

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2024

Open to Public
Inspection

A For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

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. GROUP RETURN Doing business as DECA INC. Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1908 ASSOCIATION DRIVE City or town, state or province, country, and ZIP or foreign postal code RESTON, VA 20191 F Name and address of principal officer: FRANK PETERSON SAME AS C ABOVE	D Employer identification number 23-7079474 E Telephone number (703) 860-5000 G Gross receipts \$ 44,151,769. H(a) Is this a group return STMT 1 for subordinates? ☒ Yes ☐ No H(b) Are all subordinates included? ☐ Yes ☒ No If "No," attach a list. See instructions STMT 2 H(c) Group exemption number 1151
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527		
J Website: WWW.DECA.ORG		
K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other		L Year of formation:
M State of legal domicile:		

Part I Summary

1	Briefly describe the organization's mission or most significant activities: DECA PREPARES EMERGING LEADERS AND ENTREPRENEURS IN MARKETING, FINANCE, HOSPITALITY AND MANAGEMENT.		
2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	546
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	506
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	20
6	Total number of volunteers (estimate if necessary)	6	11482
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	8	2,098,308.
9	Program service revenue (Part VIII, line 2g)	9	40,906,005.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	340,772.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	666,777.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	44,150,419.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	471,888.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	5,516.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	1,395,848.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.
b	Total fundraising expenses (Part IX, column (D), line 25)	b	73,634.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	39,241,322.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	41,333,032.
19	Revenue less expenses. Subtract line 18 from line 12	19	2,817,387.
20	Total assets (Part X, line 16)	20	15,443,513.
21	Total liabilities (Part X, line 26)	21	0.
22	Net assets or fund balances. Subtract line 21 from line 20	22	17,519,247.

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	11/17/2025 Date
	FRANK PETERSON, EXECUTIVE DIRECTOR Type or print name and title	
Paid Preparer Use Only	Preparer's name AARON M. FOX	Preparer's signature AARON M. FOX
	Date 11/13/25	Check if self-employed ☐ PTIN P01365820
	Firm's name CBIZ ADVISORS, LLC	Firm's EIN 88-1478669
	Firm's address 1899 L STREET, NW #850 WASHINGTON, DC 20036	Phone no. 202-227-4000

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Form 990 (2024)

23-7079474 Page **2**

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? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the 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 \$ **36,156,240.** including grants of \$ **690,346.**) (Revenue \$ **40,906,005.**)
**OVER 14,000 STUDENT MEMBERS PARTICIPATED IN COMPETITIVE EVENTS RELATED
TO THEIR INDIVIDUAL CAREER GOALS IN MARKETING, FINANCE, HOSPITALITY AND
MANAGEMENT. SCHOLARSHIPS AND RECOGNITIONS ARE PROVIDED FOR
ACCOMPLISHMENTS RELATED TO WORKPLACE AND SCHOOL-BASED LEARNING.**

**DECA PROVIDES SPECIFIC RESOURCES FOR ADVISORS TO USE IN THE CLASSROOM
FOR STUDENT DEVELOPMENT AND ACHIEVEMENT. THE PRINCIPLES GUIDING THESE
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 on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **36,156,240.**

Form **990** (2024)

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

Form 990 (2024)

23-7079474 Page **3**

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>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	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>		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>		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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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>		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>		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>		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>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
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>		X
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>		X
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>		X
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>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
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>		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>		X
b 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>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 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>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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

Form 990 (2024)

23-7079474 Page **4**

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		24a X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		25a X
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? <i>If "Yes," complete Schedule L, Part I</i>		25b X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		26 X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		27 X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		36 X
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? <i>If "Yes," complete Schedule R, Part VI</i>		37 X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38 X	

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 110	
b Enter the number of Forms W-2G included on 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	

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

Form 990 (2024)

23-7079474 Page **5**

Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
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 20		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	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? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	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 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
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?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
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.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
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? <i>If "No," provide an explanation on Schedule O</i>	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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

Form 990 (2024)

23-7079474 Page **6**

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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 546		
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 on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent	1b 506		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6	X	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
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 on Schedule O	9		X

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

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c		X
13 Did the organization have a written whistleblower policy?	13	X	
14 Did the organization have a written document retention and destruction policy?	14	X	
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	15a	X	
b Other officers or key employees of the organization	15b	X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
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?	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 (1024 or 1024-A, 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 on Schedule O)

19 Describe on 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
FRANK PETERSON - (703) 860-5000
1908 ASSOCIATION DRIVE, RESTON, VA 20191

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

Form 990 (2024)

23-7079474 Page **7**

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

☐ 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) LORI HAIRSTON DIRECTOR	50.00	X						156,475.	0.	0.
(2) JOSH SHANKLE STATE ADVISOR	40.00			X				100,352.	0.	0.
(3) PAMELA O'BRIEN DIRECTOR	40.00	X		X				88,685.	0.	0.
(4) SHANNON AARON STATE ADVISOR	40.00			X				79,549.	0.	0.
(5) JOHN STILES DIRECTOR & STATE ADVISOR	40.00	X		X				50,754.	0.	0.
(6) JANICE BROWN DIRECTOR & STATE ADVISOR	40.00	X		X				47,800.	0.	0.
(7) CHERYL CRANFORD STATE ADVISOR	20.00			X				45,000.	0.	0.
(8) JOSHUA NULPH STATE ADVISOR	40.00			X				42,000.	0.	0.
(9) CHRISTINA SHIOI STATE COORDINATOR	40.00	X						37,269.	0.	0.
(10) JAMIE BENEDICT DIRECTOR	25.00	X						35,824.	0.	0.
(11) JILL HESS STATE ADVISOR	20.00			X				25,500.	0.	0.
(12) CATHERINE RICE STATE ADVISOR	1.00			X				23,075.	0.	0.
(13) JENNIFER SHOUSE-KLASSEN STATE ADVISOR	40.00			X				23,075.	0.	0.
(14) CAROL VON TERSCH DIRECTOR	20.00	X						19,000.	0.	0.
(15) ALYSSA GEORGE TREASURER	1.00	X		X				15,000.	0.	0.
(16) DALE POLLARD DIRECTOR	5.00	X						14,000.	0.	0.
(17) PAUL GRETHEL STATE ADVISOR	12.00			X				13,000.	0.	0.

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

Form 990 (2024)

23-7079474 Page **8**

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) BRITTANY FRANCIS DIRECTOR	5.00	X						7,500.	0.	0.
(19) JAMES WEBER DIRECTOR	20.00	X		X				7,500.	0.	0.
(20) MARK LYONS DIRECTOR	20.00	X		X				7,500.	0.	0.
(21) FELECA MANDEVILLE STATE ADVISOR	1.00			X				6,000.	0.	0.
(22) ANGIE LARSEN DIRECTOR	2.00	X						5,000.	0.	0.
(23) ALEXIS EGGERT DIRECTOR	1.00	X						4,700.	0.	0.
(24) MIKE DIPASQUALE ACCOUNTANT	1.00			X				4,500.	0.	0.
(25) WENDY ROBICHAUD DIRECTOR & STATE ADVISOR	1.00	X						4,000.	0.	0.
(26) GAYEANN ICE CHAIR	1.00	X		X				3,500.	0.	0.
1b Subtotal								866,558.	0.	0.
c Total from continuation sheets to Part VII, Section A								34,891.	0.	0.
d Total (add lines 1b and 1c)								901,449.	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 **2**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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	(B) Description of services	(C) Compensation
WESTIN BOSTON SEAPORT 425 SUMMER ST, BOSTON, MA 02210	HOTEL LODGING AND SERVICES	528,020.
ROSEN PLAZA ORLANDO 9700 INTERNATIONAL DRIVE, ORLANDO, FL 32819	HOTEL LODGING AND SERVICES	391,093.
BEYOND CONSULTING, LLC 7490 SW 49TH CT, PORTLAND, OR 97219	ASSOCIATION MANAGEMENT, COACHING	258,728.
EDGE PRODUCTIONS 5601 HUETTNER DR., NORMAN, OK 73069	MULTI MEDIA PRODUCTION	163,313.
DECA INC 1908 ASSOCIATION DRIVE, RESTON, VA 20191	REGISTRATION/SUPPLIES	103,778.

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 **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2024)

