



Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

- Do not enter social security numbers on this form as it may be made public.
- Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public
Inspection

A For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending JUN 30, 2018

B Check if applicable Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC.		D Employer identification number 23-7079474	
	Doing business as DECA INC.		E Telephone number (703) 860-5000	
	Number and street (or P.O. box if mail is not delivered to street address) 1908 ASSOCIATION DRIVE		Room/suite	G Gross receipts \$ 26,179,102.
	City or town, state or province, country, and ZIP or foreign postal code RESTON, VA 20191		H(a) Is this a group return STMT 1	
	F Name and address of principal officer FRANK PETERSON SAME AS C ABOVE		H(b) For subordinates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	I Tax exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (Insert no.) 4947(a)(1) or 527		H(c) Are all subordinates included? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)	
	J Website: ► WWW.DECA.ORG		L Year of formation: 1151	
	K Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other ►		M State of legal domicile:	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities DECA PREPARES EMERGING LEADERS AND ENTREPRENEURS IN MARKETING, FINANCE, HOSPITALITY AND MANAGEMENT.			
	2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets			
Revenue	3 Number of voting members of the governing body (Part VI, line 1a)	3	540	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	537	
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	11	
	6 Total number of volunteers (estimate if necessary)	6	7985	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Expenses	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,282,992.	Current Year 1,307,454.	
	9 Program service revenue (Part VIII, line 2g)	24,722,255.	24,498,630.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	189,911.	130,221.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	49,434.	223,360.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,244,592.	26,159,665.	
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	392,899.	401,798.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	602,252.	642,398.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	
	b Total fundraising expenses (Part IX, column (D), line 25) ► 57,110.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,939,064.	25,360,123.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	25,934,215.	26,404,319.	
	19 Revenue less expenses. Subtract line 18 from line 12	310,377.	-244,654.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Prior Year 10,758,639.	Beginning of Current Year 10,758,639.	
	21 Total liabilities (Part X, line 26)	0.	End of Year 10,333,580.	
	22 Net assets or fund balances Subtract line 21 from line 20	10,758,639.	10,333,580.	

Part II Signature Block

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

Sign Here	Signature of officer FRANK PETERSON, EXECUTIVE DIRECTOR	Date 5/13/19		
	Type or print name and title			
Paid	Print/Type preparer's name FRANK H. SMITH	Preparer's signature Frank H. Smith	Date 05/10/19	Check if self-employed P00639053
Preparer	Firm's name ► MARCUM LLP		Firm's EIN ►	11-1986323
Use Only	Firm's address ► 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036		Phone no. (202) 227-4000	

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

732001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.

 Yes No
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Part III Statement of Program Service Accomplishments

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

- 1 Briefly describe the organization's mission**

DECA PREPARES EMERGING LEADERS AND ENTREPRENEURS IN MARKETING,
FINANCE, HOSPITALITY AND MANAGEMENT.

- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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

- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule Q.

- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 24,590,917. including grants of \$ 401,798.) (Revenue \$ 24,498,630.)
APPROXIMATELY 13,400 STUDENTS PARTICIPATED IN SKILLS CONTESTS RELATED
TO THEIR INDIVIDUAL CAREER GOALS IN MARKETING AND MANAGEMENT.
SCHOLARSHIP, CASH AND RECOGNITIONS ARE PROVIDED FOR ACCOMPLISHMENTS
RELATED TO WORKPLACE AND SCHOOL-BASED LEARNING.

DECA PROVIDES SPECIFIC PROGRAMS FOR THE CLASSROOM TEACHER TO USE IN STUDENT DEVELOPMENT AND ACHIEVEMENT. THE PRINCIPLES GUIDING THE ASSOCIATION'S PROGRAMS ARE CURRICULUM RELATED CAREER SKILLS, WORKPLACE EXPERIENCES, COMMUNITY SERVICE AND THE DEVELOPMENT OF BUSINESS LEADERSHIP CAPABILITIES.

4b (Code) (Expenses \$ _____) including grants of \$ _____) (Revenue \$ _____) (

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

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ► 24,590,917.

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Part IV Checklist of Required Schedules

- | | Yes | No |
|---|-------|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
<i>If "Yes," complete Schedule A</i> | 1 X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? | 2 X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 X | |
| 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? <i>If "Yes," complete Schedule C, Part II</i> | 4 X | |
| 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 X | |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | 6 X | |
| 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 X | |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | 8 X | |
| 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? <i>If "Yes," complete Schedule D, Part IV</i> | 9 X | |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | 10 X | |
| 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. <ul style="list-style-type: none"> a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 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? <i>If "Yes," complete Schedule D, Part VII</i> 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? <i>If "Yes," complete Schedule D, Part VIII</i> 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? <i>If "Yes," complete Schedule D, Part IX</i> e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i> | 11a X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | 11b X | |
| 12b Was the organization included in consolidated, independent audited financial statements for the tax year?
<i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | 11c X | |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | 11d X | |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? <ul style="list-style-type: none"> 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> | 11e X | |
| 14b 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> | 11f X | |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | 12a X | |
| 16 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? <i>If "Yes," complete Schedule G, Part I</i> | 12b X | |
| 17 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> | 13 X | |
| 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | 14a X | |
| 19 | 14b X | |
| | 15 X | |
| | 16 X | |
| | 17 X | |
| | 18 X | |
| | 19 X | |

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Part IV Checklist of Required Schedules (continued)

- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
- 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
- 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J
- 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
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?
- 25a **Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "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 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
- 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV
- 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- 31 Did the organization liquidate, terminate, or dissolve and cease operations?
If "Yes," complete Schedule N, Part I
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
- 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I
- 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1
- 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
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
- 36 **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2
- 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI
- 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?
- Note.** All Form 990 filers are required to complete Schedule O

	Yes	No
20a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20b	<input type="checkbox"/>	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24b	<input type="checkbox"/>	<input type="checkbox"/>
24c	<input type="checkbox"/>	<input type="checkbox"/>
24d	<input type="checkbox"/>	<input type="checkbox"/>
25a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>
27	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28c	<input checked="" type="checkbox"/>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35b	<input type="checkbox"/>	<input type="checkbox"/>
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	98
1b 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	X
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	2a	11
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
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	
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	X
b If "Yes," enter the name of the foreign country ► <i>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</i>	5a	X
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	6a	X
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 as charitable contributions?	6b	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	X
7 Organizations that may receive deductible contributions under section 170(c).	7b	X
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7c	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7f	X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	9b	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter	10a	
a Initiation fees and capital contributions included on Part VIII, line 12	10b	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11 Section 501(c)(12) organizations. Enter	11a	
a Gross income from members or shareholders	11b	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	
a Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O</i>	13b	
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	13c	
c Enter the amount of reserves on hand		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

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

Section A. Governing Body and Management

- 1a Enter the number of voting members of the governing body at the end of the tax year
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.
- 1b 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?
- 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?
- 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 5 Did the organization become aware during the year of a significant diversion of the organization's assets?
- 6 Did the organization have members or stockholders?
- 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?
- b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
- 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
- a The governing body?
- b Each committee with authority to act on behalf of the governing body?
- 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

	Yes	No
1a	540	
1b	537	
2	X	
3		X
4		X
5		X
6	X	
7a	X	
7b	X	
8a	X	
8b	X	
9		X

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

- 10a Did the organization have local chapters, branches, or affiliates?
- 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?
- 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
- b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- 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 Did the organization have a written whistleblower policy?
- 14 Did the organization have a written document retention and destruction policy?
- 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
- a The organization's CEO, Executive Director, or top management official
- b Other officers or key employees of the organization
- If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)
- 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
- b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
- RHEA STEELE - (703) 860-5000**
- 1908 ASSOCIATION DRIVE, RESTON, VA 20191**

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(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 organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) CHARISE CHAMBER CHAIR	1.00	X					0.	0.	0.
(2) MARIO GATTO VICE CHAIR	1.00	X					0.	0.	0.
(3) CATHERINE DANIEL CHAIR	1.00	X					0.	0.	0.
(4) JESSICA BRADLEY VICE CHAIR	1.00	X					0.	0.	0.
(5) JAYLA BAKER DIRECTOR	1.00	X					0.	0.	0.
(6) CHALSI LEE DIRECTOR	1.00	X					0.	0.	0.
(7) CURTIS WATSON DIRECTOR	1.00	X					0.	0.	0.
(8) MICHELLE CAMP DIRECTOR	10.00	X					0.	0.	0.
(9) JUREL GUFFEY DIRECTOR	10.00	X					0.	0.	0.
(10) SHERRY SILER DIRECTOR	10.00	X					0.	0.	0.
(11) CINDY WHITAKER DIRECTOR	10.00	X					0.	0.	0.
(12) BOB JOHNSON DIRECTOR	10.00	X					0.	0.	0.
(13) JENNIFER CRAIG DIRECTOR	10.00	X					0.	0.	0.
(14) JEFF SHAW DIRECTOR	10.00	X					0.	0.	0.
(15) JOSEPHINE MEINARDUS DIRECTOR	10.00	X					0.	0.	0.
(16) AUSTIN CLUCK DIRECTOR	10.00	X					0.	0.	0.
(17) CHRIS DORMAN DIRECTOR	10.00	X					0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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 organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(18) JIM BROCK TREASURER	25.00	X	X				0.	0.	0.
(19) TRAVIS KENYON CHAIR	2.00	X					0.	0.	0.
(20) DAN KELLY SECRETARY	2.00	X					0.	0.	0.
(21) ROBIN PALMER TREASURER	2.00	X	X				0.	0.	0.
(22) JOHN HAY DIRECTOR	2.00	X					0.	0.	0.
(23) LORELIE ANDERSON DIRECTOR	2.00	X					0.	0.	0.
(24) KELLY CHRISTMAN DIRECTOR	2.00	X					0.	0.	0.
(25) PAULETTE BELL DIRECTOR	2.00	X					0.	0.	0.
(26) MARK CAMPBELL DIRECTOR	2.00	X					0.	0.	0.
1b Sub-total							0.	0.	0.
c Total from continuation sheets to Part VII, Section A							516,092.	0.	0.
d Total (add lines 1b and 1c)							516,092.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 1

