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DLN: 93493317065094

Form **990** 

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 cal	lendar year, or tax year beginning	, 01-01-2013 , 2013, and endir	ng 12-31	-2013				
		applicable	C Name of organization DirectEmployers Association Inc				D Employ	er ide	entification number	
	ress c	_	Doing Business As				30-00	0823	5	
	me cha	_								
_	ıal retu			aıl ıs not delivered to street address)	Room/suite	2	E Telepho	ne nun	mber	
	mınate		9002 S Purdue Road 100				(317)	874-	9000	
_		return	City or town, state or province, cour Indianapolis, IN 46268	itry, and ZIP or foreign postal code			(==-/			
M Apı	olicatio	n pending	,				<b>G</b> Gross re	ceipts	\$ 10,785,657	
			F Name and address of prin	cipal officer			this a group	retur		
			9002 S Purdue Road 100			sui	oordinates?		┌ Yes ┌ No	
			Indianapolis, IN 46268				all subordir	nates	┌ Yes 🔽 No	
—— т Та	x-exer	npt status		ınsert no )	17		luded? 'No " attach	a list	(see instructions)	
				1113ETC 110 / 1 4317(d)(1) 01 / 32	.,	_				
			w directemployers org	_		1	oup exempti		ımber <b>►</b>	
		_	Corporation Trust Associatio	n Other 🟲		<b>L</b> Year of	formation 200	)1 <b>N</b>	State of legal domicile IN	
Pa	rt I		nmary							
			lescribe the organization's mission ide a cost-effective national emp		ahor mar	ket efficie	ency and refle	ects c	our nation's diverse	
		workford		oyment system that improves it		Ket ellicie	and rem			
Governance										
<u> </u>										
95e	2	Check t	his box দ if the organization dis	scontinued its operations or disp	posed of	more thar	125% of its	net a	ssets	
	_							ı _	1	
Activities &			of voting members of the govern		3 4	16				
ĝ			of independent voting members of independent voting members of				• •	5	16 52	
<u>ş</u>			umber of individuals employed in calendar year 2013 (Part V, line 2a)						16	
•			related business revenue from P	• •				6 7a	0	
	1		elated business taxable income fi					7b		
						Р	rior Year		Current Year	
_	8	Contr	ibutions and grants (Part VIII, li				0			
Ravenue	9	Program service revenue (Part VIII, line 2g)					9,642,8	-	10,484,029	
364	10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)						20,302	
_	11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line					72	281,326	
	12		· · · · · · · · · · · · · · · ·				9,651,362		10,785,657	
	13		s and sımılar amounts paıd (Part						0	
	14		its paid to or for members (Part I						0	
sΩ	15	Saları 5–10	es, other compensation, employee benefits (Part IX, column (A), lines						5,365,663	
Expenses	16a		, ssional fundraising fees (Part IX,	column (A), line 11e)			4,655,9		0	
χĐę	ь		undraising expenses (Part IX, column (D)							
Ш	17		expenses (Part IX, column (A), I	• •	<del>.</del> .		4,908,8	21	5,927,941	
	18	Total	expenses Add lines 13-17 (mus	st equal Part IX, column (A), line	e 25)		9,564,8	04	11,293,604	
	19	Rever	nue less expenses Subtract line	18 from line 12			86,5	58	-507,947	
. 0 € . 0 € . 0 €						Beginn	ing of Currer Year	it	End of Year	
Net Assets or Fand Balances	20	Total	assets (Part X, line 16)				3,018,0	87	3,003,821	
A AS	21		liabilities (Part X, line 26)				9,097,1	-	9,590,815	
Ž.	22		ssets or fund balances Subtract				-6,079,0		-6,586,994	
Pa	t II		nature Block							
my k	nowle	dge and	perjury, I declare that I have exa belief, it is true, correct, and com nowledge							
		****					2014-11-13			
Sigr		1.	ature of officer				Date			
Her	=		Jordan Sec/Treas/Couns e or print name and title							
		11 1	Print/Type preparer's name	Preparer's signature	Dat	te c	heck I if	PTIN		
Paid	t	<u> </u>	Rickey Roysdon CPA	<u> </u>		s	elf-employed	P0064	5916	
	- pare		Firm's name 🕨 Gauthier & Kimmerling	ЩС			irm's EIN 🕨			
	On		Fırm's address 🟲 7340 Shadeland Statior	Ste 100		Р	hone no (317)	572-1	1130	

Indianapolis, IN 46256

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

✓ Yes No

Other program services (Describe in Schedule O )
(Expenses \$ including grants of \$ ) (Revenue \$ )