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

Form 990

23-7079474

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			
(27) ROBERT NATHAN CHAIR	1.00	X		X				3,500.	0.	0.
(28) KAREN MENDEZ DIRECTOR	1.00	X						3,500.	0.	0.
(29) LISA DELAMPAN STATE ADVISOR	1.00			X				3,500.	0.	0.
(30) GRACE MCCLOSKEY DIRECTOR	1.00	X						3,000.	0.	0.
(31) LINDA PCHELKA STATE ADVISOR	1.00			X				3,000.	0.	0.
(32) MELISSA GALLAGHER DIRECTOR	1.00	X						2,000.	0.	0.
(33) GALE FANALE DIRECTOR	1.00	X						1,500.	0.	0.
(34) MATT MAGNUSON DIRECTOR	1.00	X						1,500.	0.	0.
(35) TERESA BROOKS DIRECTOR	1.00	X						1,500.	0.	0.
(36) KRISTIN LIDSTROM DIRECTOR	1.00	X						1,100.	0.	0.
(37) RACHEL JONES DIRECTOR	1.00	X						1,100.	0.	0.
(38) NADINE FREEDLIN CHAIR	1.00	X		X				1,000.	0.	0.
(39) KEVIN BUENING DIRECTOR	1.00	X						1,000.	0.	0.
(40) STACIE FOWLER DIRECTOR	1.00	X						850.	0.	0.
(41) AMBER REED DIRECTOR	1.00	X						650.	0.	0.
(42) JAMES DUFFY DIRECTOR	1.00	X						599.	0.	0.
(43) KEVIN JONES DIRECTOR	1.00	X						599.	0.	0.
(44) JENNIFER WEBER DIRECTOR	2.00	X						599.	0.	0.
(45) DAVID BURKE DIRECTOR	3.00	X						599.	0.	0.
(46) JEAN ATTIG DIRECTOR	3.00	X						599.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(47) KAREN BEAR DIRECTOR	7.00	X						599.	0.	0.
(48) TIA DELAMPAN DIRECTOR	1.00	X						599.	0.	0.
(49) TIMOTHY MAROTTE TREASURER	1.00	X		X				599.	0.	0.
(50) JESSICA WADE DIRECTOR	1.00	X						500.	0.	0.
(51) PEGGY ARNOLD SECRETARY	1.00	X						350.	0.	0.
(52) JENNIFER BETTHAUSER DIRECTOR	1.00	X						299.	0.	0.
(53) WILLIAM COULSON DIRECTOR	1.00	X						250.	0.	0.
(54) KATHA CINNAMON ACCOUNTANT	4.00			X				0.	0.	0.
(55) ANITA LAMOUREUX CHAIR	1.00	X		X				0.	0.	0.
(56) BRAYDEN DAVIS CHAIR	1.00	X		X				0.	0.	0.
(57) CAITLIN HEUSCHER CHAIR	1.00	X		X				0.	0.	0.
(58) CAROLYN MASSIAH CHAIR	1.00	X		X				0.	0.	0.
(59) DAVID CARTER CHAIR	1.00	X		X				0.	0.	0.
(60) GEORGANNA MANSFIELD CHAIR	1.00	X		X				0.	0.	0.
(61) HEATHER VAN DYKE CHAIR	1.00	X		X				0.	0.	0.
(62) JACOB POLLICOVE CHAIR	1.00	X		X				0.	0.	0.
(63) JAMES ELVIDGE CHAIR	1.00	X		X				0.	0.	0.
(64) JENNY PATINO CHAIR	1.00	X		X				0.	0.	0.
(65) JOLI LI CHAIR	1.00	X		X				0.	0.	0.
(66) KALEN CARLSON CHAIR	1.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(67) KELLY ABBOTT CHAIR	1.00	X		X				0.	0.	0.
(68) LISA CLINE CHAIR	1.00	X		X				0.	0.	0.
(69) MARC HILLESTAD CHAIR	1.00	X		X				0.	0.	0.
(70) MAXIMUS FLORES CHAIR	1.00	X		X				0.	0.	0.
(71) MICHELLE JACKSON CHAIR	1.00	X		X				0.	0.	0.
(72) MOLLIE FUSSELL CHAIR	1.00	X		X				0.	0.	0.
(73) RACHAEL DUBROW CHAIR	1.00	X		X				0.	0.	0.
(74) RICHARD EURICH CHAIR	1.00	X		X				0.	0.	0.
(75) RICHARD FAULKNER CHAIR	1.00	X		X				0.	0.	0.
(76) SARA PARRIOTT CHAIR	1.00	X		X				0.	0.	0.
(77) SARA SMITH CHAIR	1.00	X		X				0.	0.	0.
(78) SARA WHELAN CHAIR	1.00	X		X				0.	0.	0.
(79) DAVID DECKER CHAIR	2.00	X		X				0.	0.	0.
(80) DAVID RIPPL CHAIR	2.00	X		X				0.	0.	0.
(81) HEATHER ASBURY CHAIR	3.00	X		X				0.	0.	0.
(82) MANUEL FLORES CHAIR	5.00	X		X				0.	0.	0.
(83) MARJORIE FITZGIBBON CHAIR	5.00	X		X				0.	0.	0.
(84) ARLEEN RAMOS CHAIR	6.00	X		X				0.	0.	0.
(85) NIDAY JOSEPH CHAIR	8.00	X		X				0.	0.	0.
(86) ALAN BALSDON CHAIR	10.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(87) DENNIS MIFFLIN CHAIR	1.00	X		X				0.	0.	0.
(88) LAURA LAUINGER CHAIR ELECT	1.00	X		X				0.	0.	0.
(89) CASE DICKEY DIRECTOR	1.00	X						0.	0.	0.
(90) EMMY CORN DIRECTOR	1.00	X						0.	0.	0.
(91) AARON CROTTY DIRECTOR	1.00	X						0.	0.	0.
(92) AARON OROSCO DIRECTOR	1.00	X						0.	0.	0.
(93) ABIGAIL LUGO DIRECTOR	1.00	X						0.	0.	0.
(94) ADAM MOUKAD DIRECTOR	1.00	X						0.	0.	0.
(95) ADAM SHELTON DIRECTOR	1.00	X						0.	0.	0.
(96) ADDIE HOLLINGSWORTH DIRECTOR	1.00	X						0.	0.	0.
(97) ADELA PETRIKIS DIRECTOR	1.00	X						0.	0.	0.
(98) ADELLE VINCENT DIRECTOR	1.00	X						0.	0.	0.
(99) ADINA BOATRIGHT DIRECTOR	1.00	X						0.	0.	0.
(100) ALEXANDRIA ACKLEY DIRECTOR	1.00	X						0.	0.	0.
(101) ALEXIS MCNEAR DIRECTOR	1.00	X						0.	0.	0.
(102) ALLE REEDER DIRECTOR	1.00	X						0.	0.	0.
(103) ALLISON BENTLEY DIRECTOR	1.00	X						0.	0.	0.
(104) ALLYSON FINLEY DIRECTOR	1.00	X						0.	0.	0.
(105) AMANDA BREZNEY DIRECTOR	1.00	X						0.	0.	0.
(106) AMANDA BURNS DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(107) AMANDA GRAHAM-BISHOP DIRECTOR	1.00	X						0.	0.	0.
(108) AMEILA DARBY DIRECTOR	1.00	X						0.	0.	0.
(109) AMY BERGERON DIRECTOR	1.00	X						0.	0.	0.
(110) AMY GARNAHAN DIRECTOR	1.00	X						0.	0.	0.
(111) AMY WELCH DIRECTOR	1.00	X						0.	0.	0.
(112) AMY WISDOM DIRECTOR	1.00	X						0.	0.	0.
(113) ANANYA TAGGARSE DIRECTOR	1.00	X						0.	0.	0.
(114) ANDREA MOHR DIRECTOR	1.00	X						0.	0.	0.
(115) ANGELA RUSH DIRECTOR	1.00	X						0.	0.	0.
(116) ANGELA YE DIRECTOR	1.00	X						0.	0.	0.
(117) ANGELIQUE ANGEL DE NAVA DIRECTOR	1.00	X						0.	0.	0.
(118) ANGELO MARTINEZ DIRECTOR	1.00	X						0.	0.	0.
(119) ARACELI VAZQUEZ DIRECTOR	1.00	X						0.	0.	0.
(120) ARIEL ST. GERMAINE DIRECTOR	1.00	X						0.	0.	0.
(121) ASHLEY BROWN DIRECTOR	1.00	X						0.	0.	0.
(122) ASHLEY FEHRINGER DIRECTOR	1.00	X						0.	0.	0.
(123) ASHLEY HAWKER DIRECTOR	1.00	X						0.	0.	0.
(124) ASHLEY LOBER DIRECTOR	1.00	X						0.	0.	0.
(125) AUBREY GARRETT DIRECTOR	1.00	X						0.	0.	0.
(126) AUTUMN ROBERTS DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(127) AYUSH SINGH DIRECTOR	1.00	X						0.	0.	0.
(128) BECKY BYRD DIRECTOR	1.00	X						0.	0.	0.
(129) BECKY KUEHL DIRECTOR	1.00	X						0.	0.	0.
(130) BECKY MCCORMICK DIRECTOR	1.00	X						0.	0.	0.
(131) BETHANY RICKARD DIRECTOR	1.00	X						0.	0.	0.
(132) BLAKE BODENBURG DIRECTOR	1.00	X						0.	0.	0.
(133) BOB JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(134) BOBBY SCOTT DIRECTOR	1.00	X						0.	0.	0.
(135) BRAD KENNETT DIRECTOR	1.00	X						0.	0.	0.
(136) BRADFORD HOLLINGSWORTH DIRECTOR	1.00	X						0.	0.	0.
(137) BREANNE NELSON DIRECTOR	1.00	X						0.	0.	0.
(138) BRENNAN BARTLETT DIRECTOR	1.00	X						0.	0.	0.
(139) BRENT GENDELMAN DIRECTOR	1.00	X						0.	0.	0.
(140) BRENT PFEIFFER DIRECTOR	1.00	X						0.	0.	0.
(141) BREW GOLDFINGER DIRECTOR	1.00	X						0.	0.	0.
(142) BRIAN MCNEAL DIRECTOR	1.00	X						0.	0.	0.
(143) BRIAN NOBREGA DIRECTOR	1.00	X						0.	0.	0.
(144) BRIDGET CIOLKOSZ DIRECTOR	1.00	X						0.	0.	0.
(145) BRIELLE BILINSKI DIRECTOR	1.00	X						0.	0.	0.
(146) BRYAN LONG DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(147) BRYCE ANCHETA DIRECTOR	1.00	X						0.	0.	0.
(148) BRYCEN WOODLEY DIRECTOR	1.00	X						0.	0.	0.
(149) CAEDMON CASE DIRECTOR	1.00	X						0.	0.	0.
(150) CALLON SIEBENALER DIRECTOR	1.00	X						0.	0.	0.
(151) CARMELLA SALAZAR DIRECTOR	1.00	X						0.	0.	0.
(152) CAROL BORSKEY DIRECTOR	1.00	X						0.	0.	0.
(153) CAROL LILL DIRECTOR	1.00	X						0.	0.	0.
(154) CASSIE GRIGSBY DIRECTOR	1.00	X						0.	0.	0.
(155) CHAD ROSS DIRECTOR	1.00	X						0.	0.	0.
(156) CHARLES FURLOW DIRECTOR	1.00	X						0.	0.	0.
(157) CHARLOTTE STRAUSS DIRECTOR	1.00	X						0.	0.	0.
(158) CHASE STEWART DIRECTOR	1.00	X						0.	0.	0.
(159) CHRIS HUGHES DIRECTOR	1.00	X						0.	0.	0.
(160) CHRIS HUMPHRIES DIRECTOR	1.00	X						0.	0.	0.
(161) CHRISTIE CHAUMP DIRECTOR	1.00	X						0.	0.	0.
(162) CHRISTINA HOOD DIRECTOR	1.00	X						0.	0.	0.
