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## Return of Organization Exempt From Income Tax

2010

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue ServiceUnder 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 For the 2010 calendar year, or tax year beginning July 1, 2010, and ending June 30, 2011

B Check if applicable	C Name of organization Distributive Education Clubs of America Inc.	D Employer identification number 23-7079474
<input type="checkbox"/> Address change	Doing Business As DECA Inc.	
<input type="checkbox"/> Name change	Number and street (or P O box if mail is not delivered to street address) 1908 Association Drive	Room/suite
<input type="checkbox"/> Initial return	City or town, state or country, and ZIP + 4 Reston, VA 20191-1503	E Telephone number 703-860-5000
<input type="checkbox"/> Terminated		
<input type="checkbox"/> Amended return		G Gross receipts \$ 18,563,706
<input type="checkbox"/> Application pending	F Name and address of principal officer Edward L. Davis, address same as above.	H(a) Is this a group return for affiliates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

I Tax-exempt status  501(c)(3)  501(c) ( ) (insert no)  4947(a)(1) or  527

J Website: ► www.deca.org

K Form of organization  Corporation  Trust  Association  Other ►

L Year of formation

M State of legal domicile 1151

## Part I Summary

1	Briefly describe the organization's mission or most significant activities. DECA prepares emerging leaders and entrepreneurs in marketing, finance, hospitality and management.	
2	Check this box ► <input type="checkbox"/> 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) . . . . .	3 552
4	Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4 540
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a) . . . . .	5 9
6	Total number of volunteers (estimate if necessary) . . . . .	6 6,684
7a	Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a 0
b	Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b N/A
RECEIVED FEB 08 2012 OSC		Prior Year Current Year
8	Contributions and grants (Part VIII, line 1a) . . . . .	2,295,092 2,371,714
9	Program service revenue (Part VIII, line 2g) . . . . .	13,649,014 15,907,352
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	134,994 224,089
11	Other revenue (Part VIII, column (A), lines 5, 6a, 8c, 9c, 10c, and 11e) . . . . .	59,381 55,648
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,138,481 18,558,803
RECEIVED FEB 08 2012 OSC		Prior Year Current Year
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .	182,245 272,835
14	Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0 0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . .	501,337 405,429
16a	Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0 0
b	Total fundraising expenses (Part IX, column (D), line 25) ► . . . . .	
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . . .	14,693,021 16,914,123
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	15,376,603 17,592,387
19	Revenue less expenses Subtract line 18 from line 12 . . . . .	761,878 966,416
Beginning of Current Year		End of Year
20	Total assets (Part X, line 16) . . . . .	6,870,504 7,836,918
21	Total liabilities (Part X, line 26) . . . . .	0 0
22	Net assets or fund balances. Subtract line 21 from line 20 . . . . .	6,870,504 7,836,918

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	Signature of officer Edward L. Davis, Executive Director	Date 02-02-2012
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ►		Firm's EIN ►		
	Firm's address ►		Phone no		

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . .  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2010)

1917

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**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III 1 Briefly describe the organization's mission:

DECA prepares emerging leaders and entrepreneurs in marketing, finance, hospitality and management.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: \_\_\_\_\_) (Expenses \$ 14,864,754 including grants of \$ 272,835) (Revenue \$ 15,709,575)

192,592 students participated in skills contests related to their individual career goals in marketing and management. Scholarship, cash and recognitions are provided for accomplishments related to workplace and school-based learning.

4b (Code: \_\_\_\_\_) (Expenses \$ 1,780,209 including grants of \$ \_\_\_\_\_) (Revenue \$ 197,777)

DECA provides specific programs for the classroom teacher to use in student development and achievement.

The principles guiding the association's programs are curriculum related career skills, workplace experiences, community service and the development of business leadership capabilities.

4c (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4e Total program service expenses ► 16,644,963

**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 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2 ✓	
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 ✓	
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 ✓	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in 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 where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6 ✓	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7 ✓	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 ✓	
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 ✓	
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 ✓	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a ✓	
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 ✓	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c ✓	
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 ✓	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e ✓	
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 ✓	
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a ✓	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b ✓	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 ✓	
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a ✓	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b ✓	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15 ✓	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16 ✓	
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 ✓	
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 ✓	
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 ✓	
20 a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a ✓	
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b ✓	

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		✓
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 25		✓
a	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
b	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
c	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		✓
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		
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		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		✓
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):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		
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		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		
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		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		
a	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		
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		✓
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		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O		✓

**Part V Statements Regarding Other IRS Filings and Tax Compliance**  
 Check if Schedule O contains a response to any question in this Part V 

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b>	83
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	✓
<b>2a</b>	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>2a</b>	9
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	<b>2b</b>	✓
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	✓
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>	
<b>4a</b>	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)?	<b>4a</b>	✓
<b>b</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.	<b>5a</b>	✓
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	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?	<b>6a</b>	✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>	<b>7a</b>	✓
<b>a</b>	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?	<b>7b</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7c</b>	✓
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7d</b>	
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7e</b>	✓
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7f</b>	✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7g</b>	
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7h</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>8</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>9a</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>	<b>9b</b>	
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:	<b>10a</b>	
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10b</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:	<b>11a</b>	
<b>a</b>	Gross income from members or shareholders	<b>11b</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	<b>13a</b>	
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state?		
<b>b</b>	<i>Note.</i> See the instructions for additional information the organization must report on Schedule O.		
<b>c</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	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	✓
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>	

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

Check if Schedule O contains a response to any question in this Part VI

### Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year. **1a** 552  
**1b** 540

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** ✓

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** ✓

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? **4** ✓

5 Did the organization become aware during the year of a significant diversion of the organization's assets? **5** ✓

6 Does the organization have members or stockholders? **6** ✓

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? **7a** ✓  
**7b** ✓

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? **8a** ✓  
**8b** ✓

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  
 a The governing body? **9** ✓

b Each committee with authority to act on behalf of the governing body? **9** ✓

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** ✓

	Yes	No
1a	552	
1b	540	
2	✓	
3	✓	
4	✓	
5	✓	
6	✓	
7a	✓	
7b	✓	
8a	✓	
8b	✓	
9	✓	

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Does the organization have local chapters, branches, or affiliates? **10a** ✓  
 b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? **10b** ✓

11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? **11a** ✓  
 b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** ✓

12a Does the organization have a written conflict of interest policy? If "No," go to line 13. **12b** ✓  
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? **12c** ✓  
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. **13** ✓  
**14** ✓

13 Does the organization have a written whistleblower policy? **14** ✓  
**15** Does the organization have a written document retention and destruction policy? **15a** ✓  
**15b** ✓

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?  
 a The organization's CEO, Executive Director, or top management official **16a** ✓  
 b Other officers or key employees of the organization **16b** ✓  
 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 with a taxable entity during the year? **16a** ✓  
 b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **16b** ✓

	Yes	No
10a	✓	
10b	✓	
11a	✓	
12a	✓	
12b	✓	
12c	✓	
13	✓	
14	✓	
15a	✓	
15b	✓	
16a	✓	
16b	✓	

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **None**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website  Another's website  Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **Patrick Cheney, address and phone same as DECA Inc.**

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

Check if Schedule O contains a response to any question 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)					(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
		or Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) See attached continuation sheet.									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)					(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(17)									
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									
(26)									
(27)									
(28)									

1b Sub-total . . . . . ►	0	0	0
c Total from continuation sheets to Part VII, Section A . . . . . ►	444,683	0	0
d Total (add lines 1b and 1c) . . . . . ►	444,683	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 0

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	✓
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	✓
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	✓

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
None		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►