Part IV Checklist of Required Schedule
--

			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		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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 $I^{2}$	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\bullet}$	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 $\sqrt[N]{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	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
	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than $$15,000$ of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e$ ? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		

Par	t IV Checklist of Required Schedules (continued)				
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?				
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No	
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	or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)				
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes		
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No	
34				No	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes		

	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   16		Yes	NO
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable  1b  1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		N
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u> </u>		
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
b	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
-	file Form 8282?	<b>7</b> c		
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 contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		N
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		N
О	Did the organization make a distribution to a donor, donor advisor, or related person?	90		N
	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	-		
.1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		N
	Note. See the instructions for additional information the organization must report on Schedule O			<u> </u>
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand			[
С		•		

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

Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	$\vdash$	165	
	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		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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?	10b		
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 this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done			
13		12c	Yes	
		12c 13	Yes Yes	
14	Did the organization have a written whistleblower policy?	13	Yes	
14 15	Did the organization have a written whistleblower policy?			
15	Did the organization have a written whistleblower policy?	13	Yes	
15 a	Did the organization have a written whistleblower policy?	13 14 15a	Yes Yes	
15 a	Did the organization have a written whistleblower policy?	13	Yes	
15 a b	Did the organization have a written whistleblower policy?	13 14 15a	Yes Yes	
15 a b 16a	Did the organization have a written whistleblower policy?	13 14 15a	Yes Yes	No
15 a b 16a	Did the organization have a written whistleblower policy?	13 14 15a 15b	Yes Yes	No
15 a b 16a b	Did the organization have a written whistleblower policy?	13 14 15a 15b	Yes Yes	No
15 a b 16a b	Did the organization have a written whistleblower policy?	13 14 15a 15b	Yes Yes	No
15 a b 16a b	Did the organization have a written whistleblower policy?	13 14 15a 15b	Yes Yes	No

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

interest policy, and financial statements available to the public during the tax year

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) (B) (C) (D) (E)									(F)	
Name and Title	Average hours per week (list any hours	more pers	than on is	(do one bot	not box h ar or/tr	offic ustee	ess er e)	Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Rhonda Stickley SPHR	3 00	х		х				0	0	0
President (2) Padrau Massa	0 00				_					
(2) Rodney Moses Past President	2 00	x		х				0	0	0
(3) Francene Taylor	2 00									
President Elect	0 00	X		Х				0	0	0
(4) De'Ann Farmer	2 00									
Director	0 00	X						0	0	0
(5) Eric Nunes	1 00									
Director	0 00	X						0	0	0
(6) Carrie Corbin	1 00									
		x						0	0	0
Oirector (7) Eric Airola	0 00									
		х						0	0	0
Oirector (8) Brandy Ellis	0 00	-								
		x						0	0	0
Oirector (9) Simon Evans	0 00									
• •	1 00	x						0	0	0
Director (10) B	0 00									
(10) Brian Jensen	1 00	x						0	0	0
Director	0 00									
(11) Carle Davidson	1 00	×						0	0	0
Director	0 00									
(12) Angelia Grilliot	1 00	×						0	0	0
Director	0 00							ŭ		
(13) Rebel Johnson	1 00	x						0	0	0
Director	0 00							ŭ	9	
(14) Jonathan Rosenberg PHR	1 00	×						0	0	0
Director	0 00	^						ľ	U	U
(15) Annette Rosta	1 00	Ü								
Director	0 00	X						0	0	0
(16) Kathleen Shaffer	1 00									
Director	0 00	X						0	0	0
(17) William Warren	40 00									
Executive Direc	0 00			Х				225,962	0	42,958
										Form <b>990</b> (2013)

