activit See Part IV, line 19	ies					
		а					
	Less direct expenses Net income or (loss) from gaming	b	/Ities L	0			
	Gross sales of inventory, less		vities				
	returns and allowances .	a					
Ь	Less cost of goods sold	ь					
С	Net income or (loss) from sales of	finve	-	0			
a	Miscellaneous Revenue CLUB ACTIVITIES		Business Code 713910	466,060	466,060		
b	- CLOB MOTIVITIES	-		0	·		
С		-		0			
d	All other revenue			0	0	0	0
•	Total. Add lines 11a-11d	•		466,060			
	Total revenue. See Instructions			10,648,276	466,060		5 2,5 2 1
							Form 990 (2013)

	,	
Part IX	Statement of Functional Expenses	
Section 50:	L(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)

<u> </u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	_	•	iete column (A)	
	Check if Schedule O contains a response or note to any line in this		(B)	 (c)	<u> </u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	7,986,932	7,986,932		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	21,779	21,779		
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	794,253		695,975	98,278
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	986,382		986,382	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	41,025		41,025	
9	Other employee benefits	87,574		87,574	
10	Payroll taxes	121,196		121,196	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	940		940	
c	Accounting	37,413		37,413	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	18,084		18,084	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	164,209	0	6,675	157,534
12	Advertising and promotion	43		,	43
13	Office expenses	241,513		197,324	44,189
14	Information technology	49,824		16,794	33,030
15	Royalties	0			
16	Occupancy	66,897		66,897	
17	Travel	0		55,637	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	68,736		53,705	15,031
20	Interest	97,500		97,500	,
21	Payments to affiliates	0		<u> </u>	
22	Depreciation, depletion, and amortization	151,613	55,473	96,140	
23	Insurance	32,700		32,700	
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 O)				
а	OVERHEAD ALLO CATIONS	-1,972,640		-1,972,640	
b	CLUB MEMBER SOCIAL FUNCTIONS	531,237	531,237		
c	FUNDRAISING EVENT RENTALS	19,847			19,847
d					
е	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	9,547,057	8,595,421	583,684	367,952
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

Par	tΧ	Check if Schedule O contains a response or note to any line in the	nis Pa	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,461,070	1	2,539,453
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			49,114	3	25,000
	4	Accounts receivable, net			33,678	4	18,829
	5	Loans and other receivables from current and former officers, diemployees, and highest compensated employees Complete Par Schedule L	rt II d	of	0	5	0
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and cand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	ontrik iploye	outing employers			0
20	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			30.065	9	37,442
	10a	Land, buildings, and equipment cost or other basis Complete	 10a	11,148,514	'		31,112
	ь	Less accumulated depreciation	10b	4,124,609	7,154,266	10c	7,023,905
	11	Investments—publicly traded securities			1,995,135	11	3,162,310
	12	Investments—other securities See Part IV, line 11			519,010	12	519,010
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			2,596,839	15	2,791,474
	16	Total assets. Add lines 1 through 15 (must equal line 34)			14,839,177	16	16,117,423
	17	Accounts payable and accrued expenses			118,313	17	130,265
	18	Grants payable			·	18	
	19	Deferred revenue			69,364	19	76,766
	20	Tax-exempt bond liabilities			'	20	<u> </u>
	21	Escrow or custodial account liability Complete Part IV of Scheo				21	_
ilities	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi	rs, tr				
Liabilit		persons Complete Part II of Schedule L			О	22	0
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	t X of	Schedule	2 095 603	25	4 000 703
	26	D			3,985,693 4,173,370	25	4,000,702 4,207,733
	26	Total liabilities. Add lines 17 through 25			4,173,370	26	4,207,733
Fund Balance	27	Unrestricted net assets			9,231,086	27	9,404,075
<u>छ</u>	28	Temporarily restricted net assets	•	•	1,434,721	28	2,505,615
<u> </u>	29	Permanently restricted net assets			.,,	29	2,000,010
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check he				23	
Ē		complete lines 30 through 34.	ic F	and			
5 or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ASS	32	Retained earnings, endowment, accumulated income, or other fu				32	
Net 1	33	Total net assets or fund balances			10,665,807	33	11,909,690
Z	34	Total liabilities and net assets/fund balances			14,839,177	34	16,117,423
				-	1,555,		Form 000 (2012)

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,6	548,276
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,!	547,057
3	Revenue less expenses Subtract line 2 from line 1	3		1,!	101,219
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		10,6	565,807
5	Net unrealized gains (losses) on investments	5			142,664
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		11,9	909,690
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	rate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	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?	е	За		
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		