## **Part VIII Statement of Revenue**

			(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 Federated campaigns . . . . . b Membership dues . . . . . c Fundraising events . . . . . d Related organizations . . . . . e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f: \$	1a 1b 1,287,477 1c 59,807 1d 1e 673,440 1f 350,990 0				
	h Total. Add lines 1a-1f . . . . . ►		2,371,714			
Program Service Revenue		Business Code				
	2a Conferences	900099	15,709,575	15,709,575		
	b					
	c					
	d					
	e					
	f All other program service revenue	900099	197,777	197,777		
	g Total. Add lines 2a-2f . . . . . ►		15,907,352			
	3 Investment income (including dividends, interest, and other similar amounts) . . . . . ►		224,089			224,089
	4 Income from investment of tax-exempt bond proceeds ►					
	5 Royalties . . . . . ►					
	6a Gross Rents . . . . .	(i) Real	(ii) Personal			
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . . ►					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less: cost or other basis and sales expenses . . . . .					
	c Gain or (loss) . . . . .					
	d Net gain or (loss) . . . . . ►					
Other Revenue	8a Gross income from fundraising events (not including \$ 59,807 of contributions reported on line 1c). See Part IV, line 18 . . . . . a	2,036				
	b Less: direct expenses . . . . . b	4,903				
	c Net income or (loss) from fundraising events . . . ►		-2,867			-2,867
	9a Gross income from gaming activities. See Part IV, line 19 . . . . . a					
	b Less: direct expenses . . . . . b					
	c Net income or (loss) from gaming activities . . . ►					
	10a Gross sales of inventory, less returns and allowances . . . . . a					
	b Less: cost of goods sold . . . . . b					
	c Net income or (loss) from sales of inventory . . . ►					
	Miscellaneous Revenue	Business Code				
	11a Other revenues	900099	58,515			58,515
	b					
	c					
	d All other revenue . . . . .					
	e Total. Add lines 11a-11d . . . . . ►		58,515			
	12 Total revenue. See instructions. . . . . ►		18,558,803	15,907,352		279,737

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . . . .	175,688	175,688		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	97,147	97,147		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .				
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	159,761	117,189	29,949	12,624
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7 Other salaries and wages . . . . .	205,766	174,901	20,577	10,288
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	846	719	85	42
9 Other employee benefits . . . . .	15,297	13,022	1,530	765
10 Payroll taxes . . . . .	23,759	20,379	2,254	1,127
11 Fees for services (non-employees):				
a Management . . . . .	512,462	233,038	279,424	
b Legal . . . . .	21,434		21,434	
c Accounting . . . . .	56,660	500	56,160	
d Lobbying . . . . .				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees . . . . .	5,644		5,644	
g Other . . . . .	119,716	93,377	26,339	
12 Advertising and promotion . . . . .	33,243	22,883	5,981	4,378
13 Office expenses . . . . .	231,239	74,449	156,790	
14 Information technology . . . . .	63,525	40,851	22,674	
15 Royalties . . . . .				
16 Occupancy . . . . .	102,057	89,746	9,930	2,381
17 Travel . . . . .	461,363	340,753	120,610	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings . . . . .	14,881,936	14,864,754	17,182	
20 Interest . . . . .	1,118	1,009	109	
21 Payments to affiliates . . . . .	115,134	98,336	16,798	
22 Depreciation, depletion, and amortization . . . . .	2,411	2,194	217	
23 Insurance . . . . .	77,643	41,263	36,380	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a Miscellaneous expenses	228,537	142,786	72,598	13,153
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	17,592,387	16,644,963	902,665	44,758
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	4,575,779	1	5,589,701
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments—publicly traded securities	2,294,725	11	2,247,217
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	6,870,504	16	7,836,918
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		26	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,870,504	27	7,836,918
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances		33	
	34 Total liabilities and net assets/fund balances	6,870,504	34	7,836,918

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI 

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	18,558,803
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	17,592,387
3	Revenue less expenses. Subtract line 2 from line 1 . . . . .	3	966,414
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	6,870,504
5	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	5	0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	6	7,836,918

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .  
2b Were the organization's financial statements audited by an independent accountant? . . . . .  
c 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? \_\_\_\_\_  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

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? . . . . .  
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

	Yes	No
2a	✓	
2b	✓	
2c		
3a	✓	
3b		

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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.

OMB No 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

Distributive Education Clubs of America Inc.

Employer identification number

23-7079474

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 

a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other

e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.

f  If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . .

g  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .

(ii) A family member of a person described in (i) above? . . . . .

(iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .

h  Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(IV) Is the organization in col (I) listed in your governing document?	(V) Did you notify the organization in col (I) of your support?	(VI) Is the organization in col (I) organized in the U S?		(VII) Amount of support
					Yes	No	
(A)							
(B)							
(C)							
(D)							
(E)							
<b>Total</b>							

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 behalf . . . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
4 <b>Total.</b> 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 <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts 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 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>						► <input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14 . . . . .	15	%
16a <b>33 1/3% support test—2010.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .	►	<input type="checkbox"/>
b <b>33 1/3% support test—2009.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .	►	<input type="checkbox"/>
17a <b>10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .	►	<input type="checkbox"/>
b <b>10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .	►	<input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .	►	<input type="checkbox"/>

**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.)

**Section A. Public Support****Calendar year (or fiscal year beginning in) ►**

	<b>(a) 2006</b>	<b>(b) 2007</b>	<b>(c) 2008</b>	<b>(d) 2009</b>	<b>(e) 2010</b>	<b>(f) Total</b>
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,103,213	2,069,029	2,328,867	2,295,092	2,371,714	11,167,915
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 . . .	13,899,540	14,333,259	13,979,129	13,649,014	15,907,352	71,768,294
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . .						
<b>6 Total. Add lines 1 through 5 . . .</b>	<b>16,002,753</b>	<b>16,402,288</b>	<b>16,307,996</b>	<b>15,944,106</b>	<b>18,279,066</b>	<b>82,936,209</b>
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .						
<b>b</b> Amounts 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						
<b>c</b> Add lines 7a and 7b . . .						
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						<b>82,936,209</b>

**Section B. Total Support****Calendar year (or fiscal year beginning in) ►**

	<b>(a) 2006</b>	<b>(b) 2007</b>	<b>(c) 2008</b>	<b>(d) 2009</b>	<b>(e) 2010</b>	<b>(f) Total</b>
9 Amounts from line 6 . . . . .	16,002,753	16,402,288	16,307,996	15,944,106	18,279,066	82,936,209
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	315,683	129,933	148,796	194,375	291,323	1,080,110
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . .						
<b>c</b> Add lines 10a and 10b . . . . .	315,683	129,933	148,796	194,375	291,323	1,080,110
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						<b>84,016,319</b>
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	<b>99 %</b>
16 Public support percentage from 2009 Schedule A, Part III, line 15 . . . . .	<b>16</b>	<b>99 %</b>

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	<b>1 %</b>
18 Investment income percentage from 2009 Schedule A, Part III, line 17 . . . . .	<b>18</b>	<b>1 %</b>
<b>19a</b> <b>33 1/3% support tests—2010.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . ► <input checked="" type="checkbox"/>		
<b>b</b> <b>33 1/3% support tests—2009.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

**SCHEDULE D**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

OMB No 1545-0047

**2010**Open to Public  
Inspection

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

**Name of the organization**

Distributive Education Clubs of America Inc

**Employer identification number**

23-7079474

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements . . . . .

b Total acreage restricted by conservation easements . . . . .

c Number of conservation easements on a certified historic structure included in (a) . . . . .

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► -----

4 Number of states where property subject to conservation easement is located ► -----

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  
 ► -----

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
 ► \$ -----

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? . . . . .  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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 XIV, the text of the footnote to its financial statements that describes these items.

b 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:

(i) Revenues included in Form 990, Part VIII, line 1 . . . . . ► \$ -----  
 (ii) Assets included in Form 990, Part X . . . . . ► \$ -----

2 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:

a Revenues included in Form 990, Part VIII, line 1 . . . . . ► \$ -----  
 b Assets included in Form 990, Part X . . . . . ► \$ -----

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

<b>a</b> <input type="checkbox"/> Public exhibition	<b>d</b> <input type="checkbox"/> Loan or exchange programs
<b>b</b> <input type="checkbox"/> Scholarly research	<b>e</b> <input type="checkbox"/> Other _____
<b>c</b> <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

		Amount
<b>1c</b>		
<b>1d</b>		
<b>1e</b>		
<b>1f</b>		

2a Did the organization include an amount on Form 990, Part X, line 21? . . . . .  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	211,723	42,783	58,842		
<b>b</b> Contributions . . . . .	31,528	165,498	100		
<b>c</b> Net investment earnings, gains, and losses . . . . .	14,508	11,113	-12,459		
<b>d</b> Grants or scholarships . . . . .	13,700	7,700	3,700		
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .	34	22			
<b>g</b> End of year balance . . . . .	244,025	211,723	42,723		

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► 100 %  
 b Permanent endowment ► %  
 c Term endowment ► %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations . . . . .  
 (ii) related organizations . . . . .