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

Organizations below dotted line   Organizations below dotted line   Organizations below dotted line   Organizations   Organi	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	checl c, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	comper from		ated of other sation the
15,757   1		below	Individual trustee or director	Institutional Trustee	(W- 2/1099- MISC)  MISC)  Formula to a misc compensated  Cofficer  Key employee		(W- 2/1099- MISC)		and re	lated			
19   Hamilto Gooper	(18) Dan Jordan	40 00			X				82,885		0		15,757
## Technology  ## Te	Sec/Treas/Couns (19) Harold Cooper										+		
(20) Richard Wehrle  (20) Richard Wehrle  (20) Antonio Dev  (21) Tran Foldhard  (22) Antony Salvey  (23) Heather Holfman  (24) Antony Salvey  (25) Heather Holfman  (26) Antony Salvey  (27) Heather Holfman  (28) Antonio Dev  (29) Heather Holfman  (29) Antonio Dev  (20) Antony Salvey  (20) Heather Holfman  (20) Antonio Dev  (20) Heather Holfman  (20) Antonio Dev  (22) Antonio Salvey  (23) Heather Holfman  (24) Antonio Salvey  (25) Heather Holfman  (26) Antonio Salvey  (27) Heather Holfman  (28) Antonio Salvey  (29) Heather Holfman  (20) Antonio Salvey  (29) Heather Holfman  (20) Antonio Salvey  (20) Heather Holfman  (20) Antonio Salvey  (21) Antonio Salvey  (22) Antonio Salvey  (23) Heather Holfman  (24) Antonio Salvey  (25) Heather Holfman  (26) Antonio Salvey  (27) Antonio Salvey  (28) Heather Holfman  (29) Antonio Salvey  (29) Heather Holfman  (20) Antonio Salvey  (20) Heather Holfman  (20) Antonio Salvey  (21) Antonio Salvey  (22) Antonio Salvey  (23) Heather Holfman  (24) Antonio Salvey  (25) Heather Holfman  (26) Antonio Salvey  (27) Antonio Salvey  (28) Heather Holfman  (27) Antonio Salvey  (29) Heather Holfman  (20) Antonio Salvey  (21) Antonio Salvey  (22) Antonio Salvey  (23) Heather Holfman  (24) Antonio Salvey  (25) Heather Holfman  (26) Antonio Salvey  (27) Antonio Salvey  (28) Antonio Salvey  (29) Antonio Salvey  (29) Antonio Salvey  (20) Antonio Salvey  (21) Antonio Salvey  (21) Antonio Salvey  (21) Antonio Salvey  (22) Antonio Salvey  (23) Antonio Salvey  (24) Antonio Salvey  (25) Heather Holfman  (26) Antonio Salvey  (27) Antonio Salvey  (28) Antonio Salvey  (28) Antonio Salvey  (29) Antonio Salvey  (20) Antonio Salvey  (21) Antonio Salvey  (22) Antonio Salvey  (23) Antonio Salvey  (24) Antonio Salvey  (25) Antonio Salvey  (26) Antonio Salvey  (27) Antonio Salvey  (28) Antonio Salvey  (28) Antonio Salvey  (28) Antonio Salvey  (29) Antonio Salvey  (20) Antonio Salvey  (20) Antonio Salvey  (20) Antonio Salvey  (21) Antonio Salvey  (21) Antonio Salvey  (22) Antonio Salvey  (23) Antonio Salvey  (24)						х			160,000		0		30,418
10   10   10   10   10   10   10   10	(20) Richard Wehrle										+		
We Membership Dev 0 0 0	VP-Product Dev	0 00					X		218,077		0		41,459
We Membershap Dev  0 00  25,205 Assistant W  0 000  27,420  Assistant W  0 000  27,420  Regional VP  0 000  27,420  144,231  0 27,420  150  160  170  180  180  180  180  180  180  18	(21) Tom Eckhart	40 00					Ţ		164 142				21 206
Assistant VP  O 0 0	VP-Membership Dev	0 00							164,143		1		31,200
Assestant VP 0 00	(22) Anthony Selvey	40 00					×		132,580		0		25,205
Regional VP    0 00	Assistant VP	<b>-</b>	-						·		+		
1b Sub-Total							×		144,231		0		27,420
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)	Regional VP	0 00									+		
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)											+		
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)											_		
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)													
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)													
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)													
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)											+		
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)											+		
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)											$\perp$		
d Total (add lines 1b and 1c)				•	•								
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization   Section B. Independent Contractors  1 Complete this table for your five highest compensation from the organization Report compensation from the organization of the organization from the organization for the calendar year ending with or within the organization's tax year  (A) Description of services  Occompensation		•		•	•		<b>.</b> ⊢		1.127.878				214.423
\$100,000 of reportable compensation from the organization      Yes   No						hove	) who	rec					
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual							.,		erved more than				
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual												Voc	No.
on line 1a? If "Yes," complete Schedule J for such Individual	3 Did the organization list any <b>former</b> off	icer director or	trustea	- kev	/ em	nnlar	vee o	r hic	thest compensated	d employee		165	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Individual											3		No
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	4 For any individual listed on line 1a, is t	he sum of report	table c	ompe	ensa	ition	and	the	r compensation fro	m the			
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		greater than \$1	50,000	ጋ? If	"Yes	s," c	omple	te So	chedule J for such				
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 Report compensation for the calendar year ending with or within the organization's tax year  (A)  (B)  (C)  Compensation  Compensation  Description of services	<u> </u>							<u> </u>	4	Yes			
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 Report compensation for the calendar year ending with or within the organization's tax year  (A)  (B)  (C)  Description of services  Compensation									_		5		Nο
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  Description of services  Compensation										<u> </u>	-		
compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  Description of services  Compensation													
(A) Name and business address  (B) Description of services  Compensation												ax year	
	(A) (B)							Τ	(C)				
	Name and	pusiness address							Descriptio	ii oi services	+	compen	sauon
											Ţ		
											+		
											Ŧ		

