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Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 D Employer identification number Name of organization B Check if applicable DirectEmployers Association Inc Address change 30-0008235 Doing Business As E Telephone number Name change Initial return umber and street (or P O box if mail is not delivered to street address) **G** Gross receipts \$ 8,789,136 9002 S Purdue Road 100 Terminated Amended return City or town, state or country, and ZIP + 4 Indianapolis, IN 46268 Application pending Name and address of principal officer **H(a)** Is this a group return for William Warren ΓYes **Γ**Nο affiliates? 9002 S Purdue Road 100 Indianapolis, IN 46268 H(b) Are all affiliates included? ☐ Yes 🔽 No If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 H(c) **Website: ►** www directemployers org K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ► M State of legal domicile IN L Year of formation 2001 Summary Part I Briefly describe the organization's mission or most significant activities To provide a cost-effective national employment system that improves labor market efficiency and reflects our nation's diverse Activities & Governance 2 Check this box 🚩 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 16 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 16 5 51 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 6 16 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 0 Program service revenue (Part VIII, line 2g) . 8,046,537 8,650,345 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,033 1,887 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 128,000 136,904 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 8,177,570 8,789,136 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses 3,204,801 6,225,725 10) Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 16a b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,733,131 4,908,734 8,937,932 11,134,459 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 $\,$. 19 -760,362 -2,345,323 Assets or defined by the control of **Beginning of Current End of Year** Year 2,844,873 2,445,924 20 Total assets (Part X, line 16) . Kend. 21 Total liabilities (Part X, line 26) 6,139,080 8,085,454 22 Net assets or fund balances Subtract line 21 from line 20 -3,294,207 -5,639,530 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. ***** 2012-11-13 Signature of officer Sian Here Dan Jordan Sec/Treas/Couns Type or print name and title Check if Preparer's taxpayer identification number (see instructions) Rickey Roysdon CPA signature Paid employed 🕨 🔽

Gauthier & Kimmerling LLC

7340 Shadeland Stn Ste 100

Indianapolis, IN 46256 May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Preparer's Firm's name (or yours

Use Only

if self-employed), address, and ZIP + 4

▼Yes 「No

Phone no (317) 572-1130

	Check if S	Schedule O contains a respons	e to any question in this Part III		
1	Briefly describe	the organization's mission			
ındus			and compliance assistance to its remployees have easy and free acc		
<u>cimpi</u>	oyment madeiy				
2	the prior Form 99	90 or 990-EZ?		vhich were not listed on	'es ✓ No
	If "Yes," describe	e these new services on Sched	ule O		
3	_	tion cease conducting, or make	significant changes in how it con		'es ✓ No
	If "Yes," describe	e these changes on Schedule C			
4	expenses Section	on 501(c)(3) and 501(c)(4) org	complishments for each of its thre Janizations and section 4947(a)(1 nses, and revenue, if any, for each) trusts are required to report th	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	peers, survey mem special offers. This reporting, search e Exchange Technolof for displaced employers and state JobCentral provide sites to participatio Veterans Act of 200 delivery system." I partnerships and of directly from their according to JVA ar National Labor Excl system and record quality jobs Directlownsizing employ Technology which is sections, to cut ver	nbers, learn more about recruitment a includes developing and providing prongine optimization and relationship budgy, an alternative to commercial job obyees. In March 2007 DirectEmployers tes a cost-effective transition from Ams a wide range of employment services in in the national labor exchange with 02 (JVA), requires covered federal confusupport of these laws and since AJB their industry experts to design, developments are active to consistent with the Office of Federal hange, acting as a distribution point for some maintained for each transaction employers in association with NASWA heres with hiring employers to create a is a hybrid job search engine platform.	rs ongoing member engagement opporture of technology, stay connected via email is ducts that ensure job syndication and distilling with State and niche sites DirectEmboards, to increase labor market efficience teamed with The National Association of terica's Job Bank (AJB) as the AJB was dises to participating state workforce agencies other states The Vietnam Era Veterans' R tractors and subcontractors to list their ensures in longer a job-posting option for compand implement VetCentral in order to deble to veterans through VetCentral, provided to veterans through VetCentral, provided contract Compliance Program regulation or federal contractors. Thereby, member JuriectEmployers' JobCentral Military Netwas created and implemented the Rapid Resystem that offers job matching to display with job posting and resume database cates can decrease their cost and become results.	updates, participate on committees and tribution, compliance, reemployment of ployers has created and maintains Job y and decrease recruiting costs while grate Workforce Agencies (NASWA) to scontinued in June, 2007 by the U.S. Dies, from Job listing distribution to and freedjustment Assistance Act of 1977 as apployment openings with "an appropria pilance, DirectEmployers again partner leliver Jobs to veterans. DirectEmployer ding participating members with uninters. VetCentral is fully integrated into Dirobs are sent to the appropriate employwork has become the model for helping teemployment Initiative. This is a serviced workers at no cost DirectEmployers apability created for association and nice	I access discounts and f displaced workers, metrics Central National Labor enerating job opportunities provide job seekers, epartment of Labor om state employment web amended by the Jobs for te employment service ed with NASWA, military r member jobs are indexed errupted compliance rectEmployers JobCentral ment service delivery our nation's veterans find ce designed to connect is has created Direct Board he board sites, with career
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	(3323	, (2po	molaumy grante or 4	, (nerenae 4	,
	O the = ======	convices (December - Cabralla	201		
4d	. •	services (Describe in Schedul	·) (Payanus ¢	1
	(Expenses \$		g grants of \$) (Revenue \$,
4e	Total program s	service expenses►\$			