	Yes	No
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	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

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

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 ► 0

SEE PART VII, SECTION A CONTINUATION SHEETS

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Form 990

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(27) RENEE WOODRUFF DIRECTOR	2.00	X					0.	0.	0.
(28) MOLLIE FUSSELL DIRECTOR	2.00	X					0.	0.	0.
(29) ROBERT WALLER DIRECTOR	2.00	X					0.	0.	0.
(30) JULIE ELLIS DIRECTOR	2.00	X					0.	0.	0.
(31) JUSTON GLASS DIRECTOR	2.00	X					0.	0.	0.
(32) CHRISTINA CHARLTON SECRETARY	2.00	X					0.	0.	0.
(33) MAUREEN RANKIN TREASURER	2.00	X	X				0.	0.	0.
(34) CARL SCHMIDT DIRECTOR	2.00	X					0.	0.	0.
(35) G. LUKE FREEMAN DIRECTOR	2.00	X					0.	0.	0.
(36) ANDREW NELSON DIRECTOR	2.00	X					0.	0.	0.
(37) TAMI RAAKAR DIRECTOR	2.00	X					0.	0.	0.
(38) MARY WHITEHEAD CHAIR	2.00	X					0.	0.	0.
(39) MICHELLE MCINTOSH DIRECTOR	2.00	X					0.	0.	0.
(40) BRYCEN WOODLEY, STATE ADVISOR - CA DECA & DIR. OR DECA	20.00	X	X				0.	0.	0.
(41) CARRIE MEDLOCK DIRECTOR	2.00	X					0.	0.	0.
(42) WILLIAM KINGSBAKER DIRECTOR	2.00	X					0.	0.	0.
(43) KIM REISER DIRECTOR	2.00	X					0.	0.	0.
(44) SARA MOSSMAN DIRECTOR	2.00	X					0.	0.	0.
(45) TERRA THIBAUT DIRECTOR	2.00	X					0.	0.	0.
(46) MELISSA WHITE DIRECTOR	2.00	X					0.	0.	0.
<u>Total to Part VII, Section A, line 1c</u>									

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee			
		Highest compensated employee	Former					
(47) BRUCE COLE DIRECTOR	2.00	X				0.	0.	0.
(48) MICHAEL PATTI DIRECTOR	2.00	X				0.	0.	0.
(49) KRISTA SCHENK DIRECTOR	2.00	X				0.	0.	0.
(50) KATHERINE KRUSE DIRECTOR	2.00	X				0.	0.	0.
(51) COURTNEY BUSHNELL DIRECTOR	2.00	X				0.	0.	0.
(52) BRADLEY PEER DIRECTOR	2.00	X				0.	0.	0.
(53) KELLI BUFFO DIRECTOR	2.00	X				0.	0.	0.
(54) JAMIE YOUNG DIRECTOR	2.00	X				0.	0.	0.
(55) DAN SHEEKS DIRECTOR	2.00	X				0.	0.	0.
(56) DAVID HAAR DIRECTOR	2.00	X				0.	0.	0.
(57) MICHAEL DIAMOND CHAIR	2.00	X				0.	0.	0.
(58) JEFF BACK DIRECTOR	2.00	X				0.	0.	0.
(59) LINDSAY EDY DIRECTOR	2.00	X				0.	0.	0.
(60) DAVID DECKER DIRECTOR	2.00	X				0.	0.	0.
(61) JACK HARRINGTON DIRECTOR	2.00	X				0.	0.	0.
(62) MICHAEL BUNKO TREASURER	4.00	X	X			6,000.	0.	0.
(63) NANCY STROUT DIRECTOR	2.00	X				2,000.	0.	0.
(64) FELECIA MANDEVILLE DIRECTOR	4.00	X	X			3,000.	0.	0.
(65) PETER FARR DIRECTOR	2.00	X				0.	0.	0.
(66) TERESA BROOKS DIRECTOR	2.00	X				0.	0.	0.
Total to Part VII, Section A, line 1c								

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee				
						Former				
(67) MARTY TUOHY CHAIR	1.00	X					0.	0.	0.	
(68) CASEY STACHECKI DIRECTOR	1.00	X					0.	0.	0.	
(69) DARRELL SAMS DIRECTOR	1.00	X					0.	0.	0.	
(70) ARLEN MIZELL CHAIR	1.00	X					0.	0.	0.	
(71) CARLA ROSS VICE CHAIR	1.00	X					0.	0.	0.	
(72) PHYLESHIA JONES VICE CHAIR	1.00	X					0.	0.	0.	
(73) DAWN BEKAERT VICE CHAIR	1.00	X					0.	0.	0.	
(74) JAMES BENEDICT CHAIR	1.00	X					0.	0.	0.	
(75) TRESA WANER VICE CHAIR	1.00	X					0.	0.	0.	
(76) ROCHELLE STANFILL SECRETARY	1.00	X					0.	0.	0.	
(77) LARISSA DIAS-LIZARRAGA VICE CHAIR	1.00	X					0.	0.	0.	
(78) SHERRY DENO VICE CHAIR	1.00	X					0.	0.	0.	
(79) ERIK WILKINSON VICE CHAIR	1.00	X					0.	0.	0.	
(80) DEB CARTER VICE CHAIR	1.00	X					0.	0.	0.	
(81) JERRY HOLT VICE CHAIR	1.00	X					0.	0.	0.	
(82) SHARON CUTLER VICE CHAIR	1.00	X					0.	0.	0.	
(83) RACHEL DUBROW VICE CHAIR	1.00	X					0.	0.	0.	
(84) BOB HOSTIER VICE CHAIR	1.00	X					0.	0.	0.	
(85) EDDY ROJAS VICE CHAIR	1.00	X					0.	0.	0.	
(86) TED DINICOLA VICE CHAIR	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
						Former			
(87) SUSANA LOPEZ VICE CHAIR	1.00	X					0.	0.	0.
(88) LISA CLINE CHAIR	5.00	X					0.	0.	0.
(89) HALIE BISSELL SECRETARY	5.00	X					0.	0.	0.
(90) SHAYNA BROWN DIRECTOR	5.00	X					0.	0.	0.
(91) SHARON SHAHAN DIRECTOR	5.00	X					0.	0.	0.
(92) TYWANDA MATHIS DIRECTOR	5.00	X					0.	0.	0.
(93) LESLIE AUSTIN DIRECTOR	5.00	X					0.	0.	0.
(94) CAROL VON TERSCH CHAIR	20.00	X					5,300.	0.	0.
(95) AMY SCHMIDT VICE CHAIR	1.00	X					2,100.	0.	0.
(96) DAVID WHITE VICE CHAIR	1.00	X					2,000.	0.	0.
(97) VICKI HALES VICE CHAIR	1.00	X					1,000.	0.	0.
(98) MICHAEL HENSON DIRECTOR	1.00	X					0.	0.	0.
(99) COLE THOMAS DIRECTOR	1.00	X					0.	0.	0.
(100) KEN BURROW DIRECTOR	1.00	X					0.	0.	0.
(101) TAMMY WHEELER DIRECTOR	1.00	X					0.	0.	0.
(102) AMY JAESCHKE DIRECTOR	1.00	X					0.	0.	0.
(103) JORI LIZER DIRECTOR	1.00	X					0.	0.	0.
(104) SUMMER SCHMIDT DIRECTOR	1.00	X					0.	0.	0.
(105) TODD SUBBERT DIRECTOR	1.00	X					0.	0.	0.
(106) KENT SEUFERER DIRECTOR	1.00	X					0.	0.	0.
Total to Part VII, Section A, line 1c									

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(107) BENJAMIN LING DIRECTOR	1.00	X					0.	0.	0.
(108) DON VARANAUSKI STATE ADVISOR	20.00	X	X				5,000.	0.	0.
(109) KAREN BEAR DIRECTOR	5.00	X					599.	0.	0.
(110) DAVID BURKE DIRECTOR	4.00	X					599.	0.	0.
(111) TAMMI CONN DIRECTOR	2.00	X					599.	0.	0.
(112) WILLIAM COULSON DIRECTOR	1.00	X					500.	0.	0.
(113) JAMES DUFFY DIRECTOR	2.00	X					450.	0.	0.
(114) KEVIN JONES DIRECTOR	1.00	X					599.	0.	0.
(115) MARK LYONS DIRECTOR	3.00	X					599.	0.	0.
(116) JENNIFER WEBER DIRECTOR	2.00	X					599.	0.	0.
(117) BECKY KUEHL CHAIR	2.00	X					0.	0.	0.
(118) BILL TURNER VICE CHAIR	1.00	X					0.	0.	0.
(119) AMANDA GRAHAM-BISHOP SECRETARY	1.00	X					0.	0.	0.
(120) JULIE MOORE DIRECTOR	1.00	X					775.	0.	0.
(121) AMBER REED DIRECTOR	1.00	X					0.	0.	0.
(122) BRIAN MCNEAL DIRECTOR	1.00	X					600.	0.	0.
(123) MICHELLE GOUDY DIRECTOR	1.00	X					725.	0.	0.
(124) RICHARD REID DIRECTOR	1.00	X					900.	0.	0.
(125) GEN CRAFT DIRECTOR	1.00	X					0.	0.	0.
(126) RACHEL JONES DIRECTOR	1.00	X					975.	0.	0.
Total to Part VII, Section A, line 1c									