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Yes	No
3a(i)	✓
3a(ii)	✓
3b	

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .					
<b>b</b> Buildings . . . . .					
<b>c</b> Leasehold improvements . . . . .					
<b>d</b> Equipment . . . . .					
<b>e</b> Other . . . . .					

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c.)) . . . . . ►

**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 valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►</b>		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►</b>		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►</b>	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►</b>	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

1 Total revenue (Form 990, Part VIII, column (A), line 12) . . . . .	1
2 Total expenses (Form 990, Part IX, column (A), line 25) . . . . .	2
3 Excess or (deficit) for the year. Subtract line 2 from line 1 . . . . .	3
4 Net unrealized gains (losses) on investments . . . . .	4
5 Donated services and use of facilities . . . . .	5
6 Investment expenses . . . . .	6
7 Prior period adjustments . . . . .	7
8 Other (Describe in Part XIV.) . . . . .	8
9 Total adjustments (net) Add lines 4 through 8 . . . . .	9
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 . . . . .	10

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1 Total revenue, gains, and other support per audited financial statements . . . . .	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains on investments . . . . .	2a
b Donated services and use of facilities . . . . .	2b
c Recoveries of prior year grants . . . . .	2c
d Other (Describe in Part XIV.) . . . . .	2d
e Add lines 2a through 2d . . . . .	2e
3 Subtract line 2e from line 1 . . . . .	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b Other (Describe in Part XIV.) . . . . .	4b
c Add lines 4a and 4b . . . . .	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . .	5

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1 Total expenses and losses per audited financial statements . . . . .	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities . . . . .	2a
b Prior year adjustments . . . . .	2b
c Other losses . . . . .	2c
d Other (Describe in Part XIV.) . . . . .	2d
e Add lines 2a through 2d . . . . .	2e
3 Subtract line 2e from line 1 . . . . .	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b Other (Describe in Part XIV.) . . . . .	4b
c Add lines 4a and 4b . . . . .	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . .	5

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**Part V, line 4 - Use of endowment funds**

--51,079 of WA DECA will be used as award in scholarships over the years.

--192,946 of Missouri DECA Foundation will be used as scholarship for graduating seniors who participated in DECA during the high school years.

**Part XIV Supplemental Information (continued)**

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**SCHEDULE G**  
**(Form 990 or 990-EZ)**

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

2010

**Open to Public  
Inspection**

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**Name of the organization**

## Distributive Education Clubs of America Inc.

**Employer identification number**

23-7079474

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

**Part I** **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a  Mail solicitations      e  Solicitation of non-government grants  
b  Internet and email solicitations      f  Solicitation of government grants  
c  Phone solicitations      g  Special fundraising events  
d  In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

2b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
<b>Total</b>					

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

	(a) Event #1 WA DECA Annual (event type)	(b) Event #2 CO DECA Annual (event type)	(c) Other events 5 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts . . . . .	26,902	23,865	11,076
	2 Less. Charitable contributions . . . . .	26,902	23,865	9,040
	3 Gross income (line 1 minus line 2) . . . . .	0	0	2,036
	4 Cash prizes . . . . .			
	5 Noncash prizes . . . . .			
	6 Rent/facility costs . . . . .			
	7 Food and beverages . . . . .			
	8 Entertainment . . . . .	398		398
	9 Other direct expenses . . . . .	1,615	2,890	4,505
Direct Expenses	10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . .			► ( 4,903 )
	11 Net income summary. Combine line 3, column (d), and line 10 . . . . .			► -2,867

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue . . . . .			
Direct Expenses	2 Cash prizes . . . . .			
	3 Noncash prizes . . . . .			
	4 Rent/facility costs . . . . .			
	5 Other direct expenses . . . . .			
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No
	7 Direct expense summary. Add lines 2 through 5 in column (d) . . . . .			► ( )
	8 Net gaming income summary. Combine line 1, column d, and line 7 . . . . .			►

9 Enter the state(s) in which the organization operates gaming activities:

a Is the organization licensed to operate gaming activities in each of these states? . . . . .  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

b If "Yes," explain: \_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers?  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

Director/officer  Employee  Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (ii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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  
**2010**  
Open to Public  
Inspection

Name of the organization

Employer identification number

**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to

Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ►

1 (a) Name and address of organization or government	2 (b) EIN	3 (c) IRC section if applicable	4 (d) Amount of cash grant	5 (e) Amount of non-cash assistance	6 (f) Method of valuation (book, FMV, appraisal, other)	7 (g) Description of non-cash assistance	8 (h) Purpose of grant or assistance
(1) Arizona State University PO Box 870412, Tempe, AZ 85287	86-0196696	(c)(3)		5,000			Scholarships
(2) University of Arizona PO Box 210066, Tucson, AZ 85721	74-2652689	(c)(3)		5,500			Scholarships
(3) Cunningham Foundation 1700 Humboldt St, Denver, CO 80218	83-0337440	(c)(3)		37,956			Project Mercy
(4) DECA Inc. 1908 Aspn Dr, Reston, VA 20191	53-0215806	(c)(3)		7,000			Scholarships
(5) MO DECA Foundation 3703 Hunter Valley Dr, Columbia, MO	26-2739430	(c)(3)		35,000			Scholarships
(6) Muscular Dystrophy Assn 3300 E Sunrise Dr, Tucson, AZ 85718	13-1665552	(c)(3)		11,071			Contribution
(7) R W Johnson Univ Hospital Fdn 10 Plum St, Ste 910, N Brln, NJ 08901	22-2378007	(c)(3)		15,874			"Cure for Cancer"
(8) The Cancer Institute of NJ 120 Albany St, N Brln, NJ 08901	20-2959012	(c)(3)		10,886			Comm Svc Proj
(9) American Cancer Society PO Box 22718, Oklahoma City, OK 73123	13-1788491	(c)(3)		9,183			Comm Svc Proj
(10) _____							
(11) _____							
(12) _____							

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

► 9

► 0

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

Schedule I (Form 990) (2010)

Cat. No. 50055P

**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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships	223	81,397			
2					
3					
4					
5					
6					
7					

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

Contributing state DECAAs request the grant recipient organizations to provide timely reports on the use of grant funds.

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

**2010**

Open to Public  
Inspection

Name of the organization

Distributive Education Clubs of America Inc

Employer identification number

23-7079474

Form 990, Part IV, Line 12 ... Some of the affiliated offices have their financial statements audited.

Form 990, Part VI, Lines 2 to 3 ... In California and Nevada, the state department of education contracts with independent companies to manage the chapters in those states. Both states have hired the same management company

Form 990, Part VI, lines 6 to 7 ... DECA Inc. is a membership organization for secondary and post-secondary students.

Student members of a school form a chapter led by their teacher called a "chapter advisor". Most of the state departments of education manage or facilitate the activities of chapters within their own states. State DECA board members are either designated by the department or elected by the DECA constituents. The important decisions of the board reflect the consensus of chapter advisors and department officers.

Form 990, Part VI, Line 11 ... The board of many state DECA's require board review and approval of Form 990 after it is completed.

Form 990, Part VI, Lines 15a to 15b ... Governing bodies of state DECA annually review salary or compensation using comparability studies of similarly sized corporations

Form 990, Part VI, Line 19 ... These documents and statements are available to the public inspection upon request

**SCHEDULE R**  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization

Distributive Education Clubs of America Inc.

**Related Organizations and Unrelated Partnerships**

- Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
- Attach to Form 990. ► See separate instructions.

**2010**  
Open to Public  
Inspection

Employer identification number

23-7079474

OMB No. 1545-0047

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

	<b>(a)</b> Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

	<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Exempt Code section	<b>(e)</b> Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	<b>(g)</b> Section 512(b)(13) controlled entity?
							<b>Yes</b>	<b>No</b>
(1)	The DECA Foundation, 1908 Association Dr., Reston, VA 20191 EIN: 52-0788005	Inactive	Virginia	501(c)(3)	11(c) DECA Inc.			✓
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

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

Cat No 50135Y

Schedule R (Form 990) 2010

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership	
										Yes	No
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

## Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

		Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	✓	
b Gift, grant, or capital contribution to other organization(s)	1b	✓	
c Gift, grant, or capital contribution from other organization(s)	1c	✓	
d Loans or loan guarantees to or for other organization(s)	1d	✓	
e Loans or loan guarantees by other organization(s)	1e	✓	
f Sale of assets to other organization(s)	1f	✓	
g Purchase of assets from other organization(s)	1g	✓	
h Exchange of assets	1h	✓	
i Lease of facilities, equipment, or other assets to other organization(s)	1i	✓	
j Lease of facilities, equipment, or other assets from other organization(s)	1j	✓	
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	✓	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	✓	
m Sharing of facilities, equipment, mailing lists, or other assets	1m	✓	
n Sharing of paid employees	1n	✓	
o Reimbursement paid to other organization for expenses	1o	✓	
p Reimbursement paid by other organization for expenses	1p	✓	
q Other transfer of cash or property to other organization(s)	1q	✓	
r Other transfer of cash or property from other organization(s)	1r	✓	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

**Part VI** **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?	(e) Share of end-of-year assets	(f) Disproportionate allocations?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		(h) General or managing partner?
						Yes	No	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

**Part VII      Supplemental Information**

**Supplemental Information**  
Complete this part to provide additional information for responses to questions on Schedule R (see instructions).