Part IV Checklist of Required Schedule	Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		Νο
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	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20ь		

Par	t IV Checklist of Required Schedules (continued)							
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο				
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο				
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes					
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		Νο				
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?							
c	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo				
25a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I							
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)							
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part							
		28a		Νo				
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο				
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 owner? If "Yes," complete Schedule L, Part IV	28c	Yes					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No				
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο				
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? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο				
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νο				
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo				
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Νο				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No				
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No				
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes					

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 13			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	_	.,	
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the	3a		No
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No.
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		110
44	over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		Νο
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			Νο
_		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		Νo
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?	7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	/D		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		
e	contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		No
0		-		140
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		No
_		9b		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	20		No
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	_		
_	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		No
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is incensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		No

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

Se	ction A. Governing Body and Management						
			Yes	No			
4 -							
1a	Enter the number of voting members of the governing body at the end of the tax year						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No			
4	supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was						
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No No			
6	Did the organization have members or stockholders?	6	Yes				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9							
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	_					
	venue Code.)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		No			
b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes				
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
Ь	Were officers, directors or trustees, and key employees required to disclose annually interests that could give						
	rise to conflicts?	12b	Yes				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes				
13	Did the organization have a written whistleblower policy?	13	Yes				
14	Did the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
b	Other officers or key employees of the organization	15b	Yes				
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	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?						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		No			
_	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?						
Se	ection C. Disclosure	16b		Νο			
17							
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)						

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

Own website 🔽 Another's website 🔽 Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > Dan Jordan

9002 S Purdue Road 100 Indianapolis, IN 46268

(317) 874-9000

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

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

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

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

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

◆ 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

(A) Name and Title	(B) A verage hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
	for related organizations in Schedule O)	Individual trustiee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former		МТЭС)	organizations
(1) Angela Grilliot Director	1 00	х						0	0	0
(2) Rhonda Strickley Director	1 00	х						0	0	0
(3) Annette Rosta Director	1 00	х						0	0	0
(4) Jonathan Rosenberg Director	1 00	х						0	0	0
(5) Brandy Ellis Director	1 00	х						0	0	0
(6) Eric Airola President Elect	1 00	х						0	0	0
(7) Francene Taylor Director	1 00	х						0	0	0
(8) Rebel Johnson Director	1 00	х						0	0	0
(9) Carrie Corbin Director	1 00	х						0	0	0
(10) Susan Miller President	1 00	х						0	0	0
(11) De'Ann Farmer Director	1 00	х						0	0	0
(12) Simon Evans Director	1 00	х						0	0	0
(13) Eric Nunes SPHR Director	1 00	х						0	0	0
(14) Mike Rickheim President Elect	2 00	х		х				0	0	0
(15) Brian Jensen Past President	2 00	х		х				0	0	0
(16) Rodney Moses President	3 00	х		х				0	0	0
(17) Dan Jordan Sec/Treas/Couns	40 00			х				85,000	0	11,205