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(127) ROBIN PERRY DIRECTOR	1.00	X					0.	0.	0.
(128) TROY DAVIS DIRECTOR	1.00	X					0.	0.	0.
(129) MICHELLE CHAPMAN DIRECTOR	1.00	X					0.	0.	0.
(130) DREW LANGFORD DIRECTOR	1.00	X					0.	0.	0.
(131) ADDISON WHITE DIRECTOR	1.00	X					0.	0.	0.
(132) MISTY RATHER CHAIR	1.00	X					0.	0.	0.
(133) JAYNE HARRIS TREASURER	1.00	X					0.	0.	0.
(134) DENISE HAMILTON SECRETARY	1.00	X	X				0.	0.	0.
(135) TOD GRIFFIN DIRECTOR	1.00	X					0.	0.	0.
(136) RACHEL KAHLY DIRECTOR	1.00	X					0.	0.	0.
(137) BETTY MONTGOMERY DIRECTOR	1.00	X					0.	0.	0.
(138) LAYNE SHELTON DIRECTOR	1.00	X					0.	0.	0.
(139) ADAM MCGUFFEY DIRECTOR	1.00	X					0.	0.	0.
(140) ASHTON TATE DIRECTOR	1.00	X					0.	0.	0.
(141) JULIANNE SIMS DIRECTOR	1.00	X					0.	0.	0.
(142) DEBBIE HARRIS DIRECTOR	1.00	X					0.	0.	0.
(143) KALEIGH SHAW DIRECTOR	1.00	X					0.	0.	0.
(144) DENNIS VOLENTINE TREASURER	2.00	X	X				0.	0.	0.
(145) CAROL BORSKEY DIRECTOR	1.00	X					0.	0.	0.
(146) RAE BROUSSARD DIRECTOR	2.00	X					0.	0.	0.
Total to Part VII, Section A, line 1c									

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(147) KEITH TRAYLOR DIRECTOR	1.00	X					0.	0.	0.
(148) DAVID WILBURN DIRECTOR	2.00	X					0.	0.	0.
(149) NEASHION DAVIS DIRECTOR	2.00	X					0.	0.	0.
(150) COURTNEY RICHOUX DIRECTOR	2.00	X					0.	0.	0.
(151) KRISTIAN MIMS DIRECTOR	4.00	X					0.	0.	0.
(152) ASHLEY STANFORD DIRECTOR	2.00	X					0.	0.	0.
(153) MARYELLEN GATES DIRECTOR	2.00	X					0.	0.	0.
(154) LETTY BROWN DIRECTOR	2.00	X					0.	0.	0.
(155) JAMES DOW DIRECTOR	2.00	X					0.	0.	0.
(156) KRISTA ANDERSON DIRECTOR	2.00	X					0.	0.	0.
(157) COREY GUERRA DIRECTOR	2.00	X					0.	0.	0.
(158) TOM SOUSA DIRECTOR	2.00	X					0.	0.	0.
(159) JIM SULLIVAN DIRECTOR	2.00	X					0.	0.	0.
(160) ANNE GRASSETTI DIRECTOR	2.00	X					0.	0.	0.
(161) TIM PAROCHOJUK DIRECTOR	2.00	X					0.	0.	0.
(162) TRICIA RILEY DIRECTOR	2.00	X					0.	0.	0.
(163) ED O'CONNOR DIRECTOR	2.00	X					0.	0.	0.
(164) MEGHAN BEAULIEU DIRECTOR	2.00	X					0.	0.	0.
(165) PETER MARFIONE DIRECTOR	2.00	X					0.	0.	0.
(166) FRANK ROSA DIRECTOR	2.00	X					0.	0.	0.
<u>Total to Part VII, Section A, line 1c</u>									

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		
(167) RACHEL PILOTTE DIRECTOR	2.00	X						0.	0.
(168) SEAN CHUNG DIRECTOR	2.00	X						0.	0.
(169) JOHN DACEY DIRECTOR	2.00	X						0.	0.
(170) JOE HODGKINS DIRECTOR	2.00	X						0.	0.
(171) CHRIS PLUCINSKI-TAYOR DIRECTOR	2.00	X						0.	0.
(172) DJ SMALL DIRECTOR	2.00	X						0.	0.
(173) KYLE BRITTO DIRECTOR	2.00	X						0.	0.
(174) KATIE MILLER DIRECTOR	2.00	X						0.	0.
(175) LEO GARCIA CHAIR	1.00	X						0.	0.
(176) FREDERICK JENKINS VICE CHAIR	1.00	X						0.	0.
(177) KELLY JADERBORG TREASURER	1.00	X	X					0.	0.
(178) MIVIDA PARHAM SECRETARY	1.00	X						0.	0.
(179) DAVID MOLOT DIRECTOR	1.00	X						0.	0.
(180) DEMITRA MARAFASTOS DIRECTOR	1.00	X						0.	0.
(181) MICHELLE ALEXANDER DIRECTOR	1.00	X						0.	0.
(182) BRETT CUTLER DIRECTOR	1.00	X						0.	0.
(183) DIANA HEGMANN DIRECTOR	1.00	X						0.	0.
(184) JON GODWIN DIRECTOR	1.00	X						0.	0.
(185) STEVE LEGACY DIRECTOR	1.00	X						0.	0.
(186) ROBERT RADLEY DIRECTOR	2.00	X						0.	0.
Total to Part VII, Section A, line 1c									

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(187) REED NONKEN DIRECTOR	2.00	X					0.	0.	0.
(188) WENDY ROBICHAUD DIRECTOR	2.00	X					0.	0.	0.
(189) ANDREW MERRILL DIRECTOR	2.00	X					0.	0.	0.
(190) KRISTY DILLINGHAM DIRECTOR	2.00	X					0.	0.	0.
(191) LISA DELAMPMAN, DIRECTOR ME DECA & NH DECA	2.00	X					0.	0.	0.
(192) JENNIFER MILKE DIRECTOR	1.00	X					0.	0.	0.
(193) JAMIE RILEY DIRECTOR	1.00	X					0.	0.	0.
(194) DANA BOICE DIRECTOR	1.00	X					0.	0.	0.
(195) TANYA CLARK DIRECTOR	1.00	X					0.	0.	0.
(196) JULIA DALRYMPLE DIRECTOR	1.00	X					0.	0.	0.
(197) KAREN MEUWISSEN CHAIR	2.00	X	X				0.	0.	0.
(198) KENNETH CHUKWUBA VICE CHAIR	2.00	X	X				0.	0.	0.
(199) LORI JOHNSON TREASURER	2.00	X	X				0.	0.	0.
(200) JAMES ELVIDGE SECRETARY	1.00	X	X				0.	0.	0.
(201) BECCA HOEFT DIRECTOR	1.00	X					0.	0.	0.
(202) CHRIS HUGES DIRECTOR	1.00	X					0.	0.	0.
(203) JACOB WARD DIRECTOR	1.00	X					0.	0.	0.
(204) JON KRAUTH DIRECTOR	1.00	X					0.	0.	0.
(205) SARA HIEMENZ DIRECTOR	1.00	X					0.	0.	0.
(206) JENNIFER CLEMONS DIRECTOR	1.00	X					0.	0.	0.
<u>Total to Part VII, Section A, line 1c</u>									

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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23-7079474

Form 990

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
						Former			
(207) JENNIFER SHOUSE-KLASSEN DIRECTOR	1.00	X					0.	0.	0.
(208) SCOTT PIERCE DIRECTOR	1.00	X					0.	0.	0.
(209) JARED KEGLER DIRECTOR	1.00	X					0.	0.	0.
(210) ANDREA MOHR DIRECTOR	1.00	X					0.	0.	0.
(211) RYAN HARRISON DIRECTOR	1.00	X					0.	0.	0.
(212) STEPH LOLICH DIRECTOR	1.00	X					0.	0.	0.
(213) SUSAN SIMONSON DIRECTOR	1.00	X					0.	0.	0.
(214) BLAKE BODENBURG DIRECTOR	1.00	X					0.	0.	0.
(215) SONJA WEILER DIRECTOR	1.00	X					0.	0.	0.
(216) MIKE DELANEY DIRECTOR	1.00	X					0.	0.	0.
(217) JOHN RASMUSSEN DIRECTOR	1.00	X					0.	0.	0.
(218) KEITH JUREK DIRECTOR	1.00	X					0.	0.	0.
(219) PAUL KIMBLER DIRECTOR	1.00	X					0.	0.	0.
(220) JULIE COOLEY DIRECTOR	1.00	X					0.	0.	0.
(221) SARAH WELKIN DIRECTOR	1.00	X					0.	0.	0.
(222) ALLIE STEINMETZ DIRECTOR	1.00	X					0.	0.	0.
(223) LARRY ANDERS, V. CHAIR - MO DACA; DIR. ID DECA	2.00	X					0.	0.	0.
(224) MATT MAGNUSON DIRECTOR - ID & MO DECA	2.00	X					0.	0.	0.
(225) AMANDA BREZNAY DIRECTOR - ID & MO DECA	2.00	X					0.	0.	0.
(226) CAROL BOLIN DIRECTOR	2.00	X					0.	0.	0.