Software ID: 13000248 **Software Version:** 2013v3.1

EIN: 75-0717135

Name: SALESMANSHIP CLUB OF DALLAS

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers,	Direct	ors, ers	Tru	ste	es, k	(ey	Employees, Higl	nest	
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-1413C)	2/1099-14130)	related organizations
G STACY SMITH	1 00	х		x				0	0	0
Dir thru 9/10/14 1st VP as of 9/11/14 GUY KERR	1 00									
1st VP thru 9/10/14	1 00	×		Х				0	0	0
JOHN M YEAMAN	1 00	х		Х				0	0	0
SECRETARY as of 9/11/14 M BLAIR ODEN	1 00									
Secretary thru 9/10/14 Dir as of 9/11/14	0	х		Х				0	0	0
MICHAEL A BARNETT	1 00	×		Х				0	0	0
TREASURER as of 9/11/14 MICHAEL P HAGGERTY	1 00									
2nd VP thru 9/10/14 President as of 9/11/14	2 00	Х		Х				0	0	0
ROBERT L MYERS	1 00	Х		Х				0	0	0
TREASURER thru 9/10/14 WILLIAM C WILSHUSEN	1 00									
President thru 9/10/14 Dir as of 9/11/14	4 00	Х		Х				0	0	0
WILLIAM H FLAHERTY	1 00	х		Х				0	0	0
DIR thru 9/10/14 2nd VP as of 9/11/14 BRUCE A SIFFORD	1 00									
DIRECTOR thru 9/10/14	0	Х						0	0	0
CHARLES D SPRADLEY	1 00	x						0	0	0
DIRECTOR thru 9/10/14 CHARLES R BIDDLE	3 00 1 00	<u></u>						_		
DIRECTOR as of 9/11/14	0	Х						0	0	0
DANIEL P NOVAKOV	1 00	x						0	0	0
DIRECTOR as of 9/11/14 FRANK SWINGLE	1 00									
DIRECTOR as of 9/11/14	0	Х						0	0	0
H DOUGLAS THOMPSON	1 00	х						0	0	О
DIRECTOR thru 9/10/14 JOSEPH I WORSHAM II	1 00									
DIRECTOR as of 9/11/14	0	Х						0	0	0
KEVIN L KELLEY DIRECTOR as of 9/11/14	1 00	×						0	0	o
MARTIN C PECK	1 00	X						0	0	0
DIRECTOR thru 9/10/14	0							Ů	0	0
PAT S BOLIN DIRECTOR thru 9/10/14	1 00	x						0	0	0
PATRICK MCEVOY	1 00	х						0	0	0
DIRECTOR as of 9/11/14	1 00							Ů	0	<u> </u>
PATTON C CHAPMAN DIRECTOR as of 9/11/14	1 00	×						0	0	0
RANDALL R ENGSTROM	1 00	X						0	0	0
DIRECTOR thru 9/10/14 ROBERT B SMITH	0									
DIRECTOR thru 9/10/14	1 00	х						0	0	0
STEPHEN N BARNES	1 00	X						0	0	0
DIRECTOR as of 9/11/14 STEVE CLAY	0							0	0	
DIRECTOR thru 9/10/14	1 00	х						0	0	0
DIRECTOR und 3/ 10/ 17					<u> </u>	1	1	1		<u> </u>

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (d nan o n is b	ne bo	ox, u an of	ınless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
TERRY KELLEY	1 00	х						0	0	0
DIRECTOR	2 00	^						0	0	0
TIMOTHY C UNDERWOOD JR	1 00	х						0	0	0
DIRECTOR thru 9/10/14	0	^						0	U	0
TODD C MEIER	1 00	х						0	0	0
DIRECTOR thru 9/10/14	0	^						0	0	0
WILLIAM B MCCLUNG	1 00	v							0	
DIRECTOR as of 9/11/14	1 00	Х						0	0	0
WILLIAM G MUNDINGER	1 00	.,								
DIRECTOR thru 9/10/14	1 00	Х						0	0	0
WILLIAM H VANDERSTRAATEN	1 00	.,								
DIRECTOR as of 9/11/14	0	Х						0	0	0
KENT SKIPPER	18 00			,,				256.625		22.470
CEO	22 00			Х				256,625	0	23,179
TERI ISAACS	22 00			,,				402 202		40.505
EXECUTIVE DIRECTOR	18 00			Х				192,303	0	18,585
JON DRAGO	5 00				.,			170.163		47 746
TOURNAMENT DIR	35 00				Х			178,162	0	17,716

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DLN: 93493253001455

OMB No 1545-0047

Public Charity Status and Public Support

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization SALESMANSHIP CLUB OF DALLAS