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

			ule O contains a respo	inse of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ıes <b>1</b> b					
وَ ق	c	Fundraising ev	ents <b>1</b> 0	:				
iffs,	d	Related organiz	zations 1d	1				
<u>.</u>	e	Government grant	s (contributions) <b>1e</b>					
Sir	f	All other contributi	ons, gifts, grants, and <b>1f</b>			-		
uti Per	'	sımılar amounts no				ļ		
클	g	Noncash contributi 1a-1f \$	ons included in lines					
, E	h	Total. Add line	s 1 a - 1 f		О			
				Business Code				
E	2a	Annual Meeting Sp	oonsorshi	561300	83,115	83,115		
e ke	ь	DotJobs Income		561300	319,467	319,467		
ъ П	c	Employ Media Inco	ome	561300	94,319	94,319		
2	d	Membership Dues	& fees	561300	9,931,677	9,931,677		
Program Service Revenue	e	Single job postings		561300	55,451	55,451		1
튵	f	All other progra	am service revenue		,	·		
Š		T-4-1 A dd l	- 2- 26		10 404 020			
	g 3		s 2a-2f		10,484,029			
			ar amounts)		20,302			20,302
	4		stment of tax-exempt bond	· · · · · ·	0			
	5	Royalties .			0			
	6a	Gross rents	(ı) Real	(II) Personal				
	b	Less rental						
	_	expenses Rental income						
		or (loss)			0			
	d	Net rental inco	me or (loss)  (i) Securities	(II) O ther	0			
	7a	Gross amount	(i) Securities	(II) O tilei				
		from sales of assets other						
	ь	than inventory Less cost or						
		other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (los	ss)	· · · · · •	0			
une	8a	Gross income fevents (not inc	from fundraising luding					
Other Revenue			s reported on line 1c) ne 18 <b>a</b>					
ţ.	ь		penses b					
0	С		(loss) from fundraising -	events 🛌	0			
	9a		from gaming activities ne 19					
	ь	Less direct ex	penses b	,				
	С	Net income or	(loss) from gamıng act	ivities	0			
	10a	Gross sales of returns and allo	• •					
	ь	Less costofa	oods sold <b>b</b>					
			(loss) from sales of inv	rentory 🛌	o			
		Mıscellaneou		Business Code				
	11a	Insurance Inco	ome	900099	247,500			247,500
	b	Otherincome		900099	33,826			33,826
	С							
	d		ue					
	e	Total. Add lines	s 11a-11d		281,326			
	12	Total revenue.	See Instructions .		10,785,657	10,484,029		301,628