Total to Part VII, Section A, line 1c

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Form 990

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
						Former			
(227) BROOKE ORSCHELN DIRECTOR	5.00	X					0.	0.	0.
(228) BRYCE BUNTON DIRECTOR	5.00	X					0.	0.	0.
(229) MARISSA BROWN CHAIR	1.00	X					0.	0.	0.
(230) ZOE SNYDER DIRECTOR	1.00	X					0.	0.	0.
(231) ELIZABETH KEYES DIRECTOR	1.00	X					0.	0.	0.
(232) JORDAN CURRY DIRECTOR	1.00	X					0.	0.	0.
(233) DERIC GILLUM DIRECTOR	1.00	X					0.	0.	0.
(234) DENNIS STEVENSON DIRECTOR	1.00	X					0.	0.	0.
(235) ANNA KIRK PRESLEY SECRETARY	1.00	X					0.	0.	0.
(236) KATIE DEROUEN DIRECTOR	1.00	X					0.	0.	0.
(237) JALYN PORTER DIRECTOR	1.00	X					0.	0.	0.
(238) ADARA OUNG DIRECTOR	1.00	X					0.	0.	0.
(239) KAYLEE STRAWDER DIRECTOR	1.00	X					0.	0.	0.
(240) SAM MURPHREE DIRECTOR	1.00	X					0.	0.	0.
(241) AUSTIN DAHER DIRECTOR	1.00	X					0.	0.	0.
(242) ELIZABETH SCHUH CHAIR	1.00	X					0.	0.	0.
(243) NICKI ROE DIRECTOR	1.00	X					0.	0.	0.
(244) SCOTT DONISTHORPE DIRECTOR	1.00	X					0.	0.	0.
(245) MARK HARTMAN CHAIR	1.00	X	X				0.	0.	0.
(246) BRAD MEHR TREASURER	1.00	X	X				0.	0.	0.

Total to Part VII, Section A, line 1c

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**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(247) JESSICA TILLMAN DIRECTOR	1.00	X					0.	0.	0.
(248) WILL ROCHE DIRECTOR	1.00	X					0.	0.	0.
(249) JOHN HOLLOW DIRECTOR	1.00	X					0.	0.	0.
(250) JOSH MUNRO SECRETARY	1.00	X	X				0.	0.	0.
(251) KAREY CONN DIRECTOR	1.00	X					0.	0.	0.
(252) TRAVIS CRAWFORD VICE CHAIR	1.00	X	X				0.	0.	0.
(253) NOEL OSTERMAN DIRECTOR	1.00	X					0.	0.	0.
(254) CASEY DONAHUE DIRECTOR	1.00	X					0.	0.	0.
(255) MARTI PAUGH DIRECTOR	1.00	X					0.	0.	0.
(256) KIM EDWARDS CHAIR	2.00	X	X				0.	0.	0.
(257) TAMMY VAIL TREASURER	2.00	X	X				0.	0.	0.
(258) SAMANTHA TOBIAS SECRETARY	2.00	X	X				0.	0.	0.
(259) TABITHA HUDSON DIRECTOR	1.00	X					0.	0.	0.
(260) BRENDA HAYNES DIRECTOR	1.00	X					0.	0.	0.
(261) LUKE NICKS DIRECTOR	1.00	X					0.	0.	0.
(262) ELLEN BRYAM DIRECTOR	1.00	X					0.	0.	0.
(263) SHELBY GILMORE DIRECTOR	1.00	X					0.	0.	0.
(264) EMMY CORN DIRECTOR	1.00	X					0.	0.	0.
(265) CHARLES FURLOW DIRECTOR	1.00	X					0.	0.	0.
(266) ELLEN MACHADO DIRECTOR	1.00	X					0.	0.	0.
Total to Part VII, Section A, line 1c									

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>								
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)			(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer				Key employee
(267) GAIL MCDOUGHAL DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(268) ANDREW WEATHERMAN DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(269) DYLAN HENEGHAN DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(270) ANDERSON RAINES DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(271) WILL THORNHILL DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(272) LEAH CAMPBELL DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(273) KELLI SITZLER CHAIR	2.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			0.	0.	0.
(274) DUSTIN NORBY VICE CHAIR	2.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			0.	0.	0.
(275) NIKKI HEINLE SECRETARY	2.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			0.	0.	0.
(276) DON FRY DIRECTOR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(277) MORGAN SCHWARTZENBERGER DIRECTOR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(278) KEVIN REISENAUER DIRECTOR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(279) ALLY GILIN DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(280) VICTORIA WILES DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(281) JANET BUTLER DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(282) DEREK DEAVER DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(283) MATT MAW DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(284) MARY JANSSEN DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(285) MAGGIE SCHNEIDER DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(286) STEPHANIE MORROW DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
Total to Part VII, Section A, line 1c							0.	0.

**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
		Former							
(287) ADAM BARRICKMAN CHAIR	1.00	X					0.	0.	0.
(288) FORREST SOLON DIRECTOR	1.00	X					0.	0.	0.
(289) SHELBY LEARCH DIRECTOR	1.00	X					0.	0.	0.
(290) JEFFREY TALKINGTON DIRECTOR	1.00	X					0.	0.	0.
(291) KATHRYN TREMBLAY TREASURER	1.00	X	X				0.	0.	0.
(292) LESA MCQUESTEN DIRECTOR	1.00	X					0.	0.	0.
(293) MARY HEARTZ DIRECTOR	1.00	X					0.	0.	0.
(294) TIM MAROTTE DIRECTOR	1.00	X					0.	0.	0.
(295) JOHN PICO CHAIR	1.00	X					0.	0.	0.
(296) KAREN MENDEZ DIRECTOR	1.00	X					1,000.	0.	0.
(297) GALE FANALE DIRECTOR	1.00	X					1,150.	0.	0.
(298) ROWENA GIANFREDI DIRECTOR	1.00	X					0.	0.	0.
(299) DEBORAH STAPENSKI DIRECTOR	1.00	X					600.	0.	0.
(300) NICOLE HALPIN DIRECTOR	1.00	X					0.	0.	0.
(301) LISA MARIE SCOTT DIRECTOR	1.00	X					600.	0.	0.
(302) LAURA BETH FECAK DIRECTOR	1.00	X					300.	0.	0.
(303) MELISSA DERPILBOSIAN DIRECTOR	1.00	X					600.	0.	0.
(304) EILEEN FISCHER DIRECTOR	1.00	X					0.	0.	0.
(305) BARBARA LOWERY DIRECTOR	1.00	X					600.	0.	0.
(306) DEBI CLINE CHAIR	2.00	X	X				0.	0.	0.

Total to Part VII, Section A, line 1c

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Form 990

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)		(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			<input type="checkbox"/> Individual trustee or director	<input type="checkbox"/> Institutional trustee	<input type="checkbox"/> Officer	<input type="checkbox"/> Key employee	<input type="checkbox"/> Highest compensated employee			
(307) RAY HENDERSON		2.00								
TREASURER			X	X				0.	0.	0.
(308) LACEE MANUS		2.00		X	X			0.	0.	0.
SECRETARY										
(309) STACY WASHINGTON		2.00		X	X			0.	0.	0.
CHAIR										
(310) SHERRY LOBER		2.00		X	X			0.	0.	0.
CHAIR										
(311) AARON GIRDNER		2.00		X				0.	0.	0.
DIRECTOR										
(312) CRUCITA MEDINA		2.00		X				0.	0.	0.
DIRECTOR										
(313) STEVE MEDINA		2.00		X				0.	0.	0.
DIRECTOR										
(314) RICHARD FAULKNER		2.00		X				0.	0.	0.
DIRECTOR										
(315) RICARDO CORNEJO ROJAS		2.00		X	X			0.	0.	0.
SECRETARY										
(316) TERRY ERTMAN		2.00		X	X			0.	0.	0.
VICE CHAIR										
(317) MARCELLE CRUZADO		2.00		X				0.	0.	0.
DIRECTOR										
(318) CARIELA SANTANA		2.00		X	X			0.	0.	0.
CHAIR										
(319) GABRIEL SILVA		2.00		X				0.	0.	0.
DIRECTOR										
(320) NICOLE LEE		2.00		X				0.	0.	0.
DIRECTOR										
(321) MORGAN HEATH-POWERS		2.00		X				0.	0.	0.
DIRECTOR										
(322) ALAN FULKS		2.00		X				0.	0.	0.
DIRECTOR										
(323) LAURA NOWLAN		2.00		X				0.	0.	0.
DIRECTOR										
(324) JULIO MEZA		2.00		X				0.	0.	0.
DIRECTOR										
(325) MELISSA SCOTT		2.00		X				0.	0.	0.
DIRECTOR										
(326) MITCHELL BERESA		25.00		X	X			0.	0.	0.
CHAIR										
Total to Part VII, Section A, line 1c										

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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(327) NELA J HAWTHORNE VICE CHAIR	5.00		X	X			0.	0.	0.
(328) LINDSAY DELUCCA DIRECTOR	5.00		X				0.	0.	0.
(329) CLAUDE COMMISSO DIRECTOR	8.00			X			0.	0.	0.
(330) DAN GREVAN DIRECTOR	5.00			X			0.	0.	0.
(331) MICHELLE NELSON DIRECTOR	3.00			X	X		0.	0.	0.
(332) RICH GRAETIN DIRECTOR	3.00			X			0.	0.	0.
(333) LETTIA ROMAS DIRECTOR	3.00			X			0.	0.	0.
(334) SUSAN UTZ DIRECTOR	3.00			X			0.	0.	0.
(335) ALAN BALSDON DIRECTOR	5.00			X			0.	0.	0.
(336) CHERYL CHAMBERLAIN DIRECTOR	3.00			X			0.	0.	0.
(337) KRIS CASTO DIRECTOR	3.00		X				0.	0.	0.
(338) JAMES CASINI DIRECTOR	8.00		X				0.	0.	0.
(339) JOSEPH SANTO DIRECTOR	3.00		X				0.	0.	0.
(340) NELLIE TURKEN DIRECTOR	2.00		X				0.	0.	0.
(341) GREG MENIG DIRECTOR	2.00		X				0.	0.	0.
(342) MARY PERES DIRECTOR	3.00		X				0.	0.	0.
(343) JEREMY NADLER DIRECTOR	1.00		X				0.	0.	0.
(344) VALERIE ROBESON DIRECTOR	1.00		X				0.	0.	0.
(345) HEIDI LISI DIRECTOR	1.00		X				0.	0.	0.
(346) HEATHER SPROULL DIRECTOR	1.00		X				0.	0.	0.