Employer identification number

75-0717135

	rt I			blic Charity Sta						nstructio	ns.
The	rganı	zatıon ıs	not a privat	te foundation becaus	eitis (Forl	ınes 1 throu	gh 11, check	only one bo	ox)		_
1	\sqcap	A chur	ch, convent	on of churches, or a	ssociation of	churches de	escribed in s e	ection 170(b	o)(1)(A)(i).		
2	\sqcap	A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Schedu	ıle E)				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descrı	bed in sectio	n 170(b)(1)	(A)(iii).		
4	Γ	A medi	cal researc	h organızatıon operat	ted ın conjun	ction with a	hospital des	cribed in sec	tion 170(b)(1)(A)(iii)	. Enter the
_	_			ty, and state							
5	ı	_	•	erated for the benefi	_	or universit	y owned or o	perated by a	a governmen	tai unit de	scribed in
_	_			(A)(iv). (Complete P				470(1)(4			
6	<u> </u>			local government or							
7	ı	_		at normally receives on 170(b)(1)(A)(vi).			support from	a governme	ental unit or fi	rom the g	eneral public
8	Г			described in section	•	•	nplete Part II	[)			
9	~			at normally receives					outions, mem	bership fe	es, and gross
		receipt	s from activ	ities related to its e	xempt function	ons—subject	t to certain e	xceptions, a	nd (2) no mo	re than 3	31/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from	businesses
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section 5	609(a)(2). (C	omplete Par	rt III)		
10	\sqcap	An orga	anızatıon or	ganized and operated	d exclusively	to test for p	oublic safety	See section	1 509(a)(4).		
11	Γ	one or the box	more public	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr oo <u>rti</u> ng organ	ibed in secti ization and c	on 509(a)(1 complete line) or section s 11e th <u>ro</u> u	509(a)(2) S gh 11h	ee sectio i	
e f g	ı	other the section of the ocheck to Since A	han foundatin 509(a)(2) organization this box August 17, 2 og persons?	ox, I certify that the ion managers and other received a written do 2006, has the organizatives the contractives the contractives the contractive of the contractive	her than one etermination ization accep	or more pub from the IRS	licly support S that it is a or contributi	ed organizat Type I, Type on from any	tions describe	ed in sect	orting organization,
				irectly or indirectly o governing body of th			_	persons des	scribed iii (ii)		Yes No
		•		er of a person descri		_				_	1g(ii)
			•	lled entity of a perso			shove?			_	1g(iii)
h				ng information about						<u> </u>	<u>-5()</u>
•) Nam suppor ganiza	rted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is t organizati col (i) list your gove docume	on in ted in rning	(v) Did you the organi in col (i) o suppor	zation of your	(vi) Is organizat col (i) org	ion in anized	(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	
Tota				_							

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20	013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	9,331,372	8,634,904	8,474,621	9,849,950	10	,091,329	46,382,176
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	450,743	443,914	432,100	491,341		466,060	2,284,158
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0
6	Total. Add lines 1 through 5	9,782,115	9,078,818	8,906,721	10,341,291	10	,557,389	48,666,334
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	3,213,304	2,585,082	2,770,845	3,652,230	4	,270,621	16,492,082
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0		0	0
c	Add lines 7a and 7b	3,213,304	2,585,082	2,770,845	3,652,230	4	,270,621	16,492,082
8	Public support (Subtract line 7c from line 6)							32,174,252
	ction B. Total Support							
Cale	ndar year (or fiscal year	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20	13	(f) Total
9	beginning in) ► A mounts from line 6	9,782,115	9,078,818	8,906,721	10,341,291	10	,557,389	48,666,334
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	32,030	80,331	88,573	53,199		57,471	311,604
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							0
C	Add lines 10a and 10b	32,030	80,331	88,573	53,199		57,471	311,604
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0			0
13	Total support. (Add lines 9, 10c, 11, and 12)	9,814,145	9,159,149	8,995,294	10,394,490		,614,860	48,977,938
14	First five years. If the Form 990 is check this box and stop here		·	, third, fourth, or	fifth tax year as a	501(c)(3) organı	ızatıon, ▶┌
	ection C. Computation of Pub Public support percentage for 2013			12 column (f)		T		
15				13, Column (1))		15		65 690 %
16	Public support percentage from 201		<u> </u>			16		67 060 %
<u>Se</u>	ction D. Computation of Inv				ın (f))	17		0.640.00
18	Investment income percentage from				(177	17		0 640 %
	33 1/3% support tests—2013. If the				line 15 is more t		<u> </u> 3% and 1	
	more than 33 1/3%, check this box a							

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction									
	Facts And Circumstances Test										
Retu	Return Reference Explanation										
		Schodulo A / Form 000 o	000 E7) 201								