(163) CJ WALLINGTON DIRECTOR	1.00	X						0.	0.	0.
(164) CLAIRE DEVNEY DIRECTOR	1.00	X						0.	0.	0.
(165) COLE HORTON DIRECTOR	1.00	X						0.	0.	0.
(166) COLLEEN SABATHIER DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(167) CONNER BUDDINGTON DIRECTOR	1.00	X						0.	0.	0.
(168) CONNOR SHULTE DIRECTOR	1.00	X						0.	0.	0.
(169) COREY GUERRA DIRECTOR	1.00	X						0.	0.	0.
(170) CRYSTAL SWICK DIRECTOR	1.00	X						0.	0.	0.
(171) CURTIS HALEY DIRECTOR	1.00	X						0.	0.	0.
(172) DALTON TONNE DIRECTOR	1.00	X						0.	0.	0.
(173) DANA BOICE DIRECTOR	1.00	X						0.	0.	0.
(174) DANNEL PORTER DIRECTOR	1.00	X						0.	0.	0.
(175) DEBBIE HARRIS DIRECTOR	1.00	X						0.	0.	0.
(176) DEMITRA MARAFATAOS DIRECTOR	1.00	X						0.	0.	0.
(177) DIANE BARAY DIRECTOR	1.00	X						0.	0.	0.
(178) DIANNE JOLOVICH DIRECTOR	1.00	X						0.	0.	0.
(179) DREW MOYER DIRECTOR	1.00	X						0.	0.	0.
(180) DUSTIN CYGNAR DIRECTOR	1.00	X						0.	0.	0.
(181) DUSTIN JOLIVETTE DIRECTOR	1.00	X						0.	0.	0.
(182) DUSTIN SHOWEN DIRECTOR	1.00	X						0.	0.	0.
(183) ELENA SOBAMPO DIRECTOR	1.00	X						0.	0.	0.
(184) ELENA TERCERO DIRECTOR	1.00	X						0.	0.	0.
(185) ELIZABETH CAROLUS DIRECTOR	1.00	X						0.	0.	0.
(186) EMMA WAYMIRE DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(187) EMMANUEL CORPORAL DIRECTOR	1.00	X						0.	0.	0.
(188) ERIC ROESLER DIRECTOR	1.00	X						0.	0.	0.
(189) ERIN CARRICA DIRECTOR	1.00	X						0.	0.	0.
(190) ETHAN ARNSPERGER DIRECTOR	1.00	X						0.	0.	0.
(191) ETHAN WHITED DIRECTOR	1.00	X						0.	0.	0.
(192) FORREST MALO DIRECTOR	1.00	X						0.	0.	0.
(193) FORREST SOLON DIRECTOR	1.00	X						0.	0.	0.
(194) FRANK MAYO DIRECTOR	1.00	X						0.	0.	0.
(195) GEN CRAFT DIRECTOR	1.00	X						0.	0.	0.
(196) GIDEON MORROW DIRECTOR	1.00	X						0.	0.	0.
(197) GIG GRIFFITH DIRECTOR	1.00	X						0.	0.	0.
(198) GINA RYE DIRECTOR	1.00	X						0.	0.	0.
(199) GINGER HILL DIRECTOR	1.00	X						0.	0.	0.
(200) HALEIGH SEGUIN DIRECTOR	1.00	X						0.	0.	0.
(201) HALIE BISSELL DIRECTOR	1.00	X						0.	0.	0.
(202) HB WHITAKER DIRECTOR	1.00	X						0.	0.	0.
(203) HEATHER BALDWIN DIRECTOR	1.00	X						0.	0.	0.
(204) HEATHER MENDELSON DIRECTOR	1.00	X						0.	0.	0.
(205) HOLLI KALALEH DIRECTOR	1.00	X						0.	0.	0.
(206) HOUSTON PORTER DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(207) JAMIE BUSBY DIRECTOR	1.00	X						0.	0.	0.
(208) JAMIE BUSSELL DIRECTOR	1.00	X						0.	0.	0.
(209) JANET BALESTINO DIRECTOR	1.00	X						0.	0.	0.
(210) JANET LANGSTON DIRECTOR	1.00	X						0.	0.	0.
(211) JEFF RHOADES DIRECTOR	1.00	X						0.	0.	0.
(212) JEFFREY BAUGHMAN DIRECTOR	1.00	X						0.	0.	0.
(213) JESSICA CATLEY DIRECTOR	1.00	X						0.	0.	0.
(214) JOANNA COOK DIRECTOR	1.00	X						0.	0.	0.
(215) JOHN ROWE DIRECTOR	1.00	X						0.	0.	0.
(216) JULIE ELLIS DIRECTOR	1.00	X						0.	0.	0.
(217) JULIE SCHALLER DIRECTOR	1.00	X						0.	0.	0.
(218) JUSTON GLASS DIRECTOR	1.00	X						0.	0.	0.
(219) KAITLIN LARSEN DIRECTOR	1.00	X						0.	0.	0.
(220) KAREN CHARNEY DIRECTOR	1.00	X						0.	0.	0.
(221) KASEY SANCHEZ DIRECTOR	1.00	X						0.	0.	0.
(222) KATELYN FRYE DIRECTOR	1.00	X						0.	0.	0.
(223) KATHERINE DILLON DIRECTOR	1.00	X						0.	0.	0.
(224) KATHRYN WALTERS DIRECTOR	1.00	X						0.	0.	0.
(225) KEITH TRAYLOR DIRECTOR	1.00	X						0.	0.	0.
(226) KELLI SITZLER DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(227) KEVIN DRAZIC DIRECTOR	1.00	X						0.	0.	0.
(228) KYLE STANGER DIRECTOR	1.00	X						0.	0.	0.
(229) LAURA FECAK DIRECTOR	1.00	X						0.	0.	0.
(230) LAURA JONES DIRECTOR	1.00	X						0.	0.	0.
(231) LEAH LOVELL DIRECTOR	1.00	X						0.	0.	0.
(232) LENORE ESPANOLA DIRECTOR	1.00	X						0.	0.	0.
(233) LISA CHESTNUTT DIRECTOR	1.00	X						0.	0.	0.
(234) LISA HOFFMAN DIRECTOR	1.00	X						0.	0.	0.
(235) MACI KINCAID DIRECTOR	1.00	X						0.	0.	0.
(236) MARCI PORTER DIRECTOR	1.00	X						0.	0.	0.
(237) MARCIA LEE DIRECTOR	1.00	X						0.	0.	0.
(238) MARK RISEN DIRECTOR	1.00	X						0.	0.	0.
(239) MARY CECCHINI DIRECTOR	1.00	X						0.	0.	0.
(240) MARY EDRINGTON DIRECTOR	1.00	X						0.	0.	0.
(241) MARY WHITED DIRECTOR	1.00	X						0.	0.	0.
(242) MCKENIZE KERRY DIRECTOR	1.00	X						0.	0.	0.
(243) MELISSA DIETZ DIRECTOR	1.00	X						0.	0.	0.
(244) MELVIN BARROW JR. DIRECTOR	1.00	X						0.	0.	0.
(245) MIACHEL ACHEATEL DIRECTOR	1.00	X						0.	0.	0.
(246) MIKE HANSE DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(247) MINDY ROSE DIRECTOR	1.00	X						0.	0.	0.
(248) MOLLY ANDERSON DIRECTOR	1.00	X						0.	0.	0.
(249) NATE REESE DIRECTOR	1.00	X						0.	0.	0.
(250) NICOLE HALPIN DIRECTOR	1.00	X						0.	0.	0.
(251) NIKI SCHIEFFER DIRECTOR	1.00	X						0.	0.	0.
(252) PATRICK PAIGE DIRECTOR	1.00	X						0.	0.	0.
(253) RACHAEL ROUTT DIRECTOR	1.00	X						0.	0.	0.
(254) RAE BROUSSARD DIRECTOR	1.00	X						0.	0.	0.
(255) RANDY KAMMERMAN DIRECTOR	1.00	X						0.	0.	0.
(256) RHONDA MCCARVEL DIRECTOR	1.00	X						0.	0.	0.
(257) RICHARD GARDNER DIRECTOR	1.00	X						0.	0.	0.
(258) ROBERT FONTAINE DIRECTOR	1.00	X						0.	0.	0.
(259) RON DODGE DIRECTOR	1.00	X						0.	0.	0.
(260) SADIE YOUNGBLOOD DIRECTOR	1.00	X						0.	0.	0.
(261) SAM CRAIG DIRECTOR	1.00	X						0.	0.	0.
(262) SCOTT JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(263) SHARON KOJO DIRECTOR	1.00	X						0.	0.	0.
(264) SHELLY BENES DIRECTOR	1.00	X						0.	0.	0.
(265) TAMI RAAKER DIRECTOR	1.00	X						0.	0.	0.
(266) TIANA BRIONES DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(267) TONY CARRICO DIRECTOR	1.00	X						0.	0.	0.
(268) VICK HALES DIRECTOR	1.00	X						0.	0.	0.
(269) WHITNEY HASENYAGER DIRECTOR	1.00	X						0.	0.	0.
(270) AANYA RANASARIA DIRECTOR	2.00	X						0.	0.	0.
(271) ALY JOHNSON DIRECTOR	2.00	X						0.	0.	0.
(272) AMBER HALL DIRECTOR	2.00	X						0.	0.	0.
(273) ANNA ALDRICH DIRECTOR	2.00	X						0.	0.	0.
(274) ASHLEY TESSMER DIRECTOR	2.00	X						0.	0.	0.
(275) CAROL DRISTLE DIRECTOR	2.00	X						0.	0.	0.
(276) CHERYL CHAMBERLAIN DIRECTOR	2.00	X						0.	0.	0.
(277) CLAUDE COMMISSO DIRECTOR	2.00	X						0.	0.	0.
(278) CLAY LYELL DIRECTOR	2.00	X						0.	0.	0.
(279) COURTNEY TANGUMA DIRECTOR	2.00	X						0.	0.	0.
(280) DEVIN KLOCK DIRECTOR	2.00	X						0.	0.	0.
(281) ELIZABETH SIERRA DIRECTOR	2.00	X						0.	0.	0.
(282) EMMA DING DIRECTOR	2.00	X						0.	0.	0.
(283) FRANK HUFFNAGEL DIRECTOR	2.00	X						0.	0.	0.
(284) GEN BENNETT DIRECTOR	2.00	X						0.	0.	0.
(285) GREG MENIG DIRECTOR	2.00	X						0.	0.	0.
(286) HILARY WIMMER DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(287) JACQUELINE ARMENTA DIRECTOR	2.00	X						0.	0.	0.
(288) JAMIE YOUNG DIRECTOR	2.00	X						0.	0.	0.
(289) JESS BECKER DIRECTOR	2.00	X						0.	0.	0.
(290) JILL VALENTINE DIRECTOR	2.00	X						0.	0.	0.
(291) JOE SANTO DIRECTOR	2.00	X						0.	0.	0.
(292) JOLYNN BARAL DIRECTOR	2.00	X						0.	0.	0.
(293) KATHY FROMMER DIRECTOR	2.00	X						0.	0.	0.
(294) KRISTA SCHENCK DIRECTOR	2.00	X						0.	0.	0.
(295) LEENA RATHGEBER DIRECTOR	2.00	X						0.	0.	0.
(296) LINDSAY EDY DIRECTOR	2.00	X						0.	0.	0.
(297) LINDSAY MATUSZEWSKI DIRECTOR	2.00	X						0.	0.	0.
(298) MARISSA HUFF DIRECTOR	2.00	X						0.	0.	0.
(299) MARK BICHLER DIRECTOR	2.00	X						0.	0.	0.
(300) MATT HENNINGS DIRECTOR	2.00	X						0.	0.	0.
(301) MICHAEL LYAKHOV DIRECTOR	2.00	X						0.	0.	0.