	,	
Part IX	Statement of Functional Expenses	
Section 50	1(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX		<u></u>	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	o			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	468,847			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	3,021,581			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	85,466			
9	Other employee benefits	578,109			
10	Payroll taxes	1,211,660			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	1,062,633			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	205,578			
17	Travel	241,214			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	118,147			
23	Insurance	43,433			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	XPAND set-up and annual fees	1,723,400			
b	NASWA Alliance payments	996,100			
c	Technical service	344,107			
d	Seminars and business meetings	330,041			
e	All other expenses	863,288			
25	Total functional expenses. Add lines 1 through 24e	11,293,604	0	0	C
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	s Part X	(A) Beginning of year		· · · · · · · · · · · · · · · · · · ·
	1	Cash-non-interest-bearing		384,616	1	356,958
	2	Savings and temporary cash investments			2	0
	3	Pledges and grants receivable, net			3	0
	4	Accounts receivable, net		2,204,863	4	1,965,558
ţ.	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees. Complete Part Schedule L	ectors, trustees, key II of		5	0
	6	Loans and other receivables from other disqualified persons (as case 4958(f)(1)), persons described in section 4958(c)(3)(B), and color and sponsoring organizations of section $501(c)(9)$ voluntary emporganizations (see instructions) Complete Part II of Schedule L	ntributing employers		6	0
4ssets	7	Notes and loans receivable, net			7	0
₹	8	Inventories for sale or use			8	0
	9	Prepaid expenses and deferred charges			9	0
	10a	Land, buildings, and equipment cost or other basis Complete	10a 4,820,272			
	ь	Less accumulated depreciation	<b>10b</b> 4,615,110	314,923	10c	205, 162
	11	Investments—publicly traded securities		11	0	
	12	Investments—other securities See Part IV, line 11		12	0	
	13	Investments—program-related See Part IV, line 11		13	0	
	14	Intangible assets			14	0
	15	Other assets See Part IV, line 11		113,685	15	476,143
	16	Total assets. Add lines 1 through 15 (must equal line 34)		3,018,087	16	3,003,821
	17	Accounts payable and accrued expenses		1,076,461	17	1,348,462
	18	Grants payable			18	
	19	Deferred revenue		4,780,673	19	5, 190, 167
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedu	ıle D		21	
lities	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified	s, trustees,			
Liabili		persons Complete Part II of Schedule L			22	
$\exists$	23	Secured mortgages and notes payable to unrelated third parties			23	59,686
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part	l third parties, X of Schedule			
		D		3,240,000	25	2,992,500
	26	Total liabilities. Add lines 17 through 25		9,097,134	26	9,590,815
ces		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ lines 27 through 29, and lines 33 and 34.	and complete			
<u>8</u>	27	Unrestricted net assets		-6,079,047	27	-6,586,994
e D	28	Temporarily restricted net assets			28	
Ξ	29	Permanently restricted net assets			29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	e ► □ and			
S	30	Capital stock or trust principal, or current funds			30	
ά	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
	32	Retained earnings, endowment, accumulated income, or other fun	ds		32	
₹	33	Total net assets or fund balances		-6,079,047	33	-6,586,994
_	34	Total liabilities and net assets/fund balances		3,018,087	34	3,003,821

Pai	t XI	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		10,7	785,657
2	Total	expenses (must equal Part IX, column (A), line 25)	2		11,2	293,604
3	Rever	ue less expenses Subtract line 2 from line 1	3		- 5	507,947
4	Neta	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-6,0	79,047
5	Netu	nrealized gains (losses) on investments	5			
6		ed services and use of facilities	6			
7	Inves	tment expenses	7			
8		period adjustments	8			
9		changes in net assets or fund balances (explain in Schedule O)	9			
	colum		10		-6,5	86,994
Par	t XII	Financial Statements and Reporting				_
		Check if Schedule O contains a response or note to any line in this Part XII	• •			<u>.  </u>
					Yes	No
1		organization changed its method of accounting from a prior year or checked "Other," explain in ule O				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		,'check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	wed on			
	Γs	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b	Yes	
		,'check a box below to indicate whether the financial statements for the year were audited on a sepa consolidated basis, or both	rate			
	<b>▽</b> s	eparate basis				
c		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2 <b>c</b>	Yes	
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i ule O	n			
	Single	esult of a federal award, was the organization required to undergo an audit or audits as set forth in th Audit Act and OMB Circular A-133?	е	За	Yes	
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the ed audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	Yes	

DLN: 93493317065094

## OMB No 1545-0047

Inspection

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

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

- 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
- ◆ Section 527 organizations Complete Part I-A only

exempt function activities

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, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** DirectEmployers Association Inc 30-0008235 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes Was a correction made? 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 1

Did the filing organization file Form 1120-POL for this year? 4 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

Enter the amount of the filing organization's funds contributed to other organizations for section 527

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

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

Sch	hedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
P	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Donk IV an			a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
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:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thre	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