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493253001455

OMB No 1545-0047

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

ntema	al Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .		Inspection					
	me of the organ		Employer identification number							
SAL	ESMANSHIP CLUB O	or Dallas		75-	0717135					
Ρā		izations Maintaining Donor Adv								
	organiz	zation answered "Yes" to Form 990	`	_	(h) Funda and atheres accounts					
	Total number a	at and of year	(a) Donor advised funds		(b) Funds and other accounts					
		tributions to (during year)		+						
	33 3	nts from (during year)								
		ue at end of year								
		zation inform all donors and donor adviso	L ors in writing that the assets held in dor	nor adv	ısed					
	funds are the o	organization's property, subject to the or	ganization's exclusive legal control?		┌ Yes ┌ No					
	used only for c	zation inform all grantees, donors, and d haritable purposes and not for the benef ermissible private benefit?								
a		ervation Easements. Complete if	the organization answered "Yes" t	to Forr	n 990, Part IV, line 7.					
	Preservation Protection	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space	or education)		rically important land area d historic structure					
		s 2a through 2d if the organization held a	a qualified conservation contribution in t	the forr	n of a conservation					
	easement on t	he last day of the tax year			Held at the End of the Year					
a	Total number o	of conservation easements		2a	Held at the End of the Year					
,		restricted by conservation easements		2b						
:	_	servation easements on a certified histo	oric structure included in (a)	2c						
i	Number of con	iservation easements included in (c) acc ure listed in the National Register		2d						
		servation easements modified, transferr	red, released, extinguished, or terminate	ed by th	ne organization during					
		·		,						
		tes where property subject to conservat								
	enforcement of	nization have a written policy regarding t f the conservation easements it holds?			「Yes					
	Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments (during the year					
		enses incurred in monitoring, inspecting	, and enforcing conservation easement	s durın	g the year					
	Does each con	nservation easement reported on line 2(of 0)(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı) Yes No					
	balance sheet,	lescribe how the organization reports col , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the organization's financia							
ē]	rt IIII Organ Compl	nizations Maintaining Collection ete if the organization answered "Y	s of Art, Historical Treasures, es" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.					
3	If the organiza works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	or rese	earch in furtherance of public					
•	If the organiza works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar assede the following amounts relating to thes	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statem	nent and balance sheet					
	(i) Revenues i	included in Form 990, Part VIII, line 1			▶ \$					
		luded in Form 990, Part X			► \$					
	If the organiza	ition received or held works of art, histor ints required to be reported under SFAS								
3	-	uded in Form 990, Part VIII, line 1	·		► \$					
					- + <u> </u>					
b	Assets include	ed ın Form 990, Part X			₽ \$					

Part	•••• Organizations Maintaining Co	llections of Art,	<u>Hist</u>	<u>oric</u>	<u>cal Trea</u>	sures, or O	<u>the</u>	<u>r Similar Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records	s, che	eck a	iny of the 1	following that a	re a	significant use of	ıts	
а	Public exhibition		d	Γ	Loan or e	xchange progr	ams			
b	Scholarly research		e	\sqcap	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	how	they	further th	ie organization	's ex	empt purpose in		
5	During the year, did the organization solicit of	r receive donations o	of art,	, hıst	torical trea	asures or other	sım			_
	assets to be sold to raise funds rather than t							<u>'</u>	Yes	│ No
Par	Part IV, line 9, or reported an an					ion answered	d "Y	es" to Form 990 —————	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	liary f	orco	ontributior	ns or other ass	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	ollowi	ng ta	able	_				
						-		Amou	nt	
С	Beginning balance					-	1c			
d	Additions during the year						1d			
e	Distributions during the year					-	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?					Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the e	explar	natio	n has bee	n provided in P	art :	×III		Γ
Pa	rt V Endowment Funds. Complete				d "Yes" t	o Form 990,	Par	t IV, line 10.		
		(a)Current year	(b) F	Prior y			_	Three years back (e	Four y	ears back
1a	Beginning of year balance	1,399,147			858,922	754,89	-	0		0
b	Contributions	25,110			355,048	5,30		721,812		
С	Net investment earnings, gains, and losses	208,076			259,010	163,51	2	86,040		
d	Grants or scholarships	68,388			60,354	51,73	4	52,953		
е	Other expenditures for facilities and programs	14,186			13,479	13,05	5			
f	Administrative expenses						_			
g	End of year balance	1,549,759			,399,147	858,92	2	754,899		0
2	Provide the estimated percentage of the curi	ent year end balance	e (line	1g,	column (a	i)) held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ► 28 000 %									
C	Temporarily restricted endowment ► 72 0 The percentages in lines 2a, 2b, and 2c shot	000 % uld equal 100%								
За	Are there endowment funds not in the posses	ssion of the organizat	ion th	nat a	re held an	d administered	for	the		
	organization by								Yes	No
	(i) unrelated organizations			•			•	3a(i) 3a(ii)		No No
ь	(ii) related organizations							Sa(II)		INO
4	Describe in Part XIII the intended uses of the	· · · · · · · · · · · · · · · · · · ·					•			<u> </u>
Par	t VI Land, Buildings, and Equipme	nt. Complete if th				nswered 'Yes	' to	Form 990, Part	IV, lır	ne
	11a. See Form 990, Part X, line : Description of property	10.			Cost or others (investmen			(c) Accumulated depreciation	(d) Bo	ok value
12	_and					6,775	046			6,775,046
	Buildings		ŀ			1,449		1,351,216		97,826
	_easehold improvements		_ }				,042	93,389		97,826
	Equipment		[,827	972,428		25,399
	7 th au		•			1,833		1,707,576		125,634
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		colun	nn (F	3), line 10/0		_			7,023,905
		,,		- \-	,, (· · ·		Schedule D (F		