(302) MICHAEL PATTI DIRECTOR	2.00	X						0.	0.	0.
(303) NATALIE HALPIN DIRECTOR	2.00	X						0.	0.	0.
(304) OLIVIA THAMES DIRECTOR	2.00	X						0.	0.	0.
(305) PAM MENDEL DIRECTOR	2.00	X						0.	0.	0.
(306) PAUL RODRIGUEZ DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(307) RAY JAJAC DIRECTOR	2.00	X						0.	0.	0.
(308) RICH MCCARTHY DIRECTOR	2.00	X						0.	0.	0.
(309) SAM WILLIAMS DIRECTOR	2.00	X						0.	0.	0.
(310) SARA MOSSMAN DIRECTOR	2.00	X						0.	0.	0.
(311) SARAH HART OLSON DIRECTOR	2.00	X						0.	0.	0.
(312) SUE UTZ DIRECTOR	2.00	X						0.	0.	0.
(313) JAYNE HARRIS DIRECTOR	3.00	X						0.	0.	0.
(314) JEREMY DAVIS DIRECTOR	3.00	X						0.	0.	0.
(315) AUTUMN WILLIAMS DIRECTOR	5.00	X						0.	0.	0.
(316) BRYCE FLAMMANG DIRECTOR	5.00	X						0.	0.	0.
(317) DANIEL LAROSE DIRECTOR	5.00	X						0.	0.	0.
(318) ELENA CHAMBERLAIN DIRECTOR	5.00	X						0.	0.	0.
(319) KRISTY WILLIAMS DIRECTOR	5.00	X						0.	0.	0.
(320) LEA RICKS DIRECTOR	5.00	X						0.	0.	0.
(321) LEIGH OJEDA DIRECTOR	5.00	X						0.	0.	0.
(322) MARY-LOU TUPPER DIRECTOR	5.00	X						0.	0.	0.
(323) MICHELLE VIGIL DIRECTOR	5.00	X						0.	0.	0.
(324) MISSY ZIPPERIAN DIRECTOR	5.00	X						0.	0.	0.
(325) SARAH GROVER DIRECTOR	5.00	X						0.	0.	0.
(326) SUSAN SAXTON DIRECTOR	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(327) TERRANCE REESE DIRECTOR	5.00	X						0.	0.	0.
(328) ADAM FEALL DIRECTOR	10.00	X						0.	0.	0.
(329) BRYCEN WOOLEY DIRECTOR	10.00	X						0.	0.	0.
(330) ANN DAY DIRECTOR	30.00	X						0.	0.	0.
(331) DAVID WAIT DIRECTOR	40.00	X						0.	0.	0.
(332) HEATHER SWAIN DIRECTOR	1.00	X						0.	0.	0.
(333) HOLLY HOOD DIRECTOR	1.00	X						0.	0.	0.
(334) JACKI BAUMAN DIRECTOR	1.00	X						0.	0.	0.
(335) JACKIE PHILLIPS DIRECTOR	1.00	X						0.	0.	0.
(336) JACKIE SCHILLER DIRECTOR	1.00	X						0.	0.	0.
(337) JACOB STACY DIRECTOR	1.00	X						0.	0.	0.
(338) JAMES DOW DIRECTOR	1.00	X						0.	0.	0.
(339) JAMIE RILEY DIRECTOR	1.00	X						0.	0.	0.
(340) JANET WINTER DIRECTOR	1.00	X						0.	0.	0.
(341) JANNIFER MILKE DIRECTOR	1.00	X						0.	0.	0.
(342) JARED KEGLER DIRECTOR	1.00	X						0.	0.	0.
(343) JASHIME WEDDERBURN DIRECTOR	1.00	X						0.	0.	0.
(344) JASON CROWE DIRECTOR	1.00	X						0.	0.	0.
(345) JAYLEN BODY DIRECTOR	1.00	X						0.	0.	0.
(346) JAZMIN VANN DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(347) JEANETTE CONTRERAS DIRECTOR	1.00	X						0.	0.	0.
(348) JENNIFER CLEMENS DIRECTOR	1.00	X						0.	0.	0.
(349) JENNIFER GREESON DIRECTOR	1.00	X						0.	0.	0.
(350) JENNIFER KEINTZ DIRECTOR	1.00	X						0.	0.	0.
(351) JEREMY NADLER DIRECTOR	1.00	X						0.	0.	0.
(352) JESSICA BOOTH DIRECTOR	1.00	X						0.	0.	0.
(353) JESSICA CHRISTENSEN DIRECTOR	1.00	X						0.	0.	0.
(354) JESSICA FREEMAN DIRECTOR	1.00	X						0.	0.	0.
(355) JIM SULLIVAN DIRECTOR	1.00	X						0.	0.	0.
(356) JIM WEBBER DIRECTOR	1.00	X						0.	0.	0.
(357) JOE TIMM DIRECTOR	1.00	X						0.	0.	0.
(358) JOSE GONZALEZMARTINEZ DIRECTOR	1.00	X						0.	0.	0.
(359) JOSH BAUER DIRECTOR	1.00	X						0.	0.	0.
(360) JOSH BURGOYNE DIRECTOR	1.00	X						0.	0.	0.
(361) JT TALKINTON DIRECTOR	1.00	X						0.	0.	0.
(362) JUAN ACEVEDO DIRECTOR	1.00	X						0.	0.	0.
(363) JULIA DALYRIMPLE DIRECTOR	1.00	X						0.	0.	0.
(364) JULIE COOLEY DIRECTOR	1.00	X						0.	0.	0.
(365) JULIE CROCKETT DIRECTOR	1.00	X						0.	0.	0.
(366) JUSTIN GIPE DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(367) KACEY ASKIN DIRECTOR	1.00	X						0.	0.	0.
(368) KAREN WU DIRECTOR	1.00	X						0.	0.	0.
(369) KATE NORTON DIRECTOR	1.00	X						0.	0.	0.
(370) KATIE RINGDAHL DIRECTOR	1.00	X						0.	0.	0.
(371) KEFIR KLEE DIRECTOR	1.00	X						0.	0.	0.
(372) KELLY GENEI DIRECTOR	1.00	X						0.	0.	0.
(373) KENDRA CHRISTENSEN DIRECTOR	1.00	X						0.	0.	0.
(374) KENDRA MEYERS DIRECTOR	1.00	X						0.	0.	0.
(375) KENNETH CHUKWUBA DIRECTOR	1.00	X						0.	0.	0.
(376) KENNETH JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(377) KEVIN KRIZAN DIRECTOR	1.00	X						0.	0.	0.
(378) KIM EDWARDS DIRECTOR	1.00	X						0.	0.	0.
(379) KIM PENNYCUFF DIRECTOR	1.00	X						0.	0.	0.
(380) KIMBERLY HOFFMAN DIRECTOR	1.00	X						0.	0.	0.
(381) KRISTA ANDERSON DIRECTOR	1.00	X						0.	0.	0.
(382) KRISTEN SANTERO DIRECTOR	1.00	X						0.	0.	0.
(383) KRISTI DANCSISIN DIRECTOR	1.00	X						0.	0.	0.
(384) KRISTY DILLINGHAM DIRECTOR	1.00	X						0.	0.	0.
(385) KYLE BRITTO DIRECTOR	1.00	X						0.	0.	0.
(386) LARRY ANDERS DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(387) LARRY D'ANZA DIRECTOR	1.00	X						0.	0.	0.
(388) LAURA CUMMINGS DIRECTOR	1.00	X						0.	0.	0.
(389) LAURA WHEELER DIRECTOR	1.00	X						0.	0.	0.
(390) LAUREN O'CONNOR DIRECTOR	1.00	X						0.	0.	0.
(391) LEE GEFFERT DIRECTOR	1.00	X						0.	0.	0.
(392) LETTY BROWN DIRECTOR	1.00	X						0.	0.	0.
(393) LISA GRECO DIRECTOR	1.00	X						0.	0.	0.
(394) LORI JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(395) LORIHAIKSTON DIRECTOR	1.00	X						0.	0.	0.
(396) MAGGIE ELLISON DIRECTOR	1.00	X						0.	0.	0.
(397) MAGGIE LEWINSKY DIRECTOR	1.00	X						0.	0.	0.
(398) MAGGIE SCHNEIDER DIRECTOR	1.00	X						0.	0.	0.
(399) MARGIE DUNLAP DIRECTOR	1.00	X						0.	0.	0.
(400) MARINA FREEMAN DIRECTOR	1.00	X						0.	0.	0.
(401) MARK STEEDLY DIRECTOR	1.00	X						0.	0.	0.
(402) MARYAM SHAKAM DIRECTOR	1.00	X						0.	0.	0.
(403) MATT HANKINS DIRECTOR	1.00	X						0.	0.	0.
(404) MEGHAN BEAULIEU DIRECTOR	1.00	X						0.	0.	0.
(405) MEGHAN MARTINEZ DIRECTOR	1.00	X						0.	0.	0.
(406) MELINDA RANGEL DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(407) MELISSA HUNTLEY DIRECTOR	1.00	X						0.	0.	0.
(408) MEREDITH HARRISON DIRECTOR	1.00	X						0.	0.	0.
(409) MICHAEL JONES DIRECTOR	1.00	X						0.	0.	0.
(410) MICHAEL VASICEK DIRECTOR	1.00	X						0.	0.	0.
(411) MIKE MILLER DIRECTOR	1.00	X						0.	0.	0.
(412) MIKE SHERWOOD DIRECTOR	1.00	X						0.	0.	0.
(413) MIVIDA PARHAM DIRECTOR	1.00	X						0.	0.	0.
(414) MOLLY BARTA DIRECTOR	1.00	X						0.	0.	0.
(415) MONICE MAURICE DIRECTOR	1.00	X						0.	0.	0.
(416) NAMAN TIWARI DIRECTOR	1.00	X						0.	0.	0.
(417) NATALIE-JOY LARYEA DIRECTOR	1.00	X						0.	0.	0.
(418) NEIL SCHLAGEL DIRECTOR	1.00	X						0.	0.	0.
(419) NICCI CLARK DIRECTOR	1.00	X						0.	0.	0.
(420) NICHOLAS DEFRANCESCO DIRECTOR	1.00	X						0.	0.	0.
(421) NICOLE SANTERO DIRECTOR	1.00	X						0.	0.	0.
(422) NYA NEYMAN DIRECTOR	1.00	X						0.	0.	0.
(423) OLIVIA CHERRY DIRECTOR	1.00	X						0.	0.	0.
(424) OM HIRANI DIRECTOR	1.00	X						0.	0.	0.
(425) PAUL KIMBLER DIRECTOR	1.00	X						0.	0.	0.
(426) PAYTON PORBECK DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(427) RACHAEL GOLEMBESKY DIRECTOR	1.00	X						0.	0.	0.
(428) RAFIAT ESHETT DIRECTOR	1.00	X						0.	0.	0.
(429) RALF MEHNERT-MELAND DIRECTOR	1.00	X						0.	0.	0.
(430) RAM PETULARI DIRECTOR	1.00	X						0.	0.	0.
(431) RANIA FANOUS DIRECTOR	1.00	X						0.	0.	0.
(432) ROLAND SOTO DIRECTOR	1.00	X						0.	0.	0.
(433) ROSS MAKI DIRECTOR	1.00	X						0.	0.	0.
(434) RYAN HARRISON DIRECTOR	1.00	X						0.	0.	0.
(435) SANDRA WILLIS DIRECTOR	1.00	X						0.	0.	0.
(436) SARAH JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(437) SARAH WELKIN DIRECTOR	1.00	X						0.	0.	0.
(438) SCOTT LARSEN DIRECTOR	1.00	X						0.	0.	0.
(439) SCOTT NELSON DIRECTOR	1.00	X						0.	0.	0.