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

	(A) Name and Title	(B) A verage hours per week (describe	A verage Position (do not check hours more than one box, week an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimal amount of compense from the		fother ation he on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	C	relate organiza	
	William Warren itive Direc	40 00			Х				225,000	(29,660
	Harold Cooper echnology	40 00				х			160,000	(21,092
· /	Thomas Eckhart embership Dev	40 00					х		160,999	(21,224
(21)	Richard Wehrle nalytics	40 00					х		160,769	(21,193
(22)	DeeAnne Bruin-Faller onal VP	40 00					х		112,331	(14,808
(23)	Lou Akınyemı f Network Op	40 00					х		111,731	(14,729
(24)	Stephen Bickel onal VP	40 00					x		110,375	(14,550
Regio	olidi vr												
1b	Sub-Total							<u> </u> ▶			<u> </u> 		
	Total from continuation sheet:			· ·	<u> </u>	÷		•					
d	Total (add lines 1b and 1c) .							P	1,126,205				148,461
2	Total number of individuals (inc \$100,000 of reportable compe	_				ted	above) who	received more tha	n			
3	Did the organization list any fo on line 1a? <i>If</i> "Yes," complete So					eye •	mploy •	ee, o	or highest compens		3	Yes	No No
4	For any individual listed on line organization and related organization and related organizations.									ch	4	Yes	
5	Did any person listed on line 1a services rendered to the organi									r individual for	5		No
	ection B. Independent Co	atractors											
1	Complete this table for your fiv \$100,000 of compensation froi or within the organization's tax	e highest comper n the organizatio											
	-	(A) ime and business add	Iress						Descr	(B) uption of services		(C) Compen	
			_						2 300.			F =	
											\perp		

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

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

Part N	7.7.7.1	Statement of	or kevenue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
<u> </u>	1a	Federated cam	paigns 1a					
記号	Ь	Membership du	es 1b					
ಕ್ಕ	c		ents 1c					
ઈ. સુંદ	l .	_						
<u>≅.</u> ਰ	d		ations 1d					
<u>∞</u> [Ē	e	Government grants	s (contributions) 1e					
호조	f		ons, gifts, grants, and 1f			į		
ぎる	_	similar amounts no						
≣ਰ	g		butions included in					
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ _	s 1a-1f	▶	0			
ပက	<u> </u>	Total: Add filles						
<u>a</u>				Business Code				
E E	2a	Single job postings	;	561300	60,350	60,350		
ج ھے	ь	Membership Dues	& Assess	561300	7,988,981	7,988,981		
ē.	l c	Gov DOL Grant	_	561300	372,844	372,844		
Š	d	DotJobs Income		561300	214,170	214,170		
33		-			,	· ·		
Ē	e	Annual Meeting Sp	onsorsni —————	561300	14,000	14,000		
Program Service Revenue	f	All other progra	am service revenue					
ž	g	Total. Add lines	s 2a – 2f		8,650,345			
	3		ome (including divident	+	0,030,313			
				. ·	1,887			1,887
	_		ar amounts) stment of tax-exempt bond ;	· · · .	0			1,007
	4				0			
	5	Royalties			· ·			
	_		(ı) Real	(II) Personal				
	6a	Gross rents						
	Ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	me or (loss)		0			
	-		(ı) Securities	(II) O ther				
	7a	Gross amount	(i) Securities	(II) O thei				
	-	from sales of assets other						
		than inventory						
	Ь	Less cost or other basis and						
		sales expenses						
	c	Gain or (loss)						
	d	Net gaın or (los	s)		0			
	8a	Gross income f	_					
÷		events (not inc	luding					
₽		of contributions	 reported on line 1c)					
<u>ĕ</u>		See Part IV, lin						
<u>.</u>			а					
Other Revenu	ь	Less direct ex	penses b					
5	С	Net income or (loss) from fundraising (events 🛌	0			
	9a	Gross income f	rom gaming activities					
		See Part IV, lin	e 19					
			а					
	Ь		penses b					
	C	Net income or (loss) from gaming activ	vities	0			
	10a	Gross sales of	• • •					
		returns and allo						
	١.		a .					
	b		oods sold b	entory	^			
	С		(loss) from sales of inve		0			
	<u> </u>	Miscellaneous	s Kevenue	Business Code	400.00			435.55
	11a	Other Income		900099	136,904			136,904
	Ь							
	С							
	d	All other reven	ue					
	e		ا 11a-11d					
			- · ·	· · · · •	136,904			
	12	Total revenue.	See Instructions	▶				
	I				8,789,136	8,650,345		138,791