**Form 990**  
**Distributive Education Clubs of America Inc.**  
**EIN: 23-7079474**  
**Group Exemption Number: 1151**

**501 (C) (3) Subsidiary Organizations**

Line	Federal ID#	State Organization	Advisor	Address	City	State	Zip
530215806	DECA Inc Parent Company			1908 Association Drive	Reston	VA	20191
237079474	DECA Inc – Group Return	Dr. Edward Davis		1908 Association Drive	Reston	VA	20191
1	0360126177	VT DECA	Roger Cante	209 Veterans Ave N County Career Ctr	Newport	VT	05855
2	046139055	MA DECA	Donna McFadden	250 New Rutherford Ave, Box 101	Boston	MA	02129
3	050395332	RI Collegiate DECA	Kenneth DiSaia	8 Abbott Park Place	Providence	RI	02903
4	146035822	NY DECA	Mary Peres	285 Hill Road	Goshen	NY	10524
5	201966759	GA Collegiate DECA	Karen Howard	495 N Indian Creek Drive	Clarkston	GA	30021
6	203546537	FL Collegiate DECA	Jack Rose	10790 NW 14th St, #180	Plantation	FL	33322-6956
7	226066043	NJ DECA	Patricia Lamborne	2600 Woodbridge Ave, TSC 200G	Edison	NJ	08818
8	236416579	PA DECA	Jerry DiGiovanni	306 South 13th St. #6	Philadelphia	PA	19107
9	237066211	ME DECA	Lisa Delampan	PO Box 397	Concord	NH	03302-0397
10	237066212	AK DECA	Chance Chambers	10025 Baywood Way	Palmer	AK	99645-9620
11	237174475	NH DECA	Gordon Nicholson	PO Box 6606	Manchester	NH	03108
12	262739430	Foundation for MO DECA	Julie Lyman	3703 Hunter Valley Drive	Columbia	MO	65203
13	316035469	OH DECA	Jim Price	25 S Front St MSC 604(Mail Stop)	Columbus	OH	43215
14	356065007	IN DECA	Emily Eaton	PO Box 829	Frankfort	IN	46041
15	376058635	IL DECA	Don Varanauksi	16452 S. Westwood Drive	Lockport	IL	60441
16	386119972	MI DECA	Dave Wait	208 King Hall Eastern Mich Univ	Ypsilanti	MI	48197
17	396095491	WI DECA	Sara Baird	125 South Webster	Madison	WI	53702
18	416039597	MN Collegiate DECA	Glenice Hall	37962 SW Height of Land Drive	Rochert	MN	56578-9615
19	426093339	IA DECA	Christina L. Bohnet	PO Box 1142	Ankeny	IA	50021
20	436064528	MO Collegiate DECA	Lori Niekamp	DESE PO Box 480	Jefferson City	MO	65102
21	456015497	ND DECA-Collegiate DECA	Kevin Reisenauer	600 East Boulevard Ave, Dept 270	Bismarck	ND	58505-0610
22	466017083	SD DECA	Alex Hofkamp	225 South Main Ave	Sioux Falls	SD	57104
23	470794142	NE DECA	Nicole Coffey	301 Centennial Mall South	Lincoln	NE	68509-4987
24	510164028	CT DECA	William Leete	PO Box 7127	Prospect	CT	06712
25	510164044	ID DECA-Collegiate DECA	Kristi Enger	660 West State St, Ste 324	Boise	ID	83720-0095
26	510164058	NM DECA	Christine Phipps	ENMU Cherry St Station 61	Portales	NM	88130
27	516019989	DE DECA	Frank Ingram	35 Commerce Way, Suite 1	Dover	DE	19904
28	526066960	DC DECA	Katie Fregotto	5500 Eads Street NE	Washington	DC	20019
29	526066963	MD DECA	William Notage	200 W Baltimore St MSDE DCTAL	Baltimore	MD	21201

Line	Federal ID#	State Organization	Advisor	Address	City	State	Zip
30	542061807	VA Collegiate DECA	Sharon Davis	Old Dominion Univ Tech Bldg Rm 108	Norfolk	VA	23529
31	546052332	VA DECA	Ryan Witzig	5328 Windsor Hills Dr	Fairfax	VA	22032
32	556028198	WV DECA	Betty Sias	1900 Kanawha Blvd E Bldg 6 Rm 243	Charleston	WV	25305
33	566073105	NC DECA	Pamela O'Brien	6358 Mail Service Center	Raleigh	NC	27699-6358
34	576028893	SC DECA	Ginger Hill	427 Trails End	Rock Hill	SC	29732
35	586053488	GA DECA	Rhonda Samples	3612 Ansley Pointe	Gainesville	GA	30506
36	596173273	FL DECA	Lynore Leventhagen	6322 Boniwell Lane	Altamonte Springs	FL	32714
37	616033495	KY DECA	Gary Colvin	1256 Dugan Lane	Bardstown	KY	40004
38	626063230	TN DECA	Joy Smith	710 James Robertson Pwy, 4th Floor	Nashville	TN	37243
39	636155384	AL DECA	Lisa Weeks	PO Box 302101	Montgomery	AL	36130-2101
40	646028211	MS DECA-Collegiate DECA	Charlotte Bryant	500 Greymont St., Suite H	Jackson	MS	39205-0771
41	716059885	AR DECA	Jim Brock	3 Capitol Mall Luther Hardin Bldg Rm 502	Little Rock	AR	72201-1083
42	726025338	LA DECA	Paul Grethel	13967 J R Drive	Walker	LA	70785
43	736108722	OK DECA	Karen Green	1500 W 7th Ave	Stillwater	OK	74014
44	746052810	TX DECA	Sandra Hinesley	PO Box 30715	Denton	TX	76206
45	816017760	MT DECA	Erin Weisgerber	PO Box 7261	Helena	MT	59604
46	836009360	WY DECA	Denise Ostrom	2527 Summit Drive	Cheyenne	WY	82009
47	846044839	CO DECA	Ev Vaughan	9101 E Lowry Blvd	Denver	CO	80230
48	866052333	AZ DECA-Collegiate DECA	Oleg Shvetis	1535 W Jefferson St	Phoenix	AZ	85007
49	876123242	UT DECA-Collegiate DECA	Vincent Merrell	8503 McKenzie Lane	West Jordan	UT	84081
50	886006605	NV DECA	Curtis Haley	9890 S Maryland Pwy Ste 221 Rm 234	Las Vegas	NV	89183
51	900518958	MN DECA	Jacklyn J. Schiller	21576 NE Pickeral Lake Drive	Detroit Lakes	MN	56501-7524
52	900518959	MI Collegiate DECA	Shawna Davidson	3831 S Gleaner Rd	Saginaw	MI	48609
53	911308496	WA DECA	Shanna LaMar	200 West Mercer St, Site 207	Seattle	WA	98119
54	911602361	WA Collegiate DECA	Laury Sullivan	1810 N Greene St, MSC 2010	Spokane	WA	99217
55	911918358	CA DECA	Brycen Woodley	PO Box 1449	Ridgecrest	CA	93556
56	911918365	RI DECA	Marsha Bock	993 Cowesett Rd	Warwick	RI	02886
57	911918374	WI Collegiate DECA	Mae Laatsch	PO Box 85	Lake Mills	WI	53551-0085
58	911918388	TX Collegiate DECA	Chad Fagan	1114 W FM 1382	Cedar Hill	TX	75104
59	936037452	OR DECA	Tina Lee	SLDC 2611 Pringle Rd SE	Salem	OR	97302
60	996011098	HI DECA	Gilbert Chun	475 22nd Ave Rm 217	Honolulu	HI	96816