(440) SEAN BAILEY DIRECTOR	1.00	X						0.	0.	0.
(441) SEAN ELSER DIRECTOR	1.00	X						0.	0.	0.
(442) SETH BELFORD DIRECTOR	1.00	X						0.	0.	0.
(443) SHARON ANSLEY DIRECTOR	1.00	X						0.	0.	0.
(444) SHAUNA KING DIRECTOR	1.00	X						0.	0.	0.
(445) SHAWN LITTLE DIRECTOR	1.00	X						0.	0.	0.
(446) SHEILA LOZANO DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(447) SHELBY LERCH DIRECTOR	1.00	X						0.	0.	0.
(448) SHERRY SILER DIRECTOR	1.00	X						0.	0.	0.
(449) SOFIA MARIN DIRECTOR	1.00	X						0.	0.	0.
(450) SONJA WEILER DIRECTOR	1.00	X						0.	0.	0.
(451) SONYA HOBSON DIRECTOR	1.00	X						0.	0.	0.
(452) STACY WASHINGTON DIRECTOR	1.00	X						0.	0.	0.
(453) STEPHANIE GRIMES DIRECTOR	1.00	X						0.	0.	0.
(454) TABITHA HUDSON DIRECTOR	1.00	X						0.	0.	0.
(455) TABITHA STALLWORTH DIRECTOR	1.00	X						0.	0.	0.
(456) TALITHA OLIVERI DIRECTOR	1.00	X						0.	0.	0.
(457) TANNER CUREY DIRECTOR	1.00	X						0.	0.	0.
(458) TANYA BLEHM DIRECTOR	1.00	X						0.	0.	0.
(459) TAYLOR ARMSTRONG DIRECTOR	1.00	X						0.	0.	0.
(460) TAYLOR GRENNAN DIRECTOR	1.00	X						0.	0.	0.
(461) TAYLOR MAVRINAC DIRECTOR	1.00	X						0.	0.	0.
(462) TAYLOR TWOMEY DIRECTOR	1.00	X						0.	0.	0.
(463) THOMAS RUSSELL DIRECTOR	1.00	X						0.	0.	0.
(464) TIM PAROCHOJUK DIRECTOR	1.00	X						0.	0.	0.
(465) TOM SOUSA DIRECTOR	1.00	X						0.	0.	0.
(466) TONI BIANCARDI DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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) TRACY LAIRD DIRECTOR	1.00	X						0.	0.	0.
(468) TROY DAVIS DIRECTOR	1.00	X						0.	0.	0.
(469) VERONICA DALLAS DIRECTOR	1.00	X						0.	0.	0.
(470) VINCENT LOPICCOIP DIRECTOR	1.00	X						0.	0.	0.
(471) WHITNEY CONJESKI DIRECTOR	1.00	X						0.	0.	0.
(472) YASH GUPTA DIRECTOR	1.00	X						0.	0.	0.
(473) BRAD PEER DIRECTOR & STATE ADVISOR	2.00	X		X				0.	0.	0.
(474) TIM FANDEK DIRECTOR & STATE ADVISOR	10.00	X		X				0.	0.	0.
(475) LISA OAKES DIRECTOR & STATE ADVISOR	40.00	X		X				0.	0.	0.
(476) CAROL BOLIN DIRECTOR & STATE ADVISOR	1.00	X		X				0.	0.	0.
(477) DUSTIN NORBY DIRECTOR & STATE ADVISOR	1.00	X		X				0.	0.	0.
(478) EMILY JACOBSON SECRETARY	1.00	X						0.	0.	0.
(479) JEN SINGER SECRETARY	1.00	X						0.	0.	0.
(480) VINCENT WU SECRETARY	1.00	X						0.	0.	0.
(481) MELISSA BAHNSON SECRETARY	2.00	X						0.	0.	0.
(482) MICHELE NELSON SECRETARY	2.00	X						0.	0.	0.
(483) RITA VIEIRA SECRETARY	2.00	X						0.	0.	0.
(484) ABIGAIL LINDSTAD SECRETARY	1.00	X						0.	0.	0.
(485) ANISA GREEN SECRETARY	1.00	X						0.	0.	0.
(486) JOSH MUNRO SECRETARY	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(487) JUSTIN STAUB SECRETARY	1.00	X						0.	0.	0.
(488) KATHERINE KNOWLES SECRETARY	1.00	X						0.	0.	0.
(489) MICHAEL SIAKPERE SECRETARY	1.00	X						0.	0.	0.
(490) NINA WILSON SECRETARY	1.00	X						0.	0.	0.
(491) MATTHEW PEAGLER SECRETARY	1.00	X						0.	0.	0.
(492) ASHLEY MARTINEZ STATE ADVISOR	1.00			X				0.	0.	0.
(493) BRIAN SMITH STATE ADVISOR	1.00			X				0.	0.	0.
(494) KELLY DAMRON STATE ADVISOR	1.00			X				0.	0.	0.
(495) ALEXANDER LOUDEN STATE ADVISOR	5.00			X				0.	0.	0.
(496) KYLE BARBER DIRECTOR & STATE ADVISOR	5.00	X		X				0.	0.	0.
(497) NICOLE WILLIS STATE ADVISOR	5.00			X				0.	0.	0.
(498) DAN GREAVEN DIRECTOR & STATE ADVISOR	10.00	X		X				0.	0.	0.
(499) MARK BURCH STATE ADVISOR	15.00			X				0.	0.	0.
(500) GINA LYMAN STATE ADVISOR	20.00			X				0.	0.	0.
(501) LACY BEANLAND-KIRK STATE ADVISOR	20.00			X				0.	0.	0.
(502) PAXTON CAVIN DIRECTOR & STATE ADVISOR	20.00	X		X				0.	0.	0.
(503) JEFFREY VICTOR STATE ADVISOR	40.00			X				0.	0.	0.
(504) LESLIE CRIDER STATE ADVISOR	40.00			X				0.	0.	0.
(505) SHANNON TUAL STATE ADVISOR	40.00			X				0.	0.	0.
(506) DEBORAH CLINE STATE ADVISOR	1.00			X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(507) DONNA MCFADDEN STATE ADVISOR	1.00			X				0.	0.	0.
(508) ED GROCHOWSKI STATE ADVISOR	1.00			X				0.	0.	0.
(509) JACKLYN SCHILLER DIRECTOR & STATE ADVISOR	1.00	X		X				0.	0.	0.
(510) JENNIFER KAZARIAN STATE ADVISOR	1.00			X				0.	0.	0.
(511) SCOTT JONES STATE ADVISOR	1.00			X				0.	0.	0.
(512) APRIL PORTER TREASURER	1.00	X		X				0.	0.	0.
(513) DEE WINEGAR TREASURER	1.00	X		X				0.	0.	0.
(514) DENNIS VOLENTINE TREASURER	1.00	X		X				0.	0.	0.
(515) JILLIAN MILLER TREASURER	1.00	X		X				0.	0.	0.
(516) MICHAEL BUXTON TREASURER	1.00	X		X				0.	0.	0.
(517) KRYSTEN SCHROEDER TREASURER	2.00	X		X				0.	0.	0.
(518) ROBERT D'AREZZO TREASURER	2.00	X		X				0.	0.	0.
(519) ANGELA PARKER TREASURER	1.00	X		X				0.	0.	0.
(520) BRITTANY WRIGHT TREASURER	1.00	X		X				0.	0.	0.
(521) CYNDEE BARKLEY TREASURER	1.00	X		X				0.	0.	0.
(522) CYNTHIA PEREZ TREASURER	1.00	X		X				0.	0.	0.
(523) GAGE DONOVAN TREASURER	1.00	X		X				0.	0.	0.
(524) JODY WILKINSON TREASURER	1.00	X		X				0.	0.	0.
(525) MATT BRUCE TREASURER	1.00	X		X				0.	0.	0.
(526) NICHOLE SMALL TREASURER	1.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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) RAYMOND MCKINNEY TREASURER	1.00	X		X				0.	0.	0.
(528) SHANNON STEWARD TREASURER	1.00	X		X				0.	0.	0.
(529) ALAIN BAZILE VICE CHAIR	1.00	X		X				0.	0.	0.
(530) ALINA HUGHES VICE CHAIR	1.00	X		X				0.	0.	0.
(531) ANGIE BAILEY VICE CHAIR	1.00	X		X				0.	0.	0.
(532) BETTY OCONNOR VICE CHAIR	1.00	X		X				0.	0.	0.
(533) DAWN BEKAERT VICE CHAIR	1.00	X		X				0.	0.	0.
(534) ELISA BEARDSLEY-DODD VICE CHAIR	1.00	X		X				0.	0.	0.
(535) FEDERICO BALDO VICE CHAIR	1.00	X		X				0.	0.	0.
(536) GRACE SEIBOLD VICE CHAIR	1.00	X		X				0.	0.	0.
(537) GUILA MATARASSO VICE CHAIR	1.00	X		X				0.	0.	0.
(538) JACQUELINE PEETERS VICE CHAIR	1.00	X		X				0.	0.	0.
(539) KATHERINE ARMSTRONG VICE CHAIR	1.00	X		X				0.	0.	0.
(540) LAURA DOUD VICE CHAIR	1.00	X		X				0.	0.	0.
(541) LISA LANKFORD VICE CHAIR	1.00	X		X				0.	0.	0.
(542) MONICA PANEQUE VICE CHAIR	1.00	X		X				0.	0.	0.
(543) PATRICK SIMMONS VICE CHAIR	1.00	X		X				0.	0.	0.
(544) RIKKI FRANCOIS VICE CHAIR	1.00	X		X				0.	0.	0.
(545) SHARON CUTLER VICE CHAIR	1.00	X		X				0.	0.	0.
(546) SHERRY DENO VICE CHAIR	1.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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) TARA AMATO VICE CHAIR	1.00	X		X				0.	0.	0.
(548) TED NEWFIELD VICE CHAIR	1.00	X		X				0.	0.	0.
(549) TRESA WARNER VICE CHAIR	1.00	X		X				0.	0.	0.
(550) WENDY EVANS VICE CHAIR	1.00	X		X				0.	0.	0.
(551) WENDY ROSCHE' VICE CHAIR	1.00	X		X				0.	0.	0.
(552) ZACHARY BAKER VICE CHAIR	1.00	X		X				0.	0.	0.
(553) JEFF CHAMPLIN VICE CHAIR	2.00	X		X				0.	0.	0.
(554) ANNA MCCLURE VICE CHAIR	5.00	X		X				0.	0.	0.
(555) AMANDY THAMMAVONGSA VICE CHAIR	6.00	X		X				0.	0.	0.
(556) BRILEY BRUNDIDGE VICE CHAIR	6.00	X		X				0.	0.	0.
(557) ILAKIYA RAGHAVENDIRAN VICE CHAIR	6.00	X		X				0.	0.	0.
(558) JONATHAN ALAKARA VICE CHAIR	6.00	X		X				0.	0.	0.
(559) SALEHA MALIK VICE CHAIR	6.00	X		X				0.	0.	0.
(560) LINDSAY DELUCCA VICE CHAIR	10.00	X		X				0.	0.	0.
(561) ALEXUS MARTIN VICE CHAIR	1.00	X		X				0.	0.	0.
(562) BLAIR KANG VICE CHAIR	1.00	X		X				0.	0.	0.
(563) BRAD MEHR VICE CHAIR	1.00	X		X				0.	0.	0.
(564) CHRIS HEREK VICE CHAIR	1.00	X		X				0.	0.	0.
(565) CRAIG HOLCOMB VICE CHAIR	1.00	X		X				0.	0.	0.
(566) HADASSAH DORIUS VICE CHAIR	1.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Form 990