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

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) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 0 Grants and other assistance to individuals in the United States See Part IV, line 22 0 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members n 5 Compensation of current officers, directors, trustees, and 500,000 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 2,860,884 Pension plan contributions (include section 401(k) and section 2,235,509 403(b) employer contributions) 440,821 Other employee benefits 188,511 10 Fees for services (non-employees) 11 Management 0 0 Legal 0 Accounting 0 Lobbying Professional fundraising See Part IV, line 17 . . 0 Investment management fees 0 0 g Advertising and promotion . . . 1,182,446 12 0 Office expenses 13 0 14 Information technology 15 Royalties . . 0 166,333 16 178,907 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 0 0 19 Conferences, conventions, and meetings 0 20 21 Payments to affiliates . 0 . . . 22 Depreciation, depletion, and amortization 447,218 23 10,688 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) XPAND set-up and annual fees 1,276,000 404,146 Technical service Seminars and business meetings 258,083 d NASWA Alliance payments 326,908 GreenJobs 372,844 All other expenses 285,161 25 Total functional expenses. Add lines 1 through 24f 0 11,134,459 0 Joint costs. Check here ► 🗆 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

Part X Balance Sheet (A) (B) Beginning of year End of year 762.767 Cash—non-interest-bearing 377,927 1 1 2 2 0 Savings and temporary cash investments 3 0 3 4 1.334.129 1.710.812 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 Schedule L 6 7 0 0 8 0 9 9 Prepaid expenses and deferred charges 4,720,551 10a Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D Less accumulated depreciation 10b 4,372,900 738,443 347,651 b 10c 0 11 11 0 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 14 9,534 9,534 15 15 16 2,844,873 16 2,445,924 Total assets. Add lines 1 through 15 (must equal line 34) . . . 2,279,010 450,465 17 17 Accounts payable and accrued expenses . 18 18 19 3,637,273 19 4,196,692 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 222,797 23 130,797 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 3,307,500 D 26 6,139,080 8,085,454 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balance through 29, and lines 33 and 34. -3,294,207 27 Unrestricted net assets 27 -5,639,530 28 Temporarily restricted net assets 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances -3.294.207 33 -5.639.530 33 34 Total liabilities and net assets/fund balances 2.844.873 2.445.924

Pa	TEXT Reconcilliation 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		8,7	789,13
2	Total expenses (must equal Part IX, column (A), line 25)	2		11,1	L 34,459
3	Revenue less expenses Subtract line 2 from line 1	3		-2,3	345,32
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			294,20
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		-5,6	539,530
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	•	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Additional Data

Software ID: 11000144

Software Version: 2011v1.2

EIN: 30-0008235

Name: DirectEmployers Association Inc

Form 990, Special Condition Description:

Special Condition Description

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

DLN: 93493318017422

OMB No 1545-0047

▽ No

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities).

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name	of the	organız	ation
DirectEr	mployeı	rs Associa	tion Inc

Employer identification number

30-0008235

art I-A	Complete if the	<u>organization is exe</u>	empt under sect	<u>ion 501(c) or</u>	is a section 527	<u>organization.</u>

- in opposition to candidates for public office in Part IV Political expenditures
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).
--

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- 4a Was a correction made? □ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527
- exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- 4 Did the filing organization file Form 1120-POL for this year?
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

Sch	edule C (Form 990 or 990-EZ) 2011					Page 2
Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)	(3) and file	ed Form 5768	(election
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		affiliated grou	up member's nam	e, address, EIN,
<u> </u>	Limits on Lobbying E (The term "expenditures" means a	xpenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
	Total lobbying expenditures to influence public of	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	/ing)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	00		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00			
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)		+		1
h	Subtract line 1g from line 1a If zero or less, ent	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either lissection 4911 tax for this year?	ne 1h or line 1ı, did the	organization file Fo	orm 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t		ection do not h r lines 2a throu	avè to con ıgh 2f on p		ne five
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying non-taxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
_с	Total lobbying expenditures					
d	Grassroots non-taxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768	
	(election under section 501(h)).	

	(election under section 501(h)).					
		(;	a) 		(b)	
		Yes	No	4	A moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912		•	1		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	5 01 (c)(5),	or s	ectio	n
	501(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	II-À,			ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	art IV Supplemental Information	1 -	ı			
	expressional antermanen					

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier Return Reference Explanation efile GRAPHIC print - DO NOT PROCESS

Aggregate value at end of year

DLN: 93493318017422

OMB No 1545-0047

Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization **Employer identification number** DirectEmployers Association Inc 30-0008235 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year)

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?