	pach "Vee" recognize to lines to through to below r	arounds in Part IV a detailed description of the lebbying	( a	1)	(1	b)
	each "Yes" response to lines 1a through 11 below, p /ity.	rovide in Part IV a detailed description of the lobbying	Yes	No	Amo	ount
-	legislation, including any attempt to influence through the use of	empt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
a	Volunteers?					
)		ion in expenses reported on lines 1c through 1i)?				
:	Media advertisements?					
ı	Mailings to members, legislators, or the public Publications, or published or broadcast states	<b>-</b>				
e F	Grants to other organizations for lobbying pur	<u> </u>				
		·				
) 1	Direct contact with legislators, their staffs, go Rallies, demonstrations, seminars, conventio					
•	Other activities?	is, speeches, lectures, or any similar means?				
	Total Add lines 1c through 1i	-				
	_	tion to be not described in section 501(c)(3)?	ı			
,	If "Yes," enter the amount of any tax incurred					
2		by organization managers under section 4912				
	If the filing organization incurred a section 49		I			
		n is exempt under section 501(c)(4), section 5	501(c	)(5), c	r sect	ion
	501(c)(6).					
	W 1 1 1 1 1 1 1 (000)			_	Y •	-
	Were substantially all (90% or more) dues re-	•		L	1	1
	Did the organization make only in-house lobb			L	2 Y e	_
		ing and political expenditures from the prior year?	-01(-)	\(\bullet\)	3	1
EL		n is exempt under section 501(c)(4), section 5 BOTH Part III-A, lines 1 and 2, are answered "				
	Dues, assessments and similar amounts from	members	1			
	Section 162(e) nondeductible lobbying and poexpenses for which the section 527(f) tax was	olitical expenditures (do not include amounts of political as paid).				
1	Current year		2a			
)	Carryover from last year		2b			
3	Total	N4.V4.V	2c			
		e)(1)(A) notices of nondeductible section 162(e) dues	3			
		c exceeds the amount on line 3, what portion of the excess e reasonable estimate of nondeductible lobbying and				
	political expenditure next year?	e reasonable estimate of hondeductible lobbying and	4			
	Taxable amount of lobbying and political expe	nditures (see instructions)	5			
2	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line irt II-B, line 1 Also, complete this part for any a	1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	ıp lıst),	Part II	-A, line	2, an
_	Return Reference	Explanation				
	l					

201104410 0 (101111 330 01 330 12) 2013	1 age -			
Part IV Supplemental Information	on <i>(continued)</i>			
Return Reference	Explanation			
l				

Schedule D (Form 990) 2013

DLN: 93493317065094

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

# **Supplemental Financial Statements**

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

Open to Public

al Revenue Service	tructions is at <u>www.irs.gov/101111990</u> .	Inspection
ame of the organization rectEmployers Association Inc		Employer identification number
ectimployers association inc		30-0008235
art I Organizations Maintaining Donor		1
organization answered "Yes" to Form	<del></del>	1 (1) 5
Total number at and of year	(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)		
Aggregate value at end of year		
Did the organization inform all donors and donor ac	dvicers in writing that the accets held in der	an advised
funds are the organization's property, subject to th	ne organization's exclusive legal control?	☐ Yes ☐ No
Did the organization inform all grantees, donors, as used only for charitable purposes and not for the b conferring impermissible private benefit?	<del>_</del>	
rt III Conservation Easements. Complet	te if the organization answered "Yes" t	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the	e organization (check all that apply)	
$\Gamma$ Preservation of land for public use (e g , recrea	ition or education)   Preservation of ar	n historically important land area
Protection of natural habitat	Preservation of a	certified historic structure
Preservation of open space		
Complete lines 2a through 2d if the organization h	eld 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 easemer	nts	2b
Number of conservation easements on a certified l		2c 2c
Number of conservation easements included in (c)	• •	
historic structure listed in the National Register	,,	2d
Number of conservation easements modified, trans	sferred, released, extinguished, or terminate	ed by the organization during
the tax year ►		
Number of states where property subject to conse	rvation easement is located 🛌	
Does the organization have a written policy regard enforcement of the conservation easements it hold		dling of violations, and <b>Yes No</b>
Staff and volunteer hours devoted to monitoring, in	nspecting, and enforcing conservation ease	ments during the year
A mount of expenses incurred in monitoring, inspec	cting, and enforcing conservation easement	s during the year
<b>▶</b> \$		
Does each conservation easement reported on line and section $170(h)(4)(B)(II)$ ?	e 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation eas	of the footnote to the organization's financia	
t III Organizations Maintaining Collect Complete if the organization answered		or Other Similar Assets.
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar a service, provide, in Part XIII, the text of the footnotes.	assets held for public exhibition, education,	or research in furtherance of public
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar a service, provide the following amounts relating to the	AS 116 (ASC 958), to report in its revenue assets held for public exhibition, education,	statement and balance sheet
(i) Revenues included in Form 990, Part VIII, line	e 1	<b>►</b> \$
(ii) Assets included in Form 990, Part X		
If the organization received or held works of art, hi following amounts required to be reported under SF		or financial gain, provide the
Revenues included in Form 990, Part VIII, line 1	· · · · ·	<b>►</b> \$
Assets included in Form 990, Part X		F \$
ASSECT METALES IN FORM SOUTH A		F Ψ