23-7079474

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			
(567) JADYNN SMITH VICE CHAIR	1.00	X		X				0.	0.	0.
(568) JOHN SHAW VICE CHAIR	1.00	X		X				0.	0.	0.
(569) KAYLAH BROWN VICE CHAIR	1.00	X		X				0.	0.	0.
(570) SARAH WILKINSON VICE CHAIR	1.00	X		X				0.	0.	0.
(571) THOMAS MONSON VICE CHAIR	1.00	X		X				0.	0.	0.
(572) LOGAN GAUBY DIRECTOR	1.00	X		X				0.	0.	0.
(573) KATHY CAMARENA DIRECTOR	1.00	X		X				0.	0.	0.
(574) SHANNA ZIMMERMAN DIRECTOR	1.00	X						0.	0.	0.
(575) DUSTIN MYERS DIRECTOR	1.00	X						0.	0.	0.
(576) SHAINA PROUGH DIRECTOR	1.00	X						0.	0.	0.
(577) LIZ ANSTINE DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c								34,891.		

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

Form 990 (2024)

23-7079474 Page **9**

Part VIII Statement of Revenue

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	24,712.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,528,725.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	672,841.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,044.				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a CONFERENCE	Business Code	900099	35,986,644.	35986644.		
	b MEMBERSHIP DUES		900099	2,480,822.	2,480,822.		
	c OTHER PROGRAM SERVICES		900099	2,438,539.	2,438,539.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			40,906,005.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			351,359.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other				
b Less: cost or other basis and sales expenses		7b					
c Gain or (loss)		7c					
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ 24,712. of contributions reported on line 1c). See Part IV, line 18		8a	8,181.				
b Less: direct expenses		8b	1,350.				
c Net income or (loss) from fundraising events				6,831.			6,831.
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code	900099	659,946.			659,946.
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			659,946.			
	12 Total revenue. See instructions			44,150,419.	40906005.	0.	1018136.