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose

conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

		Conscitation Lasements complete if the organization	.1011	answered res to rorm 330, rare 14, line 7.	
L	Pu	rpose(s) of conservation easements held by the organization (chec	k all	that apply)	
	\sqcap	Preservation of land for public use (e g , recreation or pleasure)	\sqcap	Preservation of an historically importantly land area	
	Γ	Protection of natural habitat	\sqcap	Preservation of a certified historic structure	
	Γ	Preservation of open space			

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

Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c

Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🛌

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

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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

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

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D Schedule D (Form 990) 2011

Part	Organizations Maintaining Co	llections of Ar	t, His	stori	<u>cal T</u>	reasu	res, or Ot	her	· Similar Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	y of th	he fol	lowing	that ar	e a sıgnıfıcar	nt us	e of its collection	1	
а	Public exhibition		d	Γ	Loar	orexcl	nange progra	ms			
b	Scholarly research		e	Γ	Othe	er					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain ho	w the	y furth	er the o	organization's	s exe	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,						Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	orgar	nızatıor			es" to Form 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontrıb	utions o	or other asse	ts n	ot	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able				Amou	m#	
_	B						⊢.	1 -	A mou	nt	
c d	Beginning balance							lc ld			
e	Additions during the year							la le			
_	Distributions during the year							-			
f n-	Ending balance						[]	Lf	—		
2a	Did the organization include an amount on Fo		ie 217	,					ı	Yes	No
	If "Yes," explain the arrangement in Part XIV				1111	" 1	000 I	D =t	T) / I.o. 10		
Ра	rt V Endowment Funds. Complete	r the organizatio)Prior						NEour Y	ears Back
1a	Beginning of year balance	(a) carrent rear	(5	<i>y</i>	rear	(6)	o rears back	(4)	mee rears back (e)	,, ou	caro back
ь	Contributions										
с	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as			•	'		•		
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are he	ld and a	dministered	for t	he		
	organization by									Yes	No
	(i) unrelated organizations		•					•	3a(i)		<u> </u>
	(ii) related organizations				 Iula Di			•	3a(ii)	<u> </u>	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIV the intended uses of the	•				· · ·		•	3b		<u> </u>
	t VI Land, Buildings, and Equipme					10					
	t VI Lund, Buildings, and Equipme	inti see roim s.	,,,,			or other	(b)Cost or ot	hor	(c) Accumulated		
	Description of property					estment)	basis (other		depreciation	(d) B	ook value
1a l	Land										
b i	Buildings										
c l	Leasehold improvements						126,	377	97,934		28,443
d i	Equipment						999,	684	892,550		107,134
_e (Other	<u> </u>	_				3,594,	490	3,382,416		212,074
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B,), line	10(c)	.)			🕨		347,651
									Schedule D (F	orm 9	90) 201:

Part VIII Investments—Other Securities. See	-orm 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)	(2)200K Yaras	Cost or end-of-year	market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
	<u> </u>	<u> </u>	
	 		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See		13	
Part VIII Investments—Frogram Related. See	Torin 990, Part X, line .	(c) Method of va	Juntun
(a) Description of investment type	(b) Book value	Cost or end-of-year	
		Cost of end-of-year	market value
	1		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	tion	(1) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	าts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,789,136
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,134,459
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,345,323
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 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,345,323
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	8,789,136
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	8,789,136
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	8,789,136
	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	per	11,134,459
-	statements	1	11,134,439
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	11,134,459
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	11,134,459
	rt XIV Supplemental Information	N /	lines the and 25
Cor	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	aιι ΙV ,	nnes id and ∠d,

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 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

Ident if ier	Ret urn Reference	Explanation
Part X		Directemployers Association, Inc (The Association) has received tax-exempt status under Internal Revenue Code Section 501(c)(6) effective January 1, 2077 Accordingly, no provision for income taxes has been made in these statements Management believes that the Association has adequately addressed all relevant tax positions and that there are no unrecorded tax liabilities. The Association believes it is no longer subject to income tax examination for years prior to 2008.

DLN: 93493318017422

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

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Dile	ectemployers Association inc		30-0008235			
Pa	rt I Questions Regarding Compensation	1	<u> </u>			
					Yes	Νo
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments					
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orgonic reimbursement orprovision of all the expenses descr			1b		
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all th	at app	ly			
	Compensation committee	_	Written employment contract			
	✓ Independent compensation consultant Form 990 of other organizations	<u> </u>	·			
	Form 990 of other organizations	Į	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	'art V I	II, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control [payme	nt?	4a		Νo
ь	Participate in, or receive payment from, a supplemen	ital no	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	sed co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide t	he applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st com	pplete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1 a	a, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 67 If "Yes," d			7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		
9	If "Yes" to line 8 did the organization also follow the	rehuti	table presumption procedure described in Regulations			

section 53 4958-6(c)?