Par	<b>TIT</b> Organizations Maintaining Co	llections of Art,	, HIS	<u>tori</u>	cal Tre	easu	res, or O	the	<u>r Similar As</u>	sets	<b>5</b> (coi	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	eck	any of th	ne follo	owing that a	re a	significant use	of it	s	
а	Public exhibition		d	Γ	Loan o	rexch	nange progra	ams				
b	Scholarly research		e	$\Gamma$	Other							
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and explai	ın how	the	y further	the o	rganızatıon	's ex	empt purpose ı	n		
5	During the year, did the organization solicit	or receive donations	of art	t, hıs	torical t	reasu	res or other	sım	ılar			
	assets to be sold to raise funds rather than t									<b>□</b> Υ	es	┌ No
Par	Part IV, line 9, or reported an an						answered	1 "Y	es" to Form 9 ————	90,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	dıary	for c	ontribut	ions o	r other ass	ets r	ot	┌ <b>Y</b> ∢	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	/ıng t	table		_					
								_	An	noun	t	
С	Beginning balance						<u> </u>	1c				
d	Additions during the year						L	1d				
е	Distributions during the year						L	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							Γ Y∙	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natı	on has b	een p	rovided in P	art >	KIII			Γ
Pa	rt V Endowment Funds. Complete	f the organization	ans	wer								
		(a)Current year	(b)	Prior	year	<b>b (c)</b> Tv	vo years back	(d) <sup>1</sup>	hree years back	(e)F	our ye	ars back
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and 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 cur	rent year end balanc	e (line	e 1 g	, column	(a)) h	eld as					
а	Board designated or quasi-endowment 🕨											
ь	Permanent endowment ▶											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	ation t	hat	are held	and a	dmınıstered	for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•	3a(	-		
	(ii) related organizations								3a(	<del></del>		
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second organization.	· · · · · · · · · · · · · · · · · · ·						•	3l	<u> </u>		
	t VI Land, Buildings, and Equipme					2 00 14	ared 'Vec'	' to	Form 990 Da	rt T\	/ lin	
I GI	11a. See Form 990, Part X, line		iie oi	gai	nzation	answ	reieu ies	ιο	101111 330, Fa	11 ( 1 )	v , III	
	Description of property				) Cost or		( <b>b)</b> Cost or o basis (othe		(c) Accumulate depreciation	d (	( <b>d)</b> Bo	ok value
	Land			1						$\top$		
	Buildings									$\top$		
	Leasehold improvements						148	3,706	129,3	97		19,309
	Equipment						1,024		<b>†</b>	-		56,462
	Othor						3,647			-		129,391
	I. Add lines 1a through 1e (Column (d) must e			/			•	<u>.                                      </u>		-		205,162

Part VII	Investments—Other Securities. Cor See Form 990, Part X, line 12.	nplete if the organization	answered 'Yes' to Form 990, Part IV, line 11
	(a) Description of security or category	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financia	(including name of security) al derivatives		Cost or end-or-year market value
	-held equity interests		
Other			
	mn (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>	
Part VIII	Investments—Program Related. Co See Form 990, Part X, line 13.	omplete if the organization	n answered 'Yes' to Form 990, Part IV, line 1
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Total. (Colui	nn (b) must equal Form 990, Part X, col (B) line 13 )	<b>F</b>	
Part IX			0, Part IV, line 11d See Form 990, Part X, line 15
/1 \ D = = = = =	(a) Descr	ption	(b) Book value
(1) Design (2) Other	ated Casii		423,8 52,2
(2) 0 (110)			32,2
Total. (Colu	ımn (b) must equal Form 990, Part X, col.(B) line 1	5.)	
Part X			to Form 990, Part IV, line 11e or 11f. See
	Form 990, Part X, line 25.		
1	(a) Description of liability	(b) Book value	
Federal inc			
Retirement	Liability	2,992,500	
Total. (Colui	nn (b) must equal Form 990, Part X, col (B) line 25) 🗼	2,992,500	
	for uncertain toy positions In Dort VIII provide	<del></del>	as organization's financial statements that

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	per R	<b>leturn</b> Complete If
1	Total revenue, gains, and other support per audited financial statements	1	10,785,657
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	10,785,657
4	Amounts 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		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	10,785,657
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	11,293,604
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 XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	11,293,604
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	11,293,604
Part	XIII Supplemental Information		
Part	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2l V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to mation		de any additional
	Return Reference Explanation		
Part X	FIN48 Footnote  DirectEmployers Association, Inc. (The Association) has received tax-eight Revenue Code Section 501(c)(6) effective January 1, 2077. Accordingly taxes has been made in these statements. Management believes that the addressed all relevant tax positions and that there are no unrecorded tax believes it is no longer subject to income tax examination for years prior	/, no p e Assi ( liabil	rovision for income ociation has adequately ities The Association

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

Schedule D (Form 990) 2013

DLN: 93493317065094

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization DirectEmployers Association Inc **Employer identification number** 