Total to Part VII, Section A, line 1c

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)								
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)			(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer				Key employee
(347) JOE DEANGELO DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(348) TERRI ROTHFUSS DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(349) ERIC WELLS DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(350) CAROLYN HOLT-BALIS DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(351) SUSAN SCHUTTE DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(352) REBECCA GLADDEN DIRECTOR	1.00	<input checked="" type="checkbox"/>				0.	0.	0.
(353) CHERYL BOURLAND DIRECTOR	1.00	<input checked="" type="checkbox"/>				6,500.	0.	0.
(354) WILLIAM HUANG CHAIR	8.00	<input checked="" type="checkbox"/>				0.	0.	0.
(355) GEORGIA STEVENSON CHAIR	6.00	<input checked="" type="checkbox"/>				0.	0.	0.
(356) BRYAN MOSES VICE CHAIR	6.00	<input checked="" type="checkbox"/>				0.	0.	0.
(357) RONNIE NUQUI VICE CHAIR	6.00	<input checked="" type="checkbox"/>				0.	0.	0.
(358) DESTYNI WILLIAMS VICE CHAIR	6.00	<input checked="" type="checkbox"/>				0.	0.	0.
(359) FIZZA SATTAR VICE CHAIR	6.00	<input checked="" type="checkbox"/>				0.	0.	0.
(360) RON DODGE DIRECTOR	2.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			0.	0.	0.
(361) ROB REINHARDT DIRECTOR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(362) HEALther BALDWIN CHAIR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(363) GREG FISHER DIRECTOR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(364) JOHN DIXON TREASURER	2.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			0.	0.	0.
(365) BRENT LEONG SECRETARY	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
(366) MIKE GUMP DIRECTOR	2.00	<input checked="" type="checkbox"/>				0.	0.	0.
Total to Part VII, Section A, line 1c								

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Form 990

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
						Former			
(367) NAT ELLIS DIRECTOR	2.00		X				0.	0.	0.
(368) TIANA BRIONES DIRECTOR	2.00		X				0.	0.	0.
(369) MARY LOU TUPPER DIRECTOR	5.00		X				0.	0.	0.
(370) CHRYS CAFFREY DIRECTOR	5.00		X				0.	0.	0.
(371) PATRICIA DIONNE DIRECTOR	5.00		X				0.	0.	0.
(372) TOM GAUTHIER DIRECTOR	5.00		X				0.	0.	0.
(373) ZACK ALLEN DIRECTOR	5.00		X				0.	0.	0.
(374) GAGE WATKINS DIRECTOR	2.00		X				0.	0.	0.
(375) COLE CHISM DIRECTOR	2.00		X				0.	0.	0.
(376) PATRICK DOYLE DIRECTOR	1.00		X				0.	0.	0.
(377) THOMAS HENDERSON DIRECTOR	1.00		X				0.	0.	0.
(378) LEO SAENZ CHAIR	1.00		X	X			0.	0.	0.
(379) KIM ADAMS DIRECTOR	1.00		X				0.	0.	0.
(380) TRACI BUCKNER TREASURER	1.00		X	X			0.	0.	0.
(381) LISA GRECO SECRETARY	1.00		X	X			0.	0.	0.
(382) DIANA SALAZAR DIRECTOR	1.00		X				0.	0.	0.
(383) MIKE MILLER DIRECTOR	1.00		X				0.	0.	0.
(384) JULIEANNE ASH DIRECTOR	1.00		X				0.	0.	0.
(385) STEWART BURNS DIRECTOR	1.00		X				0.	0.	0.
(386) HEATHER ALLEN DIRECTOR	1.00		X				0.	0.	0.
Total to Part VII, Section A, line 1c									

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Form 990

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(387) JENNIFER URBANEK DIRECTOR	1.00	X					0.	0.	0.
(388) ARACELI GARCIA DIRECTOR	1.00	X					0.	0.	0.
(389) MICHELLE JACKSON DIRECTOR	1.00	X					0.	0.	0.
(390) JOANNE SULLIVAN DIRECTOR	1.00	X					0.	0.	0.
(391) EMILY SMOller DIRECTOR	1.00	X					0.	0.	0.
(392) JENNIFER MASON VICE CHAIR	1.00	X					0.	0.	0.
(393) DOROTHY HARING DIRECTOR	1.00	X					0.	0.	0.
(394) CYNDEE BARKLEY DIRECTOR	1.00	X					0.	0.	0.
(395) LYNDsay HASHEN DIRECTOR	1.00	X					0.	0.	0.
(396) TERESA DELICOMPAGNI SECRETARY	1.00	X					0.	0.	0.
(397) DENISE MAGASICH TREASURER	1.00	X					0.	0.	0.
(398) LISA WATERS CHAIR	1.00	X					0.	0.	0.
(399) JEREMI MADDEN CHAIR	3.00	X					0.	0.	0.
(400) AMY WELCH DIRECTOR	3.00	X					0.	0.	0.
(401) LISA SKINNER DIRECTOR	3.00	X					0.	0.	0.
(402) PAT JACKSON DIRECTOR	3.00	X					0.	0.	0.
(403) LOU ELLEN BLACKMON DIRECTOR	3.00	X					0.	0.	0.
(404) TERRY STUTTS DIRECTOR	3.00	X					0.	0.	0.
(405) RICKY ROBBINS DIRECTOR	3.00	X					0.	0.	0.
(406) HEATHER CARTER DIRECTOR	3.00	X	X				0.	0.	0.

Total to Part VII, Section A, line 1c

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(407) PAM SMITH DIRECTOR	3.00	X					0.	0.	0.
(408) VALENCIA KIINLAW-SCOTT DIRECTOR	3.00	X					0.	0.	0.
(409) RUHAMA TEREDA CHAIR	5.00	X					0.	0.	0.
(410) SHAIV KITTUR VICE CHAIR	5.00	X					0.	0.	0.
(411) NAREEN BARWARI VICE CHAIR	5.00	X					0.	0.	0.
(412) SHONDY NGUYEN VICE CHAIR	5.00	X					0.	0.	0.
(413) AVERY SCOTT VICE CHAIR	5.00	X					0.	0.	0.
(414) MIA JONES VICE CHAIR	5.00	X					0.	0.	0.
(415) DALE POLLARD DIRECTOR	5.00	X					0.	0.	0.
(416) DANNEL PORTER DIRECTOR	2.00	X					0.	0.	0.
(417) DREW BURTON DIRECTOR	2.00	X					0.	0.	0.
(418) RACHEL ROUTT DIRECTOR	2.00	X					0.	0.	0.
(419) LEANNE NAUTA DIRECTOR	2.00	X					0.	0.	0.
(420) SAM ROGERS DIRECTOR	2.00	X					0.	0.	0.
(421) JEREMY BROOKS DIRECTOR	2.00	X					0.	0.	0.
(422) MARCI PORTER DIRECTOR	2.00	X					0.	0.	0.
(423) CALVIN BARNUM DIRECTOR	2.00	X					0.	0.	0.
(424) ANDREA CALL DIRECTOR	2.00	X					0.	0.	0.
(425) AMY GRANAHAN DIRECTOR	1.00	X					0.	0.	0.
(426) KELLEN SCOTT CHAIR	1.00	X					0.	0.	0.

Total to Part VII, Section A, line 1c

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(427) ANNIE HULSE DIRECTOR	1.00	X					0.	0.	0.
(428) SANDRA TUCHER DIRECTOR	1.00	X					0.	0.	0.
(429) HEATHER VANDYKE DIRECTOR	1.00	X					0.	0.	0.
(430) DEE STRAUSS DIRECTOR	1.00	X					0.	0.	0.
(431) PA'TRICE DAYOWENS DIRECTOR	1.00	X					0.	0.	0.
(432) ASHLEY HOUGHINS DIRECTOR	1.00	X					0.	0.	0.
(433) THERESA CAFFEE DIRECTOR	1.00	X					0.	0.	0.
(434) JANE WERNER DIRECTOR	1.00	X					0.	0.	0.
(435) MALLORY CROMER DIRECTOR	1.00	X					0.	0.	0.
(436) LYNN AMEY DIRECTOR	1.00	X					0.	0.	0.
(437) LYDIA ALEXANDER DIRECTOR	1.00	X					0.	0.	0.
(438) JENNIFER COREY DIRECTOR	1.00	X					0.	0.	0.
(439) JULIE SHAW DIRECTOR	1.00	X					0.	0.	0.
(440) LAURI WRIGHT DIRECTOR	1.00	X					0.	0.	0.
(441) SUSAN DANA DIRECTOR	1.00	X					0.	0.	0.
(442) SARA-JO WILLEY DIRECTOR	1.00	X					0.	0.	0.
(443) WAYNE GOULET DIRECTOR	1.00	X					0.	0.	0.
(444) TAMI-JO DICKINSON DIRECTOR	1.00	X					0.	0.	0.
(445) BRITTANY LANGEVIN DIRECTOR	1.00	X					0.	0.	0.
(446) JANE SCOTT STATE ADVISOR/TREASURER	5.00	X	X				0.	0.	0.