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
George Gates board member	2	x		x			0		0
David Lenig board member	1	x					0		0
Mario Gatto board member	1	x					0		0
Charice Chambers State Advisor	10			x			0		0
ROBERT HIGGINS BOARD CHAIRMAN	1	x					0		0
LISA WEEKS ADMINISTRATOR	10			x			0		0
WANDA MCKOY CO-TREASURER	1	x		x			0		0
LAURA CARRINGTON CO-TREASURER	1	x		x			0		0
JOSPEH BORG COMMITTEE MEMBER	1	x					0		0
CARLA MCEWEN COMMITTEE MEMBER	1	x					0		0
BILLY CANARY COMMITTEE MEMBER	1	x					0		0
JEFF ADAMS COMMITTEE MEMBER	1	x					0		0
BUFFY MURPHY COMMITTEE MEMBER	1	x					0		0
L RALPH STACY COMMITTEE MEMBER	1	x					0		0
JULIE KORNEGAY COMMITTEE MEMBER	1	x					0		0
DR J MICHAEL HARDIN COMMITTEE MEMBER	1	x					0		0
MICHELLE CLEMENTS COMMITTEE MEMBER	1	x					0		0
STEVEN T MARLOWE COMMITTEE MEMBER	1	x					0		0
NICK COLLINS COMMITTEE MEMBER	1	x					0		0
KENDALL H HAYWOOD COMMITTEE MEMBER	1	x					0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)				(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee		
JEANNINE BIRMINGHAM COMMITTEE MEMBER	1	X					0	0
GLENN PHILLIPS COMMITTEE MEMBER	1	X					0	0
DR STEVE GRICE COMMITTEE MEMBER	1	X					0	0
SANDRA DURHAM COMMITTEE MEMBER	1	X					0	0
GLENN CLAYTON COMMITTEE MEMBER	1	X					0	0
JESSICA JONES COMMITTEE MEMBER	1	X					0	0
KRISTA HAWKINS COMMITTEE MEMBER	1	X					0	0
James Brock State Chair	40	X	X				0	0
Ginger Fisher Co Advisor	25		X				0	0
Tim Johnston Chief Financial Officer	20		X				0	0
Chris Dorman Exec Ccl Director	15	X					0	0
Cindy Whitaker Exec Ccl Director	15	X					0	0
Jurel Guffey Exec Ccl Director	15	X					0	0
Karen Shaddon Exec Ccl Director	15	X					0	0
Sherry Siler Exec Ccl Director	15	X					0	0
Melinda Gould Exec Ccl Director	15	X					0	0
Phillip VanDenBerg Exec Ccl Director	15	X					0	0
Victoria Phung Exec Ccl Director	15	X					0	0
Melody Hunt Exec Ccl Director	15	X					0	0
Lindsey Walker Exec Ccl Director	15	X					0	0
Total to Part VII, Section A, line 1c							0	

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Kari Gregory Exec Ccl Director	15	x					0		0
Oleg Shvets State Director	5		x				0		0
Vicki Tolman AME President	1	x					0		0
Mollie Fussell AME President Elect	1	x					0		0
Edmund Trang Collegiate DECA Representative	1	x					3,050		0
Johnny Martin State DECA President	1	x					0		0
Shea Padilla Mktg Education State Supervisor	1	x					0		0
JoAna Sydow President	3	x					0		0
Maureen Todd Treasurer	3	x					0		0
Tami Raaker Secretary	3	x					0		0
Carl Schmidt Director	2	x					0		0
Dennis Mifflin Director	2	x					0		0
Miriam Shaffley Director	2	x					0		0
Mary Whited Director	2	x					0		0
Laurie Andrews Director	2	x					0		0
Rhonda Bohall Finance Manager	3		x				0		0
Brycen Woodley State Advisor	5		x				0		0
RICHARD KUHLMAN CHAIRMAN	2	x					0		0
DEBRA SWICK VICE-CHAIRMAN	2	x					0		0
JAMIE YOUNG S O TEAM ADVISOR	4	x					0		0

Total to Part VII, Section A, line 1c

3,050

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
EVERETT VAUGHAN STATE ADVISOR	10			X			0		0
ZACH BAXTER TREASURER	10			X			0		0
Chris Bohnet President	2	X		X			0		0
Nicole Coffey Secretary	2	X		X			0		0
Don Varanauski Treasurer	2	X		X			0		0
Holly Gregory Director	1	X					0		0
Gary Colvin Director	1	X					0		0
Emily Sanders-Jones Director	1	X					0		0
Dave Wait Director	1	X					0		0
Jackie Schiller Director	1	X					0		0
Gayla Westergaard Director	1	X					0		0
Kevin Reisenauer Director	1	X					0		0
Emily Easton Director	1	X					0		0
James Price Director	1	X					0		0
Holly Gregory Director	1	X					0		0
Bill Leete State DECA Advisor	3	x		x			0		0
Dennis Kelly State DECA Fiscal Agent	1	x		x			0		0
Marisa Calvi-Rogers President of the Board	1	x					0		0
Carmela Califore Board Member	1	x					0		0
Bryan Anderson Board Member	1	x					0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Cory O'Connell Board Member	1	x					0		0
Frank Rossi Board Member	1	x					0		0
Frank Ingram State Advisor	20	x					0		0
Shana Dulin President	4	x					0		0
Eunique Lawrence Vice-President	4	x					0		0
Charles Schneider Secretary	4		x				0		0
Monique Riddick Advisory Board Member	4	x					0		0
Tina Pinkett Advisory Board Member	4	x					0		0
Jack J Rose Director	5		x				0		0
Erick Perez Board Chair	1	x					0		0
Carolyn Massiah Board Member	1	x					0		0
Rachel Rodriguez State President	3	x					0		0
Melissa Blette State Vice President	2	x					0		0
Mr David Fanciullacci Secretary/Treasurer	2	x					0		0
Lynore Levenhagen State Advisor	25		x				26,000		0
Arlen Mizel CFO	1	x					0		0
Carla Ross District Advisor	1	x					0		0
Phyleshia Jones District Advisor	1	x					0		0
Donna Martin District Advisor	1	x					0		0
Grace Gordon District Advisor	1	x					0		0

Total to Part VII, Section A, line 1c

26,000

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Jamie Benedict President of the Board	1	X					0		0
Tresa Warner District Advisor	1	X					0		0
Michael Bridges District Advisor	1	X					0		0
Deb Carter District Advisor	1	X					0		0
Tammy DeLeonardo District Advisor	1	X					0		0
Brian Chalk District Advisor	1	X					0		0
Jerry Holt District Advisor	1	X					0		0
Jillian Berg District Advisor	1	X					0		0
Beatriz Rameriz District Advisor	1	X					0		0
Eddy Rojas District Advisor	1	X					0		0
Ted DiNicola District Advisor	1	X					0		0
Linda Cannon District Advisor	1	X					0		0
Michelle Roach State Advisor	3	x	x				0		0
Perry Hidalgo Finance Officer	3	x	x				0		0
Grant Harris Officer	3	x					0		0
Sandy Weaver officer	3	x					0		0
Karen Howard officer	3	x					0		0
Rhonda Samples Executive Director	40	x					16,000		0
Krystin Gloder Chair	5	x					0		0
Tim Bussord Director	5	x					0		0

Total to Part VII, Section A, line 1c

16,000

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)				(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee		
Beth Pitts Secretary	5			x			0	0
Sharon Shahan Director	5	x					0	0
Walter Burgess Director	5	x					0	0
Bob Armbruster Director	5	x					0	0
Gilbert Chun Education Specialist	2			x			0	0
Christina Bohnet Executive Director	40	x		x			9,316	0
Carol VonTersch Co-Chair	0	x					0	0
Amy Hupke Co-Chair	0	x					0	0
Kristi Enger State Advisor	15			x			0	0
Clay Long State Coordinator	19			x			0	0
Don Varanauski Co-Executive Director	15	X		x			3,000	0
James Weber Co-Executive Director	10	X		x			3,000	0
David Baysingar Board Member	5	x					500	0
Karen Bear Board Member	8	x					500	0
Tammi Conn Board Member	8	x					500	0
William Coulson Board Member	1	x					300	0
Jan Jacobson Board Member	5	x					500	0
Kevin Jones Board Member	5	x					250	0
Michael Patterson Board Member	3	x					400	0
Janice Brown Board Chair, D 4/5 Coord	10	x					0	0