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

			•						
(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) William Warren	(1) (11)	225,000				29,660	254,660		
(2) Thomas Eckhart	(ı) (ıı)	160,999				21,224	182,223		
(3) Richard Wehrle	(ı) (ıı)	160,769				21,193	181,962		
(4) Harold Cooper	(1) (11)	160,000				21,092	181,092		

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

	Identifier	Return Reference	Explanation
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Schedule J (Form 990) 2011

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As Filed Data -

DLN: 93493318017422

0 MB No. 1545 0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2011

Open to Public Inspection

Name of the organization DirectEmployers Association Inc							E	mployer i	dent if ica	tion numbe	г
Directemployers Association inc							3	0-00082	35		
Part I Excess Benefit Trai	ısacti	ions (s	ection 501	(c)(3) a	and section 501	(c)(4)	organ	izations	only).		
Complete if the organizat	ion ans	wered "	Yes" on For	m 990, F	Part IV , line 25a o	or 25b,	or Form	990-EZ,	Part V , I		
1 (a) Name of disqu		person			(b) Desc	ription	of trans	action			rrected?
					'				Yes	No	
											
											-
2 Enter the amount of tax impos	ad an t	ha orani			diagnalified nero	one du	una tha	uaar unda	<u> </u>	<u> </u>	
section 4958		ne organ		-	uisquaiilleu pers		_	· _	'		
3 Enter the amount of tax, if any	. on line	e 2. abo							• \$		
	, •		,						T		
Part II Loans to and/or l											
Complete if the organiz	<u>zation a</u> T	nswere	d "Yes" on F I	orm 990), Part IV, line 26 T	, or For I	m 990-			<u>a</u>	
		oan to				(e)	In	(f) Approv		(g)Writte	en
(a) Name of interested person and purpose		om the zation?	(c)Orig		(d)Balance due	defa	ult?	by boar		agreemen	ıt?
purpose			principal amount				1	commit			
	То	From				Yes	No	Yes	No	Yes	No
	 						+				
	\vdash						+				
	1										
							+				
	<u> </u>	<u> </u>		▶ \$	1						
Part IIII Grants or Assistar					Persons.						
Complete if the orga						/, line	27.				
(a) Name of interested pers					en interested per			nount of a	rant or to	pe of assist	tanco
(a) Name of interested pers			an	nd the or	ganızatıon		(C)A1	ilount or g	Tant or ty	pe or assist	
		1									

Part IV Business Transactions Involving Interested Persons.

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

Complete ii the organizatio	ii alisweled les oli	TOTHI 330, Part IV, III	ie 20a, 20b, 0i 20c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
1) Dan Jordan	O fficer	68,000	A dvertising		Νo

Part V Supplemental Information

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

Ident if ier	Ret urn Reference	Explanation
		Part IV - Business Transactions Involving Interested Persons - Directemployers Association, Inc (Association) is a sponsor of Jordan Racing, a professional truck racing team owned by Dan Jordan, whom serves as Secretary, Treasurer and Chief Counsel for the Association As a sponsor, the Association's name and logo is displayed prominently with signage on the truck, uniforms, and in other areas around the track at all racing events. The sponsorship is intended to promote the Association's JO Bcentral national labor exchange through visibility in the racing venue and the media. The amount paid by the Association for its sponsorship is included in its advertising expense.

Schedule L (Form 990 or 990-EZ) 2011

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As Filed Data -

DLN: 93493318017422

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization
DirectEmployers Association Inc

30-0008235

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	DirectEmployers Association, Inc. makes its governing documents, conflict of interest policy and financial statements, as applicable, available to the public upon written request made to the attention of our Executive Director and received at our corporate office address
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	DirectEmployers Association Inc 's Board of Directors determine and sets all staffing compensation rates, which are based on periodic through reviews of all related issues, salary surveys, consultation with independent persons, review of comparable data and deliberation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	DirectEmployers Association Inc. annually requests each officer and member of the Board of Directors complete a conflict of interest policy questionnaire. The policy includes statements regarding other employment, being related to anyone on the board and other items that may create an appearence of a potential independence issue. The identification, evaluation and resolution of those issues are discussed with the appropriate level of management or members of the Board of Directors.
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	DirectEmployers Association, Inc 's Form 990 and all related schedules, statements and attachments are reviewed and approved by the Executive Director, applicable officers and appropriate representative(s) from the Board of Director's Executive Committee prior to finalizing and filing these tax returns with the Internal Revenue Service