Total to Part VII, Section A, line 1c

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee			
					Highest compensated employee			
(447) GENA HOXHA CHAIR	5.00	X	X			0.	0.	0.
(448) GREG RICHARDS DIRECTOR	5.00	X				0.	0.	0.
(449) GREG MCCORMICK CHAIR	1.00	X	X			0.	0.	0.
(450) MARC HILLESTAD VICE CHAIR	1.00	X	X			0.	0.	0.
(451) KANDICE HERNDON TREASURER	1.00	X	X			0.	0.	0.
(452) NATE LUCE SECRETARY	1.00	X	X			0.	0.	0.
(453) BILL ANDERSON DIRECTOR	1.00	X				0.	0.	0.
(454) LISA TALLQUIST DIRECTOR	1.00	X				0.	0.	0.
(455) TOM ROBINSON DIRECTOR	1.00	X				0.	0.	0.
(456) BRENDA GRABSKI DIRECTOR	1.00	X				0.	0.	0.
(457) KARI TOMS DIRECTOR	1.00	X				0.	0.	0.
(458) DOUG AUBERT DIRECTOR	1.00	X				0.	0.	0.
(459) CHRIS CHELIN DIRECTOR	1.00	X				0.	0.	0.
(460) RYAN FLORES DIRECTOR	1.00	X				0.	0.	0.
(461) MARIE GALLANAR DIRECTOR	1.00	X				0.	0.	0.
(462) MARNI NESS DIRECTOR	1.00	X				0.	0.	0.
(463) BRYAN VENEMA DIRECTOR	1.00	X				0.	0.	0.
(464) LANCE WRZENSKI DIRECTOR	1.00	X				0.	0.	0.
(465) BOB HUTCHISON CHAIR	2.00	X				0.	0.	0.
(466) STEFANIE FUDE SECRETARY	2.00	X				0.	0.	0.

Total to Part VII, Section A, line 1c

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Form 990

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		
(467) HEIDI WARREN DIRECTOR	2.00	X						0.	0.
(468) GINGER VERHULST DIRECTOR	2.00	X						0.	0.
(469) PHIL HUFF DIRECTOR	2.00	X						0.	0.
(470) SARAH HART OLSON DIRECTOR	2.00	X						0.	0.
(471) MELISSA BAHNSON DIRECTOR	2.00	X						0.	0.
(472) JASON HOLTER DIRECTOR	2.00	X						0.	0.
(473) ANNA MICHALSKI DIRECTOR	2.00	X						0.	0.
(474) KAITEY CROSBY DIRECTOR	2.00	X						0.	0.
(475) LAUREN CHRISTENSEN DIRECTOR	2.00	X						0.	0.
(476) LORI MEREDITH CHAIR	5.00	X						0.	0.
(477) CHERYL CRANFORD VICE CHAIR	5.00	X						0.	0.
(478) JILL THOMPSON DIRECTOR	5.00	X						0.	0.
(479) KYLE POSTEN DIRECTOR	5.00	X						0.	0.
(480) MANUEL FLORES DIRECTOR	5.00	X						0.	0.
(481) ANN MUIRHEAD DIRECTOR	5.00	X						0.	0.
(482) BRYCE FLAMMANG DIRECTOR	5.00	X						0.	0.
(483) ANN MERCER DIRECTOR	5.00	X						0.	0.
(484) KRISTY WILLIAMS DIRECTOR	5.00	X						0.	0.
(485) JULIE MASTERS DIRECTOR	5.00	X						0.	0.
(486) DUSTIN GROCHENOUR DIRECTOR	5.00	X						0.	0.

Total to Part VII, Section A, line 1c

Total to Part VII, Section A, line 1c

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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(487) SUZAN NEWBERRY DIRECTOR	5.00	X					0.	0.	0.
(488) MICHAEL SIAKPERE CHAIR	10.00	X					0.	0.	0.
(489) FRANK LANKO DIRECTOR	5.00	X					0.	0.	0.
(490) RYAN BOGNAR DIRECTOR	5.00	X					0.	0.	0.
(491) KYRSTEN STOCKUS DIRECTOR	5.00	X					0.	0.	0.
(492) JUSTIN KACZMAREK DIRECTOR	5.00	X					0.	0.	0.
(493) CHRIS HEREK DIRECTOR	5.00	X					0.	0.	0.
(494) KATHY LUPO CHAIR	1.00	X	X				0.	0.	0.
(495) KIM STECKMAN VICE CHAIR	1.00	X					0.	0.	0.
(496) GEORGANNA MANSFIELD SECRETARY	1.00	X					0.	0.	0.
(497) JULIE YEARGO TREASURER	1.00	X					0.	0.	0.
(498) JEFF DARR CHAIR	4.00	X					0.	0.	0.
(499) TYLER THOMPSON VICE CHAIR	2.00	X					0.	0.	0.
(500) BRIAN MCFALL TREASURER	2.00	X					0.	0.	0.
(501) CHASE TOPLIFF DIRECTOR	2.00	X					0.	0.	0.
(502) CLAYTON EVANS DIRECTOR	2.00	X					0.	0.	0.
(503) PEGGY ARNOLD CHAIR - ID & MO DECA	2.00	X					0.	0.	0.
(504) DEDE MOORE DIRECTOR - ID & MO DECA	2.00	X					0.	0.	0.
(505) CAROL BOLIN DIRECTOR - ID & MO DECA	2.00	X					0.	0.	0.
(506) SHARON ASHLOCK STATE ADVISOR	1.00		X				0.	0.	0.

Total to Part VII, Section A, line 1c

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(507) ROCHELLE SEALS STATE ADVISOR	1.00		X				0.	0.	0.
(508) CHRISTINE BENNETT STATE ADVISOR	10.00		X				0.	0.	0.
(509) KATHY FORMMER STATE ADVISOR	40.00		X				0.	0.	0.
(510) EV VAUGHAN STATE ADVISOR	40.00		X				0.	0.	0.
(511) DENNIS KELLY STATE ADVISOR	10.00		X				8,000.	0.	0.
(512) LISA WILSON STATE ADVISOR	1.00		X				0.	0.	0.
(513) DENISE CHRISTIANSEN STATE ADVISOR	1.00		X				0.	0.	0.
(514) LYNORE LEVENHAGEN STATE ADVISOR	25.00		X				2,500.	0.	0.
(515) SHANNON AARON STATE ADVISOR	40.00		X				62,824.	0.	0.
(516) ELISE ONO STATE ADVISOR	2.00		X				0.	0.	0.
(517) MORGAN PETERSEN STATE ADVISOR	10.00		X				3,000.	0.	0.
(518) SHAUNA WILLIAMS STATE ADVISOR	15.00		X				0.	0.	0.
(519) LISA COSTA STATE ADVISOR	20.00		X				0.	0.	0.
(520) JAMES WEBER STATE ADVISOR	10.00		X				5,000.	0.	0.
(521) CATHIE BRYANT DIRECTOR	10.00		X				11,083.	0.	0.
(522) JANICE BROWN STATE ADVISOR	30.00		X				41,500.	0.	0.
(523) BRENDA COLVIN ACCOUNTANT	1.00		X				0.	0.	0.
(524) MICHAEL HAMILTON STATE ADVISOR	1.00		X				0.	0.	0.
(525) PAUL GRETHEL STATE ADVISOR	39.00		X				13,000.	0.	0.
(526) ASHLEY MARTINEZ STATE ADVISOR	4.00		X				0.	0.	0.

Total to Part VII, Section A, line 1c

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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	
(527) DONNA MCFADDEN STATE ADVISOR	2.00			X			0.	0.
(528) BRIAN NOBREGA TREASURER	2.00			X			6,500.	0.
(529) KEISHA MADDOX STATE ADVISOR	1.00			X			0.	0.
(530) DAVID WAIT STATE DIRECTOR	40.00			X			0.	0.
(531) ANN DAY ACCOUNTANT	30.00			X			0.	0.
(532) CATHERINE RICE STATE ADVISOR	25.00			X			0.	0.
(533) HOLLY PORTNER STATE ADVISOR	25.00			X			0.	0.
(534) JACKLYN SCHILLER STATE ADVISOR	1.00			X			0.	0.
(535) CINDY SHANNON STATE ADVISOR MO DECA, MO DECA-COLL. & MO DECA FDN	40.00			X			0.	0.
(536) KATHY PARRETT TREASURER - ID & MO DECA	20.00			X			14,450.	0.
(537) SANDRA PARKER STATE ADVISOR	40.00			X			0.	0.
(538) VIRGINIA DICKERSON ACCOUNTANT	3.00			X			0.	0.
(539) PAMELA O'BRIEN STATE ADVISOR	30.00			X			66,683.	0.
(540) GORDON NICHOLSON STATE ADVISOR	20.00			X			0.	0.
(541) JEFFREY VICTOR STATE ADVISOR	40.00			X			0.	0.
(542) CHRISTINE PHIPPS STATE ADVISOR	20.00			X			0.	0.
(543) CURTIS HALEY STATE ADVISOR	20.00			X			0.	0.
(544) JEFF KEITH ACCOUNTANT	2.00			X			0.	0.
(545) JERRY KHUN STATE ADVISOR	20.00			X			0.	0.
(546) DEE STURGILL STATE ADVISOR	5.00			X			0.	0.
<hr/> Total to Part VII, Section A, line 1c								