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of va Cost or end-of-year	
(1)Financial derivatives		Cost of tha of year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. (See Form 990, Part X, line 13.	Complete if the organizati	on answered 'Yes' to Fo	orm 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of va	
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
Part IX Other Assets. Complete if the organizat (a) Desi		90, Part IV, line 11d See l	Form 990, Part X, line 15 (b) Book value
(1) SUPPLEMENTAL RTMT BENEFIT	•		933,939
(2) DUE FROM RELATED EXEMPT ENTITIES			1,857,535
Total. (Column (b) must equal Form 990, Part X, col.(B) line			2,791,474
Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25.	ganızatıon answered 'Yes'	to Form 990, Part IV, I	ine 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	(<u> </u>	
DEFERRED COMPENSATION	933,939	9	
DUE TO RELATED EXEMPT ENTITIES	66,763	3	
N/P TO SALESMANSHIP CLUB FDTN	3,000,000	0	
		_	
		†	
		4	
		7	
		-	
		4	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	4 ,000,702	2	
2. Liability for uncertain tax positions In Part XIII, provi			L ctatamanta that

	evenue per Audited Financial Statements With Revenue presend 'Yes' to Form 990, Part IV, line 12a.	er Ret	t urn Complete ıf
	r support per audited financial statements	1	10,800,230
	t not on Form 990, Part VIII, line 12		· · ·
	ments		
	acilities	1	
	3	1	
, , -		1	
		2e	151,954
, and the second		3	10,648,276
	0, Part VIII, line 12, but not on line 1	\vdash	10,040,270
	uded on Form 990, Part VIII, line 7b . 4a		
·	4b 0		
		1 4-	0
	4c. (This must equal Form 990, Part I, line 12)	4c 5	
	xpenses per Audited Financial Statements With Expenses		10,648,276
	swered 'Yes' to Form 990, Part IV, line 12a.	s per k	eturn. Complete
	audited financial statements	1	9,556,347
	t not on Form 990, Part IX, line 25		<u> </u>
	ocilities 2a 9,290		
		1	
· •		1	
		1	
		2e	9,290
-		3	9,547,057
	D, Part IX, line 25, but not on line 1:	 	9,547,037
	uded on Form 990, Part VIII, line 7b 4a		
	4b 0	1	
		1 1	٥
		4c	0 547 057
7 Total expenses Add lines 3 ar Part XIII Supplemental Inf	nd 4c. (This must equal Form 990, Part I, line 18)	5	9,547,057
	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		any additional
	Explanation		
Schedule D, Part V, Line 4, Intended uses of endowment funds Schedule D, Part X, Line 2, FIN 48	THROUGH THE SALESMANSHIP CLUB SCHOLARSHIP PROGRAM, TH HELP CLIENTS AND FORMER CLIENTS IMPROVE THEIR LIVES THROUGHIGHER EDUCATION AFTER SUBMITTING AN APPLICATION AND SINTERVIEWING AND MEETING ALL APPLICATION CRITERIA, FUND SCHOLARSHIP RECIPIENTS PAY FOR EDUCATION COSTS INCLUDIBOOKS AND OTHER PRE-APPROVED LINE THE CLUB IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTIO	DUGH TI SUCCES S ARE U ING TUI	HE PURSUIT OF SFULLY SED TO HELP TION, FEES,
(ASC 740) footnote	UNITED STATES INTERNAL REVENUE CODE (THE "CODE"), EXCEPT UNRELATED BUSINESS INCOME IN ADDITION, THE CLUB HAS BEE INTERNAL REVENUE SERVICE NOT TO BE A PRIVATE FOUNDATION OF SECTION 509(A) OF THE CODE FOR THE YEARS ENDED OCTOB THE CLUB HAD NO NET UNRELATED BUSINESS INCOME ACCORDI INCOME TAX HAS BEEN PROVIDED IN THE ACCOMPANYING FINAN REQUIRES THE EVALUATION OF TAX POSITIONS TAKEN OR EXPECTOURSE OF PREPARING THE CLUB'S TAX RETURN TO DETERMINE OF DOSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED BY AUTHORITY TAX POSITIONS NOT DEEMED TO MEET THE MORE LITHRESHOLD WOULD BE RECORDED AS A TAX BENEFIT OR EXPENSION OF UNRECOGNIZED BENEFITS ARE ZERO, WITH NO INTERIM ADDITIONS OF UNRECOGNIZED BENEFITS ARE ZERO, WITH NO INTERIM ADDITIONS TO PRESERVE THAT STATE ON CLUSIONS REGARDING ACCOUNTING FOR UNCERTAINTY IN ITERITOR OF TORVIEW AND MAY BE ADJUSTED AT A LATER DATE BAINCLUDING, BUT NOT LIMITED TO, ONGOING ANALYSIS OF TAX LATER PRETATIONS THEREOF THE CLUB RECOGNIZES INTEREST ARE LATED TO UNCERTAIN TAX POSITIONS AS INCOME TAX EXPENSIONS AS INCOME TAX EXPENSIONS AS INCOME TAX EXPENSIONS AS AFTER THE LATER OF THE DUE DATE OR DATE OF FILING AND LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAX AUPORTOR TO 2011	TO THE TO THE N WITHI BER 31, 2 NGLY, N NCIALS CTED TO WHETHE Y THE A KELY THE E IN THE AND EN TIONS, S AND I ATUS H INCOME AWS, RE AND PEN SE THE (AMINA IS A RES	E EXTENT IT HAS RMINED BY THE 2013 AND 2012, 10 PROVISION FOR TATEMENTS GAAP D BE TAKEN IN THE ER THE TAX PPLICABLE TAX HAN NOT E CURRENT YEAR A NDING AMOUNTS REDUCTIONS, OR TS ADHERENCE TO HOWEVER, THE E TAXES WILL BE I FACTORS GULATIONS, AND IALTIES, IF ANY, CLUB'S TION FOR THREE GULT, THE CLUB IS