Total to Part VII, Section A, line 1c

18,266

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Amanda Graham Asst Board Chair, IMEA Rep	1	x					0		0
Gen Craft Board Chair, D 7 Coord	1	x					0		0
Judy Commers District 1 Coordinator	1	x					0		0
Lots Pinney District 2 Coordinator	1	x					0		0
Becky Kammeier District 3/6 Coordinato	1	x					0		0
Steve Bennett District 8 Coordinator	1	x					0		0
Becky Kuehl District 9 Coordinator	1	x					0		0
William Turner District 10 Coordinator	1	x					0		0
Mike Hackman District 11/12 Coordinator	1	x					0		0
Branon Renick State Office VP CD	1	x					0		0
Maggie Hamer State Office District 8 Pres	1	x					0		0
Heather Griffith DECA Alumni Rep	1	x					0		0
Emily Eaton Contracted State Advisor	3		x				22,500		0
Barbara Beadle Contracted Financial Advisor	2		x				3,300		0
Gary Colvin State Advisor	12	x	x				0		0
Debbie Harris Board Chair	1	x					0		0
Jerry Boles Board Member	1	x					0		0
Tod Griffin Board Member	1	x					0		0
Michael Hacksworth Board Member	1	x					0		0
Mark Gibson Board Member	1	x					0		0

Total to Part VII, Section A, line 1c 25,800

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)				(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee		
Lisa Hurt Board Member	1	X					0	0
JoAnna Purvis Bookkeeper	2	X	X				0	0
Edward Falgoust Chairman	1	X					0	0
Dennis Valentine Director	2	X					0	0
Claudette Tolbert Director	1	X					0	0
Debra Wilson Director	1	X					0	0
Sandra West Director	1	X					0	0
Paul Grethel Educational Liason	1			X			0	0
Donna McFadden State Advisor	22	X	x				0	0
Brian Nobrega Director	2	x					0	0
Frank Rosa Director	2	x					0	0
Letty Brown Director	2	x					0	0
James Dow Director	2	x					0	0
Krista Anderson Director	2	x					0	0
Gina Mustoe Director	2	x					0	0
Marian Ierardi Director	2	x					0	0
Tom Sousa Director	2	x					0	0
Megan Sudak Director	2	x					0	0
Anne Grassetti Director	2	x					0	0
John Foisy Director	2	x					0	0
Total to Part VII, Section A, line 1c		0						

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
S Palmer-Howes Director	2	x					0		0
George Berg Treasurer	11		x				2,800		0
Demitra Marafatos DECA Advisor	4	x					0		0
JoAnn Best DECA Advisor	4	x					0		0
Rob Carter board member	4	x					0		0
Darlene Ajayi Treasurer	4	x	x				0		0
Brenda Pettigrew board member	4	x					0		0
Keisha Maddox board member	4	x					0		0
Candy Zentz board member	4	x					0		0
Lucy Madert board member	2	x					0		0
Carline Hill Bryant board member	2	x					0		0
Doris Doren board member	2	x					0		0
Jennifer Bodensiek board member	2	x					0		0
Lisa Mack board member	2	x					0		0
William Nottage State Advisor	10		x				0		0
Lisa Delampan State Advisor	5		x				5,000		0
Robert Radley Director	1	x					0		0
Pat Peltier Director	1	x					0		0
Hal Fowler Director	1	x					0		0
Kevin Stilphen Director	1	x					0		0

Total to Part VII, Section A, line 1c

7,800

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Jen Director	1	x					0		0
Brian Leavitt Director	1	x					0		0
Jane Krasnow Director	1	x					0		0
Shawna Davidson State Director	4		x				0		0
Elmer Tofteland Finance Director	1		x				0		0
Tanya Blehm Event Coordinator	4	x					0		0
David Wait Director	40		x				0		0
Ann Day Account Specialist	24		x				0		0
Brenda Calrk Advisor	1	x					0		0
Jamie Riley Advisor	1	x					0		0
Elizabeth Mosher Advisor	1	x					0		0
Deorgine Stergalas Advisor	1	x					0		0
Tim Todd Advisor	1	x					0		0
Glenice Hall Executive Director	25		x				0		0
Christine Storms Chairperson	1	x					0		0
Christopher Hughes President	1	x					0		0
Karen Meuwissen Vice President	1	x					0		0
Wendell Topp Treasurer	1	x					0		0
Gerry Schewe Secretary	1	x					0		0
Terry Greene Board Member	1	x					0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Jessica Town-Gunderson Board Member	1	x					0		0
Rick Olson Board Member	1	x					0		0
Todd Johnson Board Member	1	x					0		0
Roberta Moorhouse Board Member	1	x					0		0
Robert Fredericks Board Member	1	x					0		0
Jacklyn J Schiller Executive Director	30			x			40,266		0
Mary Ceminsky Board Member	1	x					0		0
Nicole Rusch Board Member	1	x					0		0
Andrea Mohr Board Member	1	x					0		0
Pat Petersen Board Member	1	x					0		0
Steph Lolich Board Member	1	x					0		0
Julie Theis Board Member	1	x					0		0
Kevin Hermann Board Member	1	x					0		0
Sonja Weiler Board Member	1	x					0		0
Mike Delaney Board Member	1	x					0		0
John Rasmussen Board Member	1	x					0		0
Jay Belcastro Board Member	1	x					0		0
Heidi Wolbert Board Member	1	x					0		0
Keith Jurek Board Member	1	x					0		0
Sophia Ross Board Member	1	x					0		0

Total to Part VII, Section A, line 1c

40,266

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Gayla Westergaard State Advisor	40			X			0		0
Bryce Bunton Board President	2	X					0		0
Sara Whelan Board President-Elect	2	X					0		0
Grant Jenkins Board Secretary	2	X					0		0
Carol Bolin Board Member	2	X					0		0
Matt Magnuson Board Member	2	X					0		0
Sherry Pfuhl Board Member	2	X					0		0
Kathy Parrett Treasurer	20			X			0		0
Julie Lyman President	5	X		X			0		0
Brooke Burnham Treasurer	5	X		X			0		0
Bryce Bunton Board Member	5	X					0		0
Holly Martinez Board Member	5	X					0		0
Gayla Westergaard State Advisor	40			X			0		0
Bryce Bunton Board President	2	X					0		0
Sara Whelan Board President-Elect	2	X					0		0
Grant Jenkins Board Secretary	2	X					0		0
Carol Bolin Board Member	2	X					0		0
Matt Magnuson Board Member	2	X					0		0
Sherry Pfuhl Board Member	2	X					0		0
Kathy Parrett Treasurer	20			X			0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Charlotte Bryant State Advisor	40			X			0		0
Jordan Harris State President	0			X			0		0
Kruze Vanderford State Secretary	0			X			0		0
Jamieon Davis State Reporter	0			X			0		0
Blythe Dunaway Chairman of the Board	0			X			0		0
Erin Weisgerber State Advisor	20			X			17,325		0
Mark Hartman Director	1	X					0		0
Keith Hoyer Director	1	X					0		0
Scott Donisthorpe Director	1	X					0		0
Karey Conn Director	1	X					0		0
John Hollow Director	1	X					0		0
Jeremy Anderson Director	1	X					0		0
Josh Munro Director	1	X					0		0
David Stukey Director	1	X					0		0
Sarah Zook Director	1	X					0		0
Nicki Roe Director	1	X					0		0
Kern Cobb Director	1	X					0		0
Cindy Farmer Director	1	X					0		0
Heather Haney Director	1	X					0		0
Pamela O'Brien NC DECA Advisor	30			X			49,500		0