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Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	
(547) KEVIN WILLIAMS STATE ADVISOR	10.00			X			0.	0.
(548) MARK BURCH STATE ADVISOR	10.00			X			0.	0.
(549) ANGELA JONES ACCOUNTANT	4.00			X			0.	0.
(550) JOSEPH ESPOSITO STATE ADVISOR	1.00			X			0.	0.
(551) ALYSSA DUNCAN STATE ADVISOR	1.00			X			0.	0.
(552) MARSHA BOCK STATE ADVISOR	13.00			X			0.	0.
(553) KATHY WALTON STATE ADVISOR	10.00			X			0.	0.
(554) JOSH SHANKLE STATE ADVISOR	1.00			X			71,803.	0.
(555) PATRICIA WHITE ACCOUNTANT	1.00			X			8,220.	0.
(556) JERRY DIGIOVANNI STATE ADVISOR	20.00			X			40,000.	0.
(557) GINGER HILL STATE ADVISOR	40.00			X			0.	0.
(558) JEAN CLARKE STATE ADVISOR	15.00			X			0.	0.
(559) JON HANSEN STATE ADVISOR	20.00			X			0.	0.
(560) DONNA ROUSH STATE ADVISOR	40.00			X			0.	0.
(561) SHARON ACUFF DIRECTOR	1.00			X			0.	0.
(562) NYKKI CRITZER ACCOUNTANT	1.00			X			0.	0.
(563) JOYCE KEMP STATE ADVISOR	20.00			X			0.	0.
(564) MARTHA GAGNER ACCOUNTANT	2.00			X			0.	0.
(565) LORI HAIRSTON DIRECTOR	50.00			X			103,060.	0.
(566) TIM FANDEK STATE ADVISOR	10.00			X			0.	0.

Total to Part VII, Section A, line 1c

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Part VI

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

Total to Part VII, Section A, line 1c

516,092.

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
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Part VIII Statement of Revenue

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

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c	58,085.		
	d Related organizations	1d			
	e Government grants (contributions)	1e	1,008,532.		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	240,837.		
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f		1,307,454.		
Program Service Revenue		Business Code			
	2 a CONFERENCE	900099	22,556,822.	22,556,822.	
	b MEMBERSHIP DUES	900099	1,549,764.	1,549,764.	
	c OTHER PROGRAM SERVICES	900099	392,044.	392,044.	
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		24,498,630.		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		130,221.		130,221.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6 a Gross rents	(i) Real	(ii) Personal		
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b Less cost or other basis and sales expenses				
c Gain or (loss)					
d Net gain or (loss)					
8 a Gross income from fundraising events (not including \$ 58,085. of contributions reported on line 1c) See Part IV, line 18	a	24,264.			
b Less direct expenses	b	19,437.			
c Net income or (loss) from fundraising events			4,827.	4,827.	
9 a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b				
c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	Business Code			
11 a MISCELLANEOUS	900099	218,533.			218,533.
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		218,533.			
12 Total revenue. See instructions.		26,159,665.	24,498,630.	0.	353,581.

**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Form 990 (2017)

23-7079474 Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	229,443.	229,443.		
2 Grants and other assistance to domestic individuals See Part IV, line 22	172,355.	172,355.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	249,574.	118,030.	118,959.	12,585.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	249,533.	216,692.	21,894.	10,947.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,869.	8,389.	987.	493.
9 Other employee benefits	91,334.	77,634.	9,133.	4,567.
10 Payroll taxes	42,088.	28,387.	12,211.	1,490.
11 Fees for services (non-employees)				
a Management	859,453.	569,652.	281,898.	7,903.
b Legal	23,751.	7,487.	16,264.	
c Accounting	91,390.	18,694.	72,696.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,013.		3,013.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	134,869.	57,194.	77,675.	
12 Advertising and promotion	37,923.	24,373.	13,550.	
13 Office expenses	258,719.	172,296.	86,423.	
14 Information technology	122,044.	105,522.	16,522.	
15 Royalties				
16 Occupancy	89,497.	77,969.	11,528.	
17 Travel	540,313.	451,493.	88,752.	68.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	22,632,833.	21,920,869.	711,964.	
20 Interest	5,044.	2,122.	2,922.	
21 Payments to affiliates	39,716.	14,716.	25,000.	
22 Depreciation, depletion, and amortization				
23 Insurance	232,673.	110,674.	121,999.	
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.)				
a MISCELLANEOUS	288,885.	206,926.	62,902.	19,057.
b				
c				
d				
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	26,404,319.	24,590,917.	1,756,292.	57,110.
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)

732010 11-28-17

Form 990 (2017)

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**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Form 990 (2017)

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Part X Balance Sheet

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

		(A) Beginning of year	(B) End of year	
Assets	1 Cash - non-interest-bearing	7,853,879.	1 8,176,548.	
	2 Savings and temporary cash investments	2		
	3 Pledges and grants receivable, net	3		
	4 Accounts receivable, net	4		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L	6		
	7 Notes and loans receivable, net	7		
	8 Inventories for sale or use	8		
	9 Prepaid expenses and deferred charges	9		
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	2,904,760.	11 2,157,032.	
	12 Investments - other securities See Part IV, line 11	12		
	13 Investments - program-related See Part IV, line 11	13		
	14 Intangible assets	14		
	15 Other assets See Part IV, line 11	15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,758,639.	16	10,333,580.	
Liabilities	17 Accounts payable and accrued expenses	17		
	18 Grants payable	18		
	19 Deferred revenue	19		
	20 Tax-exempt bond liabilities	20		
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	22		
	23 Secured mortgages and notes payable to unrelated third parties	23		
	24 Unsecured notes and loans payable to unrelated third parties	24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	25		
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	10,758,639.	27 10,333,580.	
	28 Temporarily restricted net assets	0.	28 0.	
	29 Permanently restricted net assets	29		
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	30		
	31 Paid-in or capital surplus, or land, building, or equipment fund	31		
	32 Retained earnings, endowment, accumulated income, or other funds	32		
	33 Total net assets or fund balances	10,758,639.	33 10,333,580.	
	34 Total liabilities and net assets/fund balances	10,758,639.	34 10,333,580.	

Form 990 (2017)

**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Form 990 (2017)

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Part XI Reconciliation of Net Assets

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

1	1	26,159,665.
2	2	26,404,319.
3	3	-244,654.
4	4	10,758,639.
5	5	
6	6	
7	7	
8	8	
9	9	-180,405.
10	10	10,333,580.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a	X
	3b	

Form 990 (2017)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization	DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC.	Employer identification number 23-7079474
--------------------------	--	--

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 04

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university _____
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

q Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

23-7079474 Page 2

Schedule A (Form 990 or 990-EZ) 2017 INC.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►

- 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")
- 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf
- 3 The value of services or facilities furnished by a governmental unit to the organization without charge
- 4 **Total.** Add lines 1 through 3
- 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)
- 6 **Public support.** Subtract line 5 from line 4

	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1						
2						
3						
4						
5						
6						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

- 7 Amounts from line 4
- 8 Gross income from interest, dividends; payments received on securities loans, rents, royalties, and income from similar sources
- 9 Net income from unrelated business activities, whether or not the business is regularly carried on
- 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)
- 11 **Total support.** Add lines 7 through 10
- 12 Gross receipts from related activities, etc (see instructions) 12
- 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7						
8						
9						
10						
11						
12						
13						

Section C. Computation of Public Support Percentage

- 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 %
- 15 Public support percentage from 2016 Schedule A, Part II, line 14 15 %
- 16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ►
- b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ►
- 17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►
- b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►
- 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ►

Schedule A (Form 990 or 990-EZ) 2017

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule A (Form 990 or 990-EZ) 2017 INC.

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1280671.	1145442.	1262183.	1282992.	1307454.	6278742.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	20664410.	22877744.	22714436.	24722255.	24498630.	115477475
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	21945081.	24023186.	23976619.	26005247.	25806084.	121756217
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6)						121756217

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6	21945081.	24023186.	23976619.	26005247.	25806084.	121756217
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	232,886.	123,944.	50,658.	189,911.	130,221.	727,620.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	232,886.	123,944.	50,658.	189,911.	130,221.	727,620.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		71,258.	81,461.	46,912.	218,533.	418,164.
13 Total support. (Add lines 9, 10c, 11, and 12)	22177967.	24218388.	24108738.	26242070.	26154838.	122902001
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	99.07	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	99.22	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	.59	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	.61	%
19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions			<input type="checkbox"/>

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule A (Form 990 or 990-EZ) 2017 INC.

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Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule A (Form 990 or 990-EZ) 2017 INC.

23-7079474 Page 5

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
 - A family member of a person described in (a) above?
 - A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

Yes	No
11a	
11b	
11c	

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Yes	No
1	
2	

Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Yes	No
1	

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Yes	No
1	
2	
3	

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

- The organization satisfied the Activities Test Complete line 2 below
- The organization is the parent of each of its supported organizations Complete line 3 below
- The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test Answer (a) and (b) below.

- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities

Yes	No
2a	

- Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement

2b	
----	--

3 Parent of Supported Organizations Answer (a) and (b) below.

- Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes	No
3a	
3b	

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule A (Form 990 or 990-EZ) 2017 INC.

23-7079474 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990 or 990-EZ) 2017

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule A (Form 990 or 990-EZ) 2017 **TINC**

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a 1			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule A (Form 990 or 990-EZ) 2017 INC.

23-7079474 Page 8

Part VI

Supplemental Information.