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I

(Form 990)

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

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

► Attach to Form 990

OMB No 1545-0047

DLN: 93493253001455

Internal Revenue Service	► Inform	mation about Schedule I	(Form 990) and its inst	ructions is at <u>www.irs.</u>	.gov /form990.		Inspection
Name of the organization SALESMANSHIP CLUB OF DAL	LAS					Employer identi	ication number
						75-0717135	
 Does the organization main the selection criteria used Describe in Part IV the organization 	ntain records to subs I to award the grants ganization's procedu Ier Assistance to	orassistance?	e of grant funds in the l	Jnited States the United States		organization answere	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SALESMANSHIP CLUB YOUTH & FAMILY CENTERS INC 106 E 10TH ST DALLAS,TX 75203	75-1855620	501(C)(3)	7,961,932		·		SUPPORT FOR SOCIAL AND EMOTIONAL HEALTH PROGRAMS
(2) SALESMANSHIP CLUB CHARITABLE GOLF OF DALLAS INC 106 E 10TH ST SUITE 200 DALLAS,TX 75203	86-1118806	501(C)(3)	25,000				DESIGNATED CONTRIBUTION
2 Enter total number of sect	non 501(c)(3) and go	vernment organizations	listed in the line 1 table	e			. 2

Enter total number of other organizations listed in the line 1 table

Schedule I, Part I, Line 2,

grant funds

Procedures for monitoring use of

(a)Type of grant or assistance

(b)Number of

recipients

(f)Description of non-cash assistance

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

(d) A mount of

non-cash assistance

GRANTS ARE AWARDED SOLELY TO RELATED ORGANIZATIONS REVIEW OF RELATED ORGANIZATIONS' OPERATIONS AND FINANCIAL

(e)Method of valuation (book,

FMV, appraisal, other)

(c)A mount of

cash grant

(1) HOLIDAY GIFTS TO NEEDY STUDENTS		250		9,779	FM∨	HOLIDAY GIFTS				
(2) HOLIDAY GIFTS TO NEEDY FAMILIES		30		12,000	FMV	HOLIDAY GIFTS				
Part IV Supplemental In	format	ion. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.				
Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Return Reference Explanation										

STATEMENTS OCCURS ON A REGULAR BASIS BY MANAGEMENT AS WELL AS BOARD OF DIRECTOR MEETINGS

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DLN: 93493253001455

OMB No 1545-0047

Schedule J

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization SALESMANSHIP CLUB OF DALLAS

(Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

75-0717135

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Tax idemnification and gross-up payments Health or social club 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 policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts 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 pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)KENT SKIPPER CEO	(i) (ii)	248,744 0	0	7,881 0	15,125 0	8,053 0	279,803 0	0
(2)TERI ISAACS EXECUTIVE DIRECTOR	(i) (ii)	182,703 0	0	9,600 0	11,500 0	7,085 0	210,888	0
(3)JON DRAGO TOURNAMENT DIR	(i) (ii)	168,262 0	300 0	9,600 0	10,180 0	7,536 0	195,879 0	0