Total to Part VII, Section A, line 1c

66,825

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Kim Hall Board Chair	1	X					0		0
Tabitha Hudson Board Member	1	X					0		0
Tammy Vail Board Member	1	X					0		0
Greg Murphy Board Member	1	X					0		0
Brenda Haynes Board Member	1	X					0		0
Kim Edwards Board Member	1	X					0		0
Hillary Steere Board Member	1	X					0		0
Amy Singletary Board Member	1	X					0		0
Debbie Pardue Board Member	1	X					0		0
Delores Ali Board Member	1	X					0		0
Kevin Reisenauer State DECA Advisor	15	X					0		0
Christa Brodina Chair of Board of Directors	1	X					0		0
Craig Erickson Secretary	1	X					0		0
Michelle Hoff Director	1	X					0		0
Amber Aberle Director	1	X					0		0
Scott Hurlmann Director	1	X					0		0
Nicole Coffey State Advisor	40		X				0		0
Jared Bakewell BPN Chairman	1	X					0		0
Edward Nickell BPN Representative 1	1	X					0		0
Rich Howdle BPN Representative 2	1	X					0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Jennifer Jones BPN Representative 3	1	X					0		0
Jason Kinney BPN Representative 4	1	X					0		0
Lindsey Kaiser Collegiate DECA Rep	1	X					0		0
Janet Butler Member at Large 1	1	X					0		0
Vicki Wiles Member at Large 2	1	X					0		0
Bubba Penas Member at Large 3, NAME Rep	1	X					0		0
Derek Deaver Board President, Member at Lg 5	1	X					0		0
Sarah Schau Member at Large 4	1	X					0		0
Emily Donald State Secretary	1	X					0		0
Kevin Oswald Target Representative	1	X					0		0
Luke Fanning Student President	1	X					0		0
Gordon Nicholson State Advisor	3	X					2,700		0
Kathryn Tremblay Treasurer	3	X					2,700		0
Suzanne Winters Event Coordinator	3	X					2,700		0
Lesa McQuesten Event Coordinator	3	X					2,700		0
Mary Heartz Event Coordinator	3	X					2,700		0
Darlene Yoseloff Dir, Office of School Relations	2	X					0		0
Patricia Lamborne NJ DECA State Advisor	35		X				0		0
Angelo Romano State Advisory Comm	1	X					0		0
Judith Rhodes State Advisory Comm	1	X					0		0

Total to Part VII, Section A, line 1c

13,500

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Sandy Helfand State Advisory Comm	1	X					0		0
John Pico State Advisory Comm	1	X					0		0
Donna Smith State Advisory Comm	1	X					0		0
Deborah Stapenski State Advisory Comm	1	X					0		0
Marjorie FitzGibbon State Advisory Comm	1	X					0		0
Maureen Kervick State Advisory Comm	1	X					0		0
Helen Morris State Advisory Comm	1	X					0		0
Kathy Malik State Advisory Comm	1	X					0		0
Debi Cline Chair	2	X		X			2,050		0
Larry Walsh Director	2	X					300		0
Joyce Armijo Finance Chair	2	X		X			595		0
Stacy Washington Policy Chair	2	X					360		0
Tammy Seidel Director	2	X					0		0
Lacee Manus Director	2	X					300		0
Richard Faulkner Director	2	X					824		0
Jan D'Anza Program Chair	2	X		X			300		0
Ryan Pickowitz Student President	2	X					0		0
Dotty Clark Director	2	X					646		0
Theresa Fette Director	1	x					0		0
Tricia Del Guercio Director	1	x					0		0

Total to Part VII, Section A, line 1c

5,375

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
James Kohl Director	1	x					0		0
Mark Del Guercio Director	1	x					0		0
Melissa Scott State Chair	1	x					0		0
Mike Rapponi Director	1	x					0		0
Victoria Cana Director	1	x					0		0
Tyler Hurt Director	1	x					0		0
Terry Ertman Director	1	x					0		0
Perry Annett Director	1	x					0		0
Curtis Haley State Advisor	10		x				0		0
Rhonda Bohall Finance Manager	3		x				0		0
Mitchell Beresa Chairperson	40	x					0		0
Nela Hawthorne Vice Chair	20	x					0		0
Phil Como Board Representative	1	x					0		0
Dan Graven Board Representative	1	x					0		0
Jeanne Douglas Board Representative	1	x					0		0
Lettia Romas Board Representative	1	x					0		0
Michelle Adams Board Representative	1	x					0		0
Chrystal Corbett Board Representative	1	x					0		0
James Casini Board Representative	1	x					0		0
Laurie Widman Board representative	1	x					0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Amanda Brolin Board Representative	1	x					0		0
Mary Peres State Advisor	40		x				0		0
Ellen Katz Treasurer	1	x					0		0
Colleen Murphy Regional Representative	1	x					0		0
Michael Karpie Board representative	1	x					0		0
Avani McNamara Board representative	1	x					0		0
Lettia Romas Board representative	1	x					0		0
Colleen Murphy Board Representative	1	x					0		0
Richard Mangini Asst Director	10		x				0		0
James Price State Advisor	20		x				0		0
FRANK KOHLHOFER District 1 Rep	2	x					0		0
JASON ZERA District 2 Rep	2	x					0		0
WILLIAM HOLLISTER District 3 Rep	2	x					0		0
JERRY KUHN District 4 Rep	2	x					0		0
ERIC WAGNER District 5 Rep	2	x					0		0
MIKE GOINS District 6 Rep	2	x					0		0
JOE DEANGELO District 7 Rep	2	x					0		0
SARAH PARKER District 8 Rep	2	x					0		0
BRENT PFEIFER District 9 Rep	2	x					0		0
JEAN GETZ District 10 Rep	2	x					0		0
<b>Total to Part VII, Section A, line 1c</b>							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
TRISH BARBER District 11 Rep	2	X					0		0
STEVE VARRICCHIO District 12 Rep	2	X					0		0
SUSAN EVERHART District 13 Rep	2	X					0		0
KIT LYNCH District 14 Rep	2	X					0		0
KELLY ROBINSON District 15 Rep	2	X					0		0
KELLY COOPER District 16 Rep	2	X					0		0
JEFFREY KEITH Bookkeeper	4			X			0		0
Breanna Bober President	8	x					0		0
April Crabtree Vice President	3	x					0		0
Kristen Rogers Vice President	3	x					0		0
Stacia Lancaster Vice President	5	x					0		0
Sheryar Adil Vice President	3	x					0		0
Karen Green State Advisor	20			x			0		0
Debbie Hample Bookkeeper	20			x			0		0
Kristen Torkelson Board of Advisors Member	2	X					1,140		0
Bob Reinhardt Board of Advisors Member	2	X					676		0
Sherril Daniels Board of Advisors Chair	2	X					1,140		0
Lily Edwards Board of Advisors Member	2	X					0		0
Nat Ellis Board of Advisors Member	2	X					0		0
Ron Dodge Board of Advisors Member	2	X					0		0

Total to Part VII, Section A, line 1c

2,956

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Amanda Pomeroy Board of Advisors Member	2	X					0		0
Trina Lee State Advisor	40			X			0		0
Jerry DiGiovanni Executive Director	20			x			29,046		0
Michelle Jackson Board Member	1	x					0		0
Robert Nathan Board Member	1	x					0		0
Emily Smoller Board Member	1	x					0		0
Marie Potter Board President	2	x					0		0
Virginia Gantkowski Board Member	1	x					0		0
Cyndee Barkley Board Member	1	x					0		0
John Shaw Board Member	1	x					0		0
Janis Cosgrove Board Member	1	x					0		0
Christy Spoa Board Member	1	x					0		0
Michael Dawson Board Member	1	x					0		0
Kenneth F DiSaia RI State Advisor/Treasurer	1	x					0		0
Joanne Orabone Advisor	1			x			0		0
JoAnne Warren Advisor	1			x			0		0
Jane McKay-Nesbitt Advisor	1			x			0		0
Leslie Migneault Advisor	1			x			0		0
Marsha Bock State Advisor	13	x		x			0		0
Mary Lou Tupper Board member	5	x					0		0

Total to Part VII, Section A, line 1c

29,046

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Julie Kenneydy Board member	5	x					0		0
Pat Bowie Board member	5	x					0		0
Ginger Hill State Advisor	40	x	x				10,000		0
Heather Hill State Officer Advisor	30		x				1,500		0
Rob Lovejoy Chairperson Executive Council	3	x					0		0
Lisa Hall Executive Council	3	x					0		0
Kirk Beilke Executive Council	3	x					0		0
Lynn Rigsbee Executive Council	3	x					0		0
Mary Susan Williamson Executive Council	3	x					0		0
Katie Childress Executive Council	3	x					0		0
Taylor Green Executive Council	3	x					0		0
Kate Parris Executive Council	3	x					0		0
Adrienna Scott Executive Council	3	x					0		0
Lucy Burckhalter Executive Council	3	x					0		0
Ashley Cady Executive Council	3	x					0		0
Lorando Melton Executive Council	3	x					0		0
ALEX HOFKAMP State Advisor / Director	15	x	x				0		0
RONDA GASSMAN Chapter Advisor	15	x					0		0
JOSEPH JOHNSON Chapter Advisor	15	x					0		0
CARTER CHRISTENSEN State President	15	x					0		0