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

2014 AMOUNT: \$ 71,258.

2015 AMOUNT: \$ 81,461.

2016 AMOUNT: \$ 46,912.

2017 AMOUNT: \$ 218,533.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017
Open to Public
Inspection

Name of the organization **DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC.** Employer identification number **23-7079474**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
- Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
- a Total number of conservation easements
- b Total acreage restricted by conservation easements
- c Number of conservation easements on a certified historic structure included in (a)
- d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register
- 2a Held at the End of the Tax Year
- 2b
- 2c
- 2d
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____
- 4 Number of states where property subject to conservation easement is located ► _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
 ► _____
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
 ► \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____
- (ii) Assets included in Form 990, Part X ► \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenue included on Form 990, Part VIII, line 1 ► \$ _____
- b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2017

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**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Schedule D (Form 990) 2017

23-7079474 Page 2

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

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

- a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs

e Other _____

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

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

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

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

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	38,358.	37,334.	40,913.	45,460.	45,703.
b Contributions			733.	125.	1,155.
c Net investment earnings, gains, and losses	1,869.	3,144.	508.	-392.	2,938.
d Grants or scholarships	3,230.	2,120.	4,820.	4,280.	4,260.
e Other expenditures for facilities and programs					76.
f Administrative expenses					
g End of year balance	36,997.	38,358.	37,334.	40,913.	45,460.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► 100.00 %

b Permanent endowment ► .00 %

c Temporarily restricted endowment ► .00 %

The percentages on lines 2a, 2b, and 2c should equal 100%

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

by

- (i) unrelated organizations
 (ii) related organizations

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

Yes	No
3a(i)	X
3a(ii)	X
3b	

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10

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

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ► 0.

Schedule D (Form 990) 2017

**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Schedule D (Form 990) 2017

23-7079474 Page 3

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

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

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Schedule D (Form 990) 2017

23-7079474 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

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

	1	
2a		
2b		
2c		
2d		
	2e	
		3
4a		
4b		
		4c
		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

	1	
2a		
2b		
2c		
2d		
	2e	
		3
4a		
4b		
		4c
		5

Part XIII Supplemental Information.

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

PART V, LINE 4:

IN JUNE OF 2006, STEVEN RHONE, JR., A DECA ALUM WAS KILLED BY A DRUNK
DRIVER. DUE TO STEVEN'S POSTIVE AND LIFE CHANGING DECA EXPERIENCE, THE
RHONE FAMILY STARTED AN ENDOWMENT FUND FOR WASHINGTON DECA STUDENTS. EACH
YEAR, A PORTION OF THE ENDOWMENT IS AWARDED IN SCHOLARSHIPS.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions.

Name of the organization **DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.** Employer identification number **23-7079474**

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

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

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

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

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

Total

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

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule G (Form 990 or 990-EZ) 2017 **INC.**

23-7079474 Page 2

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

Revenue	(a) Event #1 WA DECA LUNCHEON (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add col (a) through col (c))
	(event type)	(total number)		
1 Gross receipts	60,003.			60,003.
2 Less Contributions	40,946.			40,946.
3 Gross income (line 1 minus line 2)	19,057.			19,057.
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs	3,305.			3,305.
7 Food and beverages	7,854.			7,854.
8 Entertainment				
9 Other direct expenses	7,898.			7,898.
10 Direct expense summary Add lines 4 through 9 in column (d)				► 19,057.
11 Net income summary Subtract line 10 from line 3, column (d)				► 0.

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

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

9 Enter the state(s) in which the organization conducts gaming activities _____

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

b If "No," explain _____

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

b If "Yes," explain _____

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule G (Form 990 or 990-EZ) 2017 INC.

23-7079474 Page 3

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in
- | | |
|-----|---|
| 13a | % |
| 13b | % |
- a The organization's facility
- b An outside facility
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► _____

Address ► _____

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

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount

of gaming revenue retained by the third party ► \$ _____

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

Name ► _____

Address ► _____

- 16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

 Director/officer Employee Independent contractor

- 17 Mandatory distributions

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

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

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.

23-7079474 Page 4

Schedule G (Form 990 or 990-EZ)

Part IV Supplemental Information (continued)

Schedule G (Form 990 or 990-EZ)

SCHEDULE I
(Form 990)

2017

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990.

Open to Public
Inspection

Yes

No

23-7079474

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

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

► Go to www.irs.gov/Form990 for the latest information.

**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MONTA VISTA HIGH SCHOOL DECA 21840 MCCLELLAN ROAD CUPERTINO, CA 95014	77-0296140	501(C)(3)	12,708.	0.			CHAPTER SUPPORT
LYNBOOK DECA 1280 JOHNSON AVENUE SAN JOSE, CA 95129	77-0363503	501(C)(3)	8,115.	0.			CHAPTER SUPPORT
FOOTHILL DECA 4375 FOOTHILL ROAD PLEASANTON, CA 94588	94-3062524	501(C)(3)	5,953.	0.			CHAPTER SUPPORT
GRANADA HS DECA 400 WALL STREET LIVERMORE, CA 94550	05-0570400	501(C)(3)	5,233.	0.			CHAPTER SUPPORT
DOUGHERTY VALLEY HIGH SCHOOL 10550 ALBION ROAD SAN RAMON, CA 94596	98-0273221	501(C)(3)	5,173.	0.			CHAPTER SUPPORT
SAN LEANDRO HIGH SCHOOL DECA 2200 BANCROFT AVENUE SAN LEANDRO, CA 94577	94-6002608	501(C)(3)	5,323.	0.			CHAPTER SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

7.

0.

Schedule I (Form 990) (2017)

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.

Schedule 1 (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990) Part II.)

23-7079474

Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRANADA HILLS CHAPTER HIGH SCHOOL DECA - 10535 ZELZAH AVENUE - GRANADA HILLS , CA 91344	94-2175582	501(C) (3)	.11,357.	0.	CHAPTER SUPPORT		

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	890	172,355.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

CONTRIBUTING STATE DECAS OR FOUNDATION REQUEST THE GRANT RECIPIENT

**ORGANIZATIONS TO PROVIDE TIMELY REPORTS ON THE USE OF GRANT FUNDS. \$172,355
IN SCHOLARSHIPS ARE GENERALLY AT \$1,000 OR LESS TO EACH RECIPIENT. THERE IS
NO TRACKING MECHANISM ON HOW THE RECIPIENTS SPEND THE MONEY, ALTHOUGH THE
WERE ALL AWARDED AS SCHOLARSHIPS.**

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

2017

Open to Public
Inspection

Name of the organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.

Employer identification number
23-7079474

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,

Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

- a Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2017

732111 10-17-17

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.

For each individual whose compensation must be reported on 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 aren't 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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
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**DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.**

23-7079474

Page 3

PART IV, LINE 23

SOME OF THE STATE ADVISORS GET COMPENSATION FROM UNRELATED

ORGANIZATIONS FOR THE WORK THEY DO FOR THIS ORGANIZATION. AT TIMES, THE

SALARY PAID BY THESE UNRELATED ORGANIZATIONS IS NOT KNOWN BY DECA.

WHERE IT IS KNOWN, IT IS LISTED IN PART VII, SECTION A.

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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Open to Public
Inspection

Name of the organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC.

Employer identification number
23-7079474

FORM 990, PART VI, SECTION A, LINE 2:

SEE BELOW.

FORM 990, PART VI, SECTION A, LINE 6:

DECA INC. IS A MEMBERSHIP ORGANIZATION FOR SECONDARY AND POST-SECONDARY STUDENTS. STUDENT MEMBERS OF A SCHOOL FORM A CHAPTER LED BY THEIR TEACHER CALLED A "CHAPTER ADVISOR". MOST OF THE STATE DEPARTMENTS OF EDUCATION MANAGE OR FACILITATE THE ACTIVITIES OR CHAPTERS WITHIN THEIR OWN STATES. STATE DECA BOARD MEMBERS ARE EITHER DESIGNATED BY THE DEPARTMENT OR ELECTED BY THE DECA CONSTITUENTS. THE IMPORTANT DECISIONS OF THE BOARD REFLECT THE CONSENSUS OF CHAPTER ADVISORS AND DEPARTMENT OFFICERS.

FORM 990, PART VI, SECTION A, LINE 7A:

SEE ABOVE.

FORM 990, PART VI, SECTION A, LINE 7B:

SEE ABOVE.

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

THE BOARD OF MANY STATES DECAS REQUIRE BOARD REVIEW AND APPROVAL OF FORM 990 AT ITS COMPLETION.

FORM 990, PART VI, SECTION B, LINE 15:

GOVERNING BODIES OF STATE DECAS ANNUALLY REVIEW SALARY OR COMPENSATION USING COMPARABILITY STUDIES OF SIMILARLY SIZED CORPORATIONS.

Name of the organization	DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC.	Employer identification number 23-7079474
--------------------------	--	--

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

THESE DOCUMENTS AND STATEMENTS ARE AVAILABLE FOR THE PUBLIC INSPECTION UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PRIOR PERIOD ADJUSTMENT -180,405.

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

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

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

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

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - b Gift, grant, or capital contribution to related organization(s)
 - c Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
 - e Loans or loan guarantees by related organization(s)
 - f Dividends from related organization(s)
 - g Sale of assets to related organization(s)
 - h Purchase of assets from related organization(s)
 - i Exchange of assets with related organization(s)
 - j Lease of facilities, equipment, or other assets to related organization(s)
 - k Lease of facilities, equipment, or other assets from related organization(s)
 - l Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)
 - n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
 - o Sharing of paid employees with related organization(s)
 - p Reimbursement paid to related organization(s) for expenses
 - q Reimbursement paid by related organization(s) for expenses
 - r Other transfer of cash or property to related organization(s)
 - s Other transfer of cash or property from related organization(s)

- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.
- (a) Name of related organization
- (b) Transaction type (a-s)
- (c) Amount involved
- (d) Method of determining amount involved

(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.