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

establish compensation of other employees

Form 990, Part VI, Sec C, Line 19, Required

documents available to the public

DIRECTOR

DLN: 93493253001455

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Inspection

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** SALESMANSHIP CLUB OF DALLAS 75-0717135 990 Schedule O, Supplemental Information Return Reference Explanation Form 990, Part VI, Sec A, Line 6, Classes of members or stockholders Form 990, Part VI, Sec A, Line 7a, Members or ACTIVE MEMBERS ARE MEMBERS IN GOOD STANDING WITH RESPECT TO REGULAR stockholders electing members of governing body ATTENDANCE, FUNDRAISIN G EFFORTS, AND PARTICIPATION ACTIVE MEMBERS SHALL BE ENTITLED TO ALL PRIVILEGES OF THE CL UB, INCLUDING THE RIGHT TO VOTE AND HOLD OFFICE AND THE RIGHT TO PARTICIPATE IN ALL CLUB A CTIVITIES LIFE MEMBERS ARE THOSE MEMBERS WHO HAVE SERVED AS AN ACTIVE MEMBER FOR A TOTAL OF 25 YEARS, OR ANY ACTIVE MEMBER SERVING 15 YEARS AND AT LEAST 65 YEARS OF AGE LIFE MEMB ERS SHALL BE ENTITLED TO ALL PRIVILEGES OF THE CLUB INCLUDING THE RIGHT TO VOTE AND HOLD O FFICE, AND THE RIGHT TO PARTICIPATE IN ALL CLUB ACTIVITIES ASSOCIATE MEMBERS **AREACTIVE M** EMBERS WHO HAVE SERVED AT LEAST 10 YEARS WHO CAN GIVE SATISFACTORY REASON WHY THEY CANNOT CONTINUE ACTIVE MEMBERSHIP YET DESIRE TO CONTINUE ASSOCIATION WITH THE CLUB ASSOCIATE MEM BERS SHALL BE ENTITLED TO ALL PRIVILEGES OF THE CLUB, EXCEPT THE RIGHT TO VOTE AND TO HOLD OFFICE HONORARY MEMBERSHIPS ARE AWARDED TO INDIVIDUALS WHO HAVE MADE SIGNIFICANT CONTRIB UTIONS TO THE BETTERMENT AND WELFARE OF THE COMMUNITY AT LARGE, OR WHO HAVE EVIDENCED AN I NTENSE INTEREST IN THE CLUB OR ITS ACTIVITIES AND HAVE SUPPORTED SUCH INTEREST IN A MATERI AL OR PERSONAL WAY HONORARY MEMBERS ARE ENTITLED TO ALL THE PRIVILEGES OF THE CLUB, EXCEP T THE RIGHT TO VOTE AND TO HOLD OFFICE. Form 990, Part VI, Sec A, Line 7b, Decisions ARTICLE VII, SECTION 3 - THE MEMBERS OF THE BOARD OF DIRECTORS SHALL BE ELECTED BY VOTE O requiring approval by members or stockholders F THE CLUB MEMBERS ENTITLED TO VOTE AND PRESENT ON ELECTION DAY ARTICLE XVII, SECTION 1 -THESE BYLAWS MAY BE ALTERED OR AMENDED IN WHOLE OR IN PART, OR REPEALED AND NEW BYLAWS MA Y BE ADOPTED UPON (I) THE AFFIRMATIVE VOTE OF AT LEAST TWO-THIRDS OF THE DIRECTORS OF TH E CLUB THEN IN OFFICE AT ANY MEETING OF THE BOARD OF DIRECTORS, IF AT LEAST SEVEN DAYS WRI TTEN NOTICE IS GIVEN OF AN INTENTION TO ALTER, AMEND OR REPEAL THESE BY LAWS OR TO ADOPT NE W BYLAWS AT SUCH A MEETING, AND SUCH NOTICE CONTAINS A STATEMENT OF THE NATURE OF THE PROP OSED AMENDMENT(S), AND (II) THE AFFIRMATIVE VOTE OF AT LEAST TWO-THIRDS OF THE MEMBERS OF THE CLUB ENTITLED TO VOTE AND PRESENT AT ANY REGULAR OR SPECIAL MEETING, SO LONG AS WRITTE N NOTICE OF THE PROPOSED AMENDMENT HAS BEEN PROVIDED TO ALL CLUB MEMBERS AT LEAST SEVEN DA YS IN ADVANCE OF THE MEETING, PROVIDED, HOWEVER, THAT NO AMENDMENT SHALL EVER BE MADE WHIC H WOULD OR MIGHT RESULT IN THE DIVERSION OF ANY FUNDS OR ASSETS OF THE CLUB TO ANY USE OR PURPOSE OTHER THAN THE CHARITABLE AND EDUCATIONAL PURPOSES FOR WHICH THE CLUB IS ORGANIZED OR WHICH WOULD OR MIGHT CONTRAVENE THE RESTATED CERTIFICATE OF FORMATION OF THE CLUB Form 990, Part VI, Sec B, Line 11b, Review of COPIES OF THE COMPLETED FORM 990 ARE DISTRIBUTED TO THE GOVERNING BODY FOR COMMENTS AND QU form 990 by governing body ESTIONS ANY CLARIFICATIONS OR CHANGES REQUIRED TO THE FINAL FORM WILL BE MADE AND RETURNE D TO THE GOVERNING BODY PRIOR TO FILING THE FORM Form 990, Part VI, Sec B, Line 12c, Conflict of ALL BOARD MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST interest policy QUESTIONNAIRE ON AN ANNU AL BASIS ALL POTENTIAL CONFLICTS ARE REVIEWED BY THE BOARD OF DIRECTORS PRIOR TO ENTERING INTO ANY CONTRACT MEMBERS ARE REQUIRED TO RECUSE FROM DISCUSSIONS AND VOTING WITH RESPEC T TO POTENTIAL CONFLICTS OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO COMPLY WITH PERSONNEL POLICY & PROCEDURES MANUAL THAT CONTAINS A CONFLICT OF INTEREST COMPONENT WITH A DUTY TO DISCLOSE POTENTIAL CONFLICTS AS THEY ARISE Form 990, Part VI, Sec B, Line 15a, Process to THE EXECUTIVE DIRECTOR'S SALARY IS ESTABLISHED USING THE FOLLOWING establish compensation of top management official PROCESSES AN INDEPENDE NT THIRD-PARTY COMPENSATION SURVEY OF SIMILAR NON-PROFIT ORGANIZATIONS IS CONDUCTED ANNUAL LY THE SALARIES AND BENEFITS ARE COMPARED TO OTHER ORGANIZATIONS FOR REASONABLENESS TOTA L SALARIES ARE REVIEWED BY THE FINANCE COMMITTEE. THE RECOMMENDED SALARY AND BENEFITS ARE APPROVED BY THE BOARD OF DIRECTORS DELIBERATIONS AND DECISIONS ARE CONTEMPORANEOUSLY DOCU MENTED Form 990, Part VI, Sec B, Line 15b, Process to THE COMPENSATION APPROVAL PROCESS FOR THE OTHER OFFICERS AND KEY