30-0008235

Pa	rt I Questions Regarding Compensation		·			
					Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organize reimbursement or provision of all of the expenses descri			1b		
2	Did the organization require substantiation prior to reimidirectors, trustees, officers, including the CEO/Executiv			2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that a used by a related organization to establish compensation	ppl	y Do not check any boxes for methods			
		굣	Written employment contract			
	·	ᅜ	, ,			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	men	nt?	4a		Νo
b	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-based			4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provid	e th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must c	omp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the revenues of					
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, line compensation contingent on the net earnings of	2 1 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, line payments not described in lines 5 and 6? If "Yes," desc			7		
8	Were any amounts reported in Form 990, Part VII, paid					
	subject to the initial contract exception described in Rei in Part III	gula	ations section 53 4958-4(a)(3)? If "Yes," describe	8		
^			oble presumption presedure described in Description	<b>⊢°</b>		
9	If "Yes" to line 8, did the organization also follow the refraction $53\ 4958-6(c)$ ?	utt	avie presumption procedure described in Regulations	9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation
_		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Anthony Selvey Assistant VP	(i) (ii)	132,580				25,205	157,785	
(2)Harold Cooper VP- Technology	(i) (ii)	160,000				30,418	190,418	
(3)Heather Hoffman Regional VP	(i) (ii)	144,231				27,420	171,651	
(4)Rıchard Wehrle VP- Product Dev	(i) (ii)	218,077				41,459	259,536	
(5)Tom Eckhart VP- Membership Dev	(i) (ii)	164,143				31,206	195,349	
(6)William Warren Executive Direc	(i) (ii)	225,962				42,958	268,920	

Schedule J (Form 990) 2013

### Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2013

DLN: 93493317065094

OMB No 1545-0047

Open to Public

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► 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, line 38a or 40b.

**Transactions with Interested Persons** 

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization DirectEmployers Association Inc				E	Employer identification number							
									08235			
					3) and sectio							
					0, Part IV, line							
<b>1</b> (a) Nam	e of dısqualı	fied person			n disqualified	<b>(c)</b> Des	cription	of tra	nsactior	י		rected?
			pers	on and organi	2411011						Yes	No
												-
												-
												-
												_
												_
												-
<b>2</b> Enter the a	mount of ta	x incurred by	organization	managers or	disqualified pe	rsons during t	he year	r unde	rsection ► ¢	n		
	mount of ta	x, ıf anv. on l	ine 2, above	reimbursed b	y the organizat	ion			<b>▶</b> \$			
									. т			
			n Interest									
					990-EZ, Part \		Form 9	90, Pa	art IV , lı	ne 26,	or if the	
<b>_</b>					line 5, 6, or 22		(a) In		(6)		(:)\A(=	
(a) Name of interested	<b>(b)</b> Relationsh	(c) nip   Purpose	( <b>d)</b> Loar		(e)Original principal	(f)Balance due	(g) In defaul		(h) Approv	ed.	(i)Wr	
person			organization?		amount		1 ' '		by		. agreeme	
	organızatı	on							board			
									or	ttoo2		
			То	From	=		Yes	No	Yes	No	Yes	No
			10	110111			1.03	140	103	140	1103	1110
				+			1				_	
				<b>-</b>					1		_	
					1				1		_	
									1		_	
											_	
Total		<u></u> ► 9				1				<u> </u>	7	
Part IIII Gra	nts or As	sistance	Benefitting	Intereste	d Persons.				ı			
					Form 990, P	art IV, line 2	27.					
(a) Name of ir	nterested		nship betwee		ınt of assıstanc	e <b>(d)</b> Type	e of ass	ıstanc	e <b>(e</b> )	<b>)</b> Purpos	se of as:	sistance
		person and the										
		orga	nızatıon									
						<del></del>						
						<del></del>						
						<del></del>						
						<del></del>						

Part IV Business Transactions Involving Interested Persons.  Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.					
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Dan Jordan	Officer	50,000	A dvertising		Νo

## Part V Supplemental Information

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

Return Reference	Explanation
Information	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) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493317065094

OMB No 1545-0047

2013

Open to Public Inspection

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization DirectEmployers Association Inc Employer identification number

30-0008235

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Form 990 Review Process	
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 state ments regarding other employment, being related to anyone on the board and other items that the 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 15a Compensation Review & Approval Process - CEO, Top Management	DirectEmployers Association Inc 's Board of Directors determine and sets all staffing comp ensation 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 15b Compensation Review and Approval Process for Officers and Key Employees	DirectEmployers Association Inc 's Board of Directors determine and sets all staffing comp ensation 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 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