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

Form 990 (2024)

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 ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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 ...	322,867.	322,867.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	367,479.	367,479.		
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	5,516.	5,516.		
5 Compensation of current officers, directors, trustees, and key employees	602,442.	325,380.	261,414.	15,648.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	138,872.	9,388.	123,484.	6,000.
7 Other salaries and wages	522,023.	452,829.	51,002.	18,192.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,865.	10,321.	1,937.	607.
9 Other employee benefits	46,380.	39,423.	4,638.	2,319.
10 Payroll taxes	73,266.	55,171.	15,668.	2,427.
11 Fees for services (nonemployees):				
a Management	658,000.	281,090.	376,884.	26.
b Legal	81,699.	80,944.	755.	
c Accounting	207,040.	67,761.	139,279.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	4,842.		4,842.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	300,684.	266,216.	33,700.	768.
12 Advertising and promotion	91,680.	86,251.	4,060.	1,369.
13 Office expenses	560,583.	360,466.	200,067.	50.
14 Information technology	101,234.	84,491.	16,470.	273.
15 Royalties				
16 Occupancy	120,209.	79,082.	41,127.	
17 Travel	1,194,279.	1,108,406.	84,515.	1,358.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	35,308,714.	31,746,636.	3,562,078.	
20 Interest	8,187.	7,368.	819.	
21 Payments to affiliates	4,081.	3,870.	211.	
22 Depreciation, depletion, and amortization				
23 Insurance	253,220.	179,436.	73,784.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS EXPENSES	346,870.	215,849.	106,424.	24,597.
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	41,333,032.	36,156,240.	5,103,158.	73,634.
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)				

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

Form 990 (2024)

23-7079474 Page **11**

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	14,389,782.	1	16,827,416.
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		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	1,053,731.	11	691,831.
	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 33)	15,443,513.	16	17,519,247.	
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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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 FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	15,443,513.	27	17,519,247.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	15,443,513.	32	17,519,247.
	33 Total liabilities and net assets/fund balances	15,443,513.	33	17,519,247.

Form **990** (2024)

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

Form 990 (2024)

23-7079474 Page **12**

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	44,150,419.
2	Total expenses (must equal Part IX, column (A), line 25)	2	41,333,032.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,817,387.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15,443,513.
5	Net unrealized gains (losses) on investments	5	-361,900.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-379,753.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	17,519,247.

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: ☒ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	X
b	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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
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 on Schedule O and describe any steps taken to undergo such audits _____	3b	

Form **990** (2024)

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

Schedule A (Form 990) 2024

23-7079474 Page 2

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 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.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions)	12	
13 First 5 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	☐	

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2024. 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 - 2023. 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 - 2024. 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 - 2023. 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) 2024

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

Schedule A (Form 990) 2024

23-7079474 Page 3

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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1267750.	1625862.	1914388.	2098308.	2226278.	9132586.
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	5361513.	21217258.	28993683.	36864648.	40906005.	133343107
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	6629263.	22843120.	30908071.	38962956.	43132283.	142475693
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.)						142475693

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	6629263.	22843120.	30908071.	38962956.	43132283.	142475693
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	488,120.	6,853.	201,470.	340,772.	351,359.	1388574.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	488,120.	6,853.	201,470.	340,772.	351,359.	1388574.
11 Net income from unrelated business activities not included on 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.)	51,012.	237,592.	62,748.	15,321.	659,946.	1026619.
13 Total support. (Add lines 9, 10c, 11, and 12.)	7168395.	23087565.	31172289.	39319049.	44143588.	144890886

14 First 5 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** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	98.33 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	98.64 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	.96 %
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	.94 %

19a 33 1/3% support tests - 2024. 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 ☒

b 33 1/3% support tests - 2023. 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 ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

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

Schedule A (Form 990) 2024

23-7079474 Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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

Schedule A (Form 990) 2024

23-7079474 Page 5

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
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.		
2		

Section C. Type II Supporting Organizations

	Yes	No
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).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
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?		
1		
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).		
2		
3 By reason of the relationship described on line 2, above, 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.		
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).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a 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.			
2a			
b Did the activities described on line 2a, above, 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 lines 3a and 3b below.			
a 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? If "Yes" or "No," provide details in Part VI .			
3a			
b 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.			
3b			

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Schedule A (Form 990) 2024

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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		Current Year
2	Enter 0.85 of line 1.		
3	Minimum asset amount for prior year (from Section B, line 8, column A)		
4	Enter greater of line 2 or line 3.		
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		
7	☐ 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) 2024

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

Schedule A (Form 990) 2024

23-7079474 Page 7

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	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (describe in Part VI). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Schedule A (Form 990) 2024

23-7079474 Page 8

Part VI

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

2020 AMOUNT: \$ 51,012.
2021 AMOUNT: \$ 237,592.
2022 AMOUNT: \$ 62,748.
2023 AMOUNT: \$ 15,321.
2024 AMOUNT: \$ 659,946.

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>473,578.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>149,820.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>133,737.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>100,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>80,767.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>65,175.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 65,005.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
8		\$ 65,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
9		\$ 60,605.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
10		\$ 58,341.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
11		\$ 51,556.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
12		\$ 51,398.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$ 48,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
14		\$ 33,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
15		\$ 28,429.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
16		\$ 25,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
17		\$ 20,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
18		\$ 20,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC. GROUP RETURN	Employer identification number 23-7079474
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$ 20,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
20		\$ 15,413.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
21		\$ 15,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
22		\$ 12,400.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
23		\$ 10,690.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
24		\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
26		\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
27		\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
28		\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
29		\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
30		\$ 7,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$ 7,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
32		\$ 6,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
33		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
34		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
35		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
36		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN

Employer identification number

23-7079474

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
38		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
39		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
40		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
41		\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
42		\$ 2,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

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

Employer identification number

23-7079474**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43		\$ <u>1,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
44		\$ <u>1,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Employer identification number

23-7079474

Part II

[illegible]

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

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990

LINE H(B) - LIST OF SUBORDINATE
ORGANIZATIONS INCLUDED IN GROUP RETURN

STATEMENT 1

NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
AK DECA	2195 MAVENCAMP CIR - NORTH POLE, AK 99705-6597	23-7066212
AL DECA	50 N RIPLEY ST, SUITE 3311 - MONTGOMERY, AL 36130	63-6155284
AR DECA	3 CAPITOL MALL - LITTLE ROCK, AR 77201-1013	71-6059985
AZ DECA-COLLEGIATE DECA	PO BOX 1440 - OWASSO, OK 74055	86-6052333
CA DECA	PO BOX 1440 - OWASSO, OK 74055-1440	91-1918358
CO DECA	9101 E LOWRY BLVD - DENVER, CO 80230	84-6044839
CT DECA	72 GOODSPEED AVE - MERIDEN, CT 06451	51-0164028
FLORIDA COLLEGIATE DECA ASSOCIATION AND FOUNDATION, INC.	1169 STONEHAM DR, LAKE COUNTY - GROVELAND, FL 34736	81-3977195
FL DECA	PO BOX 770969 - WINTER GARDEN, FL 34777	59-6173273
GA DECA	PO BOX 189 - OXFORD, GA 30054-0189	58-6053488
HI DECA	475 22ND AVE RM 217 - HONOLULU, HI 96816-4400	99-6011098
IA DECA	308 W 3RD ST - SUMNER, IA 50674	42-6093339
ID DECA - COLLEGIATE DECA	650 W STATE ST, STE 324 - BOISE, ID 83702-5936	51-0164044
IL DECA	1131 MONTICELLO DR - AURORA, IL 60506-5741	37-6058635

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

23-7079474

IN DECA	12631 WEST RD - ZIONSVILLE, IN 46077-9212	35-6065007
KANSAS DECA INC.	900 SW JACKSON ST - TOPEKA, KS 67601	81-4336891
KY DECA	300 SOWER BLVD. 5TH FLOOR - FRANKFORT, KY 40601	61-6033495
LA DECA	26236 WAX RD. - DENHAM SPRINGS, LA 70726	72-6025338
MA DECA	BUNKER HILL COMMUNITY COLLEGE, 250 RUTHERFORD AVE., BOX 101 - BOSTON, MA 02	04-6139055
MD DECA	200 WEST BALTIMORE STREET, 3RD FLOOR - BALTIMORE, MD 21201	52-6066963
ME DECA	PO BOX 397 - CONCORD, NH 03302	23-7066211
MI COLLEGIATE DECA	3831 S GLEANER RD - SAGINAW, MI 48609-9111	90-0518859
MI DECA	PO BOX 980432 - YPSILANTI, MI 48198-0432	38-6119972
MN COLLEGIATE DECA	9875 221ST AVE NW - ELK RIVER, MN 55330	41-6039597
MN DECA	21576 NE PICKEREL LAKE RD - DETROIT LAKES, MN 56501-7524	90-0518858
FOUNDATION FOR MO DECA	205 JEFFERSON STREET - JEFFERSON CITY, MO 65101	26-2739430
MO DECA-COLLEGIATE DECA	205 JEFFERSON STREET - JEFFERSON CITY, MO 65101	43-6064528
MS DECA-COLLEGIATE DECA	359 N WEST ST - JACKSON, MS 39201-1502	64-6028211
MT DECA	502 S 19TH AVE STE 108B - BOZEMAN, MT 59718-6827	81-6017160
NC DECA	PO BOX 27 - PITTSBORO, NC 27312-0027	56-6073305
ND DECA-COLLEGIATE DECA	600 E BOULEVARD AVE DEPT 270 - BISMARCK, ND 58505-0602	45-6015497
NE DECA	PO BOX 95072 - LINCOLN, NE 68510	47-0794142
NH DECA	1 QUINCY LANE - MERRIMACK, NH 03054	23-7174475
NJ DECA	C/O KEAN UNIVERSITY, 1000 MORRIS AVE - UNION, NJ 07083-7133	22-6066043
NM DECA	1500 S AVE K ENMU STATION 61 - PORTALES, NM 88130	51-0164058
NV DECA	PO BOX 1440 - OWASSO, OK 74055	88-6006805
NY DECA	285 HILL RD - GOSHEN, NY 10924	14-6035822
OH DECA	25 S FRONT ST MSC 604 - COLUMBUS, OH 43215-4176	31-6035469
OK DECA	1500 W 7TH AVE - STILLWATER, OK 74074-4398	73-6108722
OR DECA	PO BOX 1440 - OWASSO, OK 74055-1440	93-6037452
PA DECA	306 S 13TH ST APT 5 - PHILADELPHIA, PA 19107-5963	23-6416579
RI COLLEGIATE DECA	14 JAFFREY STREET - JOHNSTON, RI 02919	05-0395332