Total to Part VII, Section A, line 1c

11,500

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
ALEXA GIEBINK Secretary	15	x					0		0
JOCELYN VENTURA Treasurer	15	x					0		0
SANTINA LOKONOBEL Reporter	15	x					0		0
RAHEL HABTEMARIAM Historian	15	x					0		0
Joy Smith State Advisor	38			x			0		0
Beth Sanders Teacher	10	x					0		0
Angel Fowler Teacher	10	x					0		0
Mary Ann Golden Teacher	10	x					0		0
Renee' Delbridge Teacher	10	x					0		0
Dee cole Self Employed	10	x					0		0
Harold Bouldin Teacher	10	x					0		0
Sandra Askew Teacher	10	x					0		0
Sophia Gurley Teacher	10	x					0		0
Robbie Reed Teacher	10	x					0		0
Donna England Teacher	10	x					0		0
Vikki Burns Teacher	10	x					0		0
Ron Howard Teacher	10	x					0		0
Sandra Williams Accountant	5			x			0		0
Chad Fagan State Officer	1	x					0		0
Suzette M Brimmer State Advisor Chair/Treasure	1	x	x				0		0
Total to Part VII, Section A, line 1c									

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Kathy Waltson State Officer Coordinator	1	x					0		0
Suzette M Brimmer Director	1	x					0		0
Melinda Becker Director	1	x					0		0
Levern Reed Director	1	x					0		0
Lorenda Taulton Director	1	x					0		0
LeAnn Dinsdale District Director	10	X					0		0
Erica Marshall District Director	10	X					0		0
Allene Pennington District Director	10	X					0		0
Julie Lowe District Director	10	X					0		0
Stewart Burns District Director	10	X					0		0
Pam Hamilton District Director	10	X					0		0
Jill Bell District Director	10	X					0		0
Donna Crow District Director	10	X					0		0
Jennifer Young District Director	10	X					0		0
Isela Rivera District Director	10	X					0		0
Sandra Hinesly Executive Director	20		X				55,000		0
Judy Eddleman Bookkeeper	20		X				6,075		0
Vince Merrell State Advisor	15		x				0		0
Jeremy Brooks Board Chairperson	2	x					0		0
Dale Pollard Director	2	x					0		0

Total to Part VII, Section A, line 1c

61,075

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Jill Hess Director	2	x					0		0
Patrick Paige Director	2	x					0		0
Brooke Ledesma Director	2	x					0		0
Julie Sutherland Director	2	x					0		0
Debbie Bates Director	2	x					0		0
Dave Carter Director	2	x					0		0
Shauna Binkerd Director	2	x					0		0
Dannel Porter Director	2	x					0		0
Jameson Osmond State President	1	x					0		0
Riley Speth Vice President	1	x					0		0
Tyler Simmons Vice President	1	x					0		0
Steve Sprague Vice President	1	x					0		0
Marinda McKenzie Vice President	1	x					0		0
Ryan Witzig State Advisor	40		x				0		0
Amy Granahan Board of Trustees	1	x					0		0
Sandra Tucker Board of Trustees	1	x					0		0
Jen Hendrickson Board of Trustees	1	x					0		0
Jean Draper Board of Trustees	1	x					0		0
Vernon King Board of Trustees	1	x					0		0
Lisa Baynes Chair Person, Board of Trustees	1	x					0		0
Total to Part VII, Section A, line 1c							0		

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Marie Melton Business Manager/Treasurer	5			x			0		0
Roger Cartee State Advisor	20	x		x			6,500		0
Albert Corey Treasurer / Nar Advisor	6	x		x			4,000		0
Joyce Kemp Secretary	3	x		x			0		0
Jaime Fisher Associate Treasurer	6	x		x			2,500		0
Jennifer Hill Advisor	1	x					0		0
LeeAnn Wright Advisor	1	x					0		0
Cheryl Niedzwecki Advisor	1	x					0		0
Lauri Wright Advisor	1	x					0		0
Melissa Connor Advisor	1	x					0		0
Linda Louzier Advisor	1	x					0		0
Neal Hogan Advisor	1	x					0		0
Jan Stratton Advisor	1	x					0		0
Jerry Sullivan Advisor	1	x					0		0
Kim Buehler Advisor	1	x					0		0
Susan Richard Advisor	1	x					0		0
Greg Richards State Advisor	2	x		x			0		0
Mary McGuire Advisor	1			x			0		0
Laura Portolese Advisor	1			x			0		0
Steve McCloskey Advisor	1			x			0		0

Total to Part VII, Section A, line 1c

13,000

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indiv'l trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
David Starr Advisor	1			x			0		0
Ginny Powers Advisor	1			x			0		0
Mona Starr Advisor	1			x			0		0
Larry Sullivan Advisor	1			x			0		0
Lori Jacobs Chair	2	x					0		0
Heidi Wilson Secretary	1	x					0		0
Kandise Herndon Treasurer	2	x					0		0
Shanna LaMar Executive Director	70			x			93,970		0
Libby Carter Executive Committee Member	1	x					0		0
Jim Menzies Executive Committee Member	1	x					0		0
Matt Pakinas Executive Committee Member	1	x					0		0
David Stokke Executive Committee Member	1	x					0		0
Jodi Galli Executive Committee Member	1	x					0		0
Venetra Willis-Holbrooks Executive Committee Member	1	x					0		0
Mae Laatsch Executive Director	30			x			10,254		0
Jeff Stern President	4	x					0		0
Alyssa Taylor Secretary	6	x					0		0
Andrea Haisler Exec Vice President	4	x					0		0
Danielle Kizewic Parliamentarian	4	x					0		0
Joe Gecks Communications Vice President	6	x					0		0

Total to Part VII, Section A, line 1c

104,224

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Jessica Argust Southern Region Vice President	4	x					0		0
Cory Phillips NE Region Vice President	4	x					0		0
Jeff Meverden State Advisor	3	x					0		0
Greg Schneider Co-State Chapter Advisor	2	x					0		0
Ed Wierzbecki Co-State Chapter Advisor	2	x					0		0
Kevin Straka Judge's Coordinator	4	x					0		0
Sara Baird State Advisor	10			x			0		0
Sue Linton Chief Financial Officer	2			x			0		0
Kayla Hill State Officer	2	x					0		0
Aaron Edlund State Officer	2	x					0		0
Anna Kasinski State Officer	2	x					0		0
Tim Fandek President	2	x					0		0
Carl Hert Past President	2	x					0		0
Sue Schleicher Vice-President	2	x					0		0
Sarah Hart Olson Secretary	2	x					0		0
Scott Kolb Advisor	2	x					0		0
Keegan O'Brien Advisor	2	x					0		0
Jessie Warner Advisor	2	x					0		0
Jennifer Starke White Advisor	2	x					0		0
Brycen Woodley Member	1	x		x			0		0
Total to Part VII, Section A, line 1c									
0									

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

(A) Name and title	(B) Average hours per week	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations
		Indvl trustee or director	Institutional trustee	Officer	Key Employee	Highest compensated employee			
Kelly Ambrose Member	1	X					0		0
Oleg Shvets Member	1	X					0		0
Ev Vaughn Member	1	X					0		0
Johnny Martin Member	1	X					0		0
Betty Sias State Advisor	38			x			0		0
Patty Igo Board Member	1	X		x			0		0
Stacy Parsons Board Member	1	X					0		0
Jeanne Gurtler Board Member	1	X		x			0		0
Glennetta Meadows Board Member	1	X					0		0
Neil Byrge Board Member	1	X					0		0
Nancy Bradbury Board Member	1	X					0		0
Todd Strickler Board Member	1	X					0		0
Rhonda Shriver Board Member	1	X					0		0
Denise Osborn Wyoming DECA State Advisor	20			x			0		0
Suzan Newberry President	5	X					0		0
Jill Thompson President-Elect	5	X					0		0
Lori Meredith Past President	5	X					0		0
Cheryl Cranford Secretary/Treasurer	5	X					0		0
Manuel Flores Director	5	X					0		0
Denise Yates Director	5	X					0		0
Total to Part VII, Section A, line 1c									
0									

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

Total to Part VII, Section A, line 1c

0