EMPLOYEES FOLLOWS THE SAME PROCEDURES DETAILED FOR THE EXECUTIVE

STATEMENTS ARE AVAILABLE UPON REQUEST

COPIES OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

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

DLN: 93493253001455

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2013

Related Organizations and Unrelated Partnerships

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization **Employer identification number** SALESMANSHIP CLUB OF DALLAS 75-0717135

Part I Identification of Disregarded Entities Complete	e if the organization a	answered "Yes" on	Form 990, Part	iv, iine 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income End	(e) I-of-year assets	(f) Direct controlling entity	_	
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	zations Complete if t	he organization an	swered "Yes" on	Form 990, Pa	rt IV, line 34 because	ıt had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity s (if section 501(d		Sectio (13) c	(g) on 512(controlle
(1) SALESMANSHIP CLUB FOUNDATION	SUPPORT	ТХ	501(C)(3)	11 - Type I	NA	Yes	No No
106 E 10TH ST SUITE 200							
DALLAS, TX 75203 75-2439715							
(2) SALESMANSHIP CLUB CHARITABLE GOLF OF DALLAS	FUNDRAISING	ТХ	501(C)(3)	7	SCD		No
106 E 10TH ST SUITE 200 DALLAS, TX 75203							
86-1118804 (3) SALESMANSHIP CLUB YOUTH AND FAMILY CENTERS	EDU/THERAPY	TX	501(C)(3)	11 - Type III - F	FI SCD	+	No
106 E 10TH ST SUITE 200							
DALLAS, TX 75203 75-1855620							
(4) SCF CHARITABLE PROPERTIES INC	HOLDING CO	TX	501(C)(3)	11 - Type III - F	FI SCD		No
106 E 10TH ST SUITE 200							
DALLAS, TX 75203 02-0721727				_		\bot	igspace

Cat No 50135Y

(a) Name, address, and EIN of related organization	Name, address, and EIN of		Name, address, and EIN of		me, address, and EIN of Primai		(b) mary activity Legal domicile (state or foreign country)	r entity	unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	j) eral or aging mer?	(k) Percentag ownersh
					514)			Yes	No		Yes	No					
]				
Identification of Related Org line 34 because it had one or m								swere	d "Yes	" on Form	990,	Part	IV,				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreig country)	n	(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share e of	(g) e of end -year ssets		(h) ercentage wnership	Section (b) cont	i) on 512 (13) rolled tity?	2				
		I		<u> </u>	1	<u> </u>			_		Yes		No				
									+				+				

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule								
1 D	ırıng the tax year, dıd the orgranızatıon engage ın any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No	
b	Gift, grant, or capital contribution to related organization(s)				1b	Yes		
c	Gift, grant, or capital contribution from related organization(s)				1 c	Yes		
d	Loans or loan guarantees to or for related organization(s)				1d		No	
e	Loans or loan guarantees by related organization(s)				1e	Yes		
f	Dividends from related organization(s)				1f		No	
g	Sale of assets to related organization(s)				1g		No	
h	Purchase of assets from related organization(s)				1h		No	
i	Exchange of assets with related organization(s)				1i		No	
j Lease of facilities, equipment, or other assets to related organization(s)								
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
I Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)				10		No	
р	Reimbursement paid to related organization(s) for expenses				1р	Yes		
q	Reimbursement paid by related organization(s) for expenses				1q	Yes		
r	Other transfer of cash or property to related organization(s)				1r		No	
s	Other transfer of cash or property from related organization(s)				1s		No	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved		
ee A	ditional Data Table							
		1						

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

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID: 13000248

Software Version: 2013v3.1

EIN: 75-0717135

Name: SALESMANSHIP CLUB OF DALLAS

Form 990, Schedule R, Part V - Transactions With Related Organizations

- orini ppoly concerning that the framework that the factor of game and the			•
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
SALESMANSHIP CLUB YOUTH AND FAMILY CENTERS	В	7,961,932	FMV
SALESMANSHIP CLUB CHARITABLE GOLF OF DALLAS	С	5,200,000	FMV
SALESMANSHIP CLUB FOUNDATION	С	3,281,639	FMV
SALESMANSHIP CLUB FOUNDATION	E	3,000,000	FMV
SALESMANSHIP CLUB FOUNDATION	Q	101,654	FMV
SALESMANSHIP CLUB CHARITABLE GOLF OF DALLAS	Q	1,467,988	FMV
SALESMANSHIP CLUB YOUTH AND FAMILY CENTERS	Q	225,579	FMV
SCF CHARITABLE PROPERTIES	Q	177,420	FMV
SALESMANSHIP CLUB YOUTH AND FAMILY CENTERS	Р	141,795	FMV