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,		23-7079474
RI DECA	125 EMERSON RD - HARRISVILLE, RI 02830-1001	91-1918365
SC DECA	427 TRAILSEND ST - ROCK HILL, SC 29732-1041	57-6028893
SD DECA	BEACOM SCHOOL OF BUSINESS, ROOM 108, 414 EAST CLARK STREET - VERMILLION, SD	46-6017083
TX COLLEGIATE DECA	6642 N. RIVERSIDE DR., #610 - FORT WORTH, TX 76137	91-1918388
TX DECA	6642 N. RIVERSIDE DR., #610 - FORT WORTH, TX 76137	74-6052810
UT DECA-COLLEGIATE DECA	PO BOX 978 - CLEARFIELD, UT 84089	87-6123242
VA DECA	PO BOX 310 - QUINTON, VA 23141-0310	54-6052332
WA COLLEGIATE DECA	3000 LANDERHOLM CIR SE A254 - BELLEVUE, WA 98007-6406	91-1602361
WA DECA	16040 CHRISTENSEN RD STE 215 - TUKWILA, WA 98188-2966	91-1308496
WI COLLEGIATE DECA	2453 WAUKESHA ROAD - CALEDONIA, WI 53108	91-1918374
WI DECA	125 SOUTH WEBSTER STREET - MADISON, WI 53707	39-6095491
WV DECA	PO BOX 323 - ROMNEY, WV 26757-0323	55-6028198
WYOMING ASSOCIATION OF DECA	164 TOPONCE DR. - EVANSTON, WY 82930	83-6009360

FORM 990	LINE H(B) - LIST OF SUBORDINATE ORGANIZATIONS NOT INCLUDED IN GROUP RETURN	STATEMENT 2
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NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
VT DECA	628 BORDOVILLE RD - ENOSBURG FLS, VT 05450-5830	03-6012617

SCHEDULE D
(Form 990)

(Rev. December 2024)

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

Open to Public
Inspection

Name of the organization **DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN**

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 (for example, 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.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	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 2d 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 FASB 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 FASB 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule D (Form 990) (Rev. 12-2024) INC. GROUP RETURN

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 make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

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 in 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	687,706.	621,234.	604,820.	651,788.	648,402.
b Contributions			15,000.		
c Net investment earnings, gains, and losses	59,986.	66,472.	31,794.	-43,768.	6,586.
d Grants or scholarships			29,587.	3,200.	3,200.
e Other expenditures for facilities and programs	32,500.				
f Administrative expenses	2,500.		793.		
g End of year balance	712,692.	687,706.	621,234.	604,820.	651,788.

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

a Board designated or quasi-endowment 100 %

b Permanent endowment _____ %

c Term endowment _____ %

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? _____

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

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

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, line 10c, column (B))				0.

Schedule D (Form 990) (Rev. 12-2024)

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule D (Form 990) (Rev. 12-2024) INC. GROUP RETURN

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, line 12, col. (B))		

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, line 13, col. (B))		

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, line 15, col. (B))	

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, line 25, col. (B))	

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☐

Schedule D (Form 990) (Rev. 12-2024)

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule D (Form 990) (Rev. 12-2024) **INC. GROUP RETURN**

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

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

Part 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.

EASTERN MICHIGAN UNIVERSITY FOUNDATION OPENED AN ENDOWMENT FUND TO PROVIDE SUPPORT TO MICHIGAN DECA IF THE STATE OF MICHIGAN DECIDES TO QUIT OR REDUCE FUNDING TO MICHIGAN DECA.

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule D (Form 990) (Rev. 12-2024) INC. GROUP RETURN

23-7079474 Page 5

Part XIII Supplemental Information (continued)

Blank lined area for supplemental information.

SCHEDULE G
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN
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 nongovernment 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?
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.

Table with 6 main columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes a Total row at the bottom.

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) (Rev. 12-2024) **INC. GROUP RETURN**

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.

		(a) Event #1 IGNITE THE FUTURE	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	32,893.			32,893.
	2 Less: Contributions	24,712.			24,712.
	3 Gross income (line 1 minus line 2)	8,181.			8,181.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	1,350.			1,350.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				1,350.
	11 Net income summary. Subtract line 10 from line 3, column (d)				6,831.

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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ 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: _____

Schedule G (Form 990) (Rev. 12-2024) **INC. GROUP RETURN**

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:

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

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

Part IV		Supplemental Information <i>(continued)</i>
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This image shows a full page of blank, lined paper. It features approximately 30 evenly spaced horizontal blue or grey lines across its entire width, typical of notebook paper. There are no margins, text, or other markings on the page.

SCHEDULE I
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization **DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,
INC. GROUP RETURN**

Employer identification number
23-7079474

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to 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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 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

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

Schedule I (Form 990) (Rev. 12-2024)

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule I (Form 990) (Rev. 12-2024) **INC. GROUP RETURN**

23-7079474

Page **2**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	1687	333,519.	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. \$333,519
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 THEY
WERE ALL AWARDED AS SCHOLARSHIPS.

SCHEDULE J
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization	DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC. GROUP RETURN	Employer identification number	23-7079474
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Part I Questions Regarding Compensation

	Yes	No								
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <table border="0"><tr><td>☐ First-class or charter travel</td><td>☐ Housing allowance or residence for personal use</td></tr><tr><td>☐ Travel for companions</td><td>☐ Payments for business use of personal residence</td></tr><tr><td>☐ Tax indemnification and gross-up payments</td><td>☐ Health or social club dues or initiation fees</td></tr><tr><td>☐ Discretionary spending account</td><td>☐ Personal services (such as maid, chauffeur, chef)</td></tr></table>	☐ First-class or charter travel	☐ Housing allowance or residence for personal use	☐ Travel for companions	☐ Payments for business use of personal residence	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees	☐ Discretionary spending account	☐ Personal services (such as maid, chauffeur, chef)		
☐ First-class or charter travel	☐ Housing allowance or residence for personal use									
☐ Travel for companions	☐ Payments for business use of personal residence									
☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees									
☐ Discretionary spending account	☐ 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	1b									
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?	2									
3 Indicate which, if any, of the following the 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. <table border="0"><tr><td>☒ Compensation committee</td><td>☒ Written employment contract</td></tr><tr><td>☐ Independent compensation consultant</td><td>☐ Compensation survey or study</td></tr><tr><td>☐ Form 990 of other organizations</td><td>☒ Approval by the board or compensation committee</td></tr></table>	☒ Compensation committee	☒ Written employment contract	☐ Independent compensation consultant	☐ Compensation survey or study	☐ Form 990 of other organizations	☒ Approval by the board or compensation committee				
☒ Compensation committee	☒ Written employment contract									
☐ Independent compensation consultant	☐ Compensation survey or study									
☐ Form 990 of other organizations	☒ 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?	4a	X								
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X								
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X								
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?	5a	X								
b Any related organization?	5b	X								
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?	6a	X								
b Any related organization?	6b	X								
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	7	X								
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	8	X								
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

Schedule J (Form 990) (Rev. 12-2024) **INC. GROUP RETURN**

Page 2

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.

[illegible]

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

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 Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization	DISTRIBUTIVE EDUCATION CLUBS OF AMERICA, INC. GROUP RETURN	Employer identification number 23-7079474
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FORM 990, LINE H(B), STATEMENT 1, AFFILIATED ORGANIZATIONS IN GROUP RETURN:
THE FOLLOWING AFFILIATED ORGANIZATIONS WERE NOT LISTED ON STATEMENT 1
AS INCLUDED IN THE GROUP RETURN. THEIR FINANCIAL INFORMATION AND OTHER
DISCLOSURES HAVE BEEN REPORTED IN THE GROUP FILING, AND THEY ARE
WORKING THROUGH REINSTATEMENT EFFORTS OR ARE IN PROCESS OF BEING ADDED
TO THE GROUP EXEMPTION VIA THE SGRI TO BE PROPERLY REFLECTED IN THE IRS
DATABASE RECORDS.

CENTRAL REGION DECA - PO BOX 980432, YPSILANTI, MI 48189 - EIN
83-2124806

KANSAS COLLEGIATE DECA - 400 S. JEFFERSON, HILLSBORO, KS 67063 -
61-2215304

WESTERN REGION OF DECA - 11037 GREENVIEW NE, ALBUQUERQUE, NM 87111 -
EIN 04-3523567

FORM 990, LINE H(B), STMT 2, AFFILIATED ORGANIZATIONS NOT IN GROUP RETURN:
THE FOLLOWING AFFILIATED ORGANIZATIONS WERE NOT LISTED ON STATEMENT 2
AS INCLUDED THE GROUP EXEMPTION BUT NOT INCLUDED IN THE GROUP RETURN.
THEY ARE WORKING THROUGH REINSTATEMENT EFFORTS OR ARE IN PROCESS OF
BEING ADDED TO THE GROUP EXEMPTION VIA THE SGRI TO BE PROPERLY
REFLECTED IN THE IRS DATABASE RECORDS.

TENNESSEE DECA - 701 JAMES ROBERTSON PARKWAY, ANDREW JOHNSON TOWER,
11TH FLOOR, NASHVILLE, TN, 37243 - EIN 62-6063230

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. GROUP RETURN
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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.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

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

**Employer identification number
23-7079474**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
DECA FOUNDATION - 52-0788005 1908 ASSOCIATION DRIVE RESTON, VA 20191	DORMANT	VIRGINIA	501(C)(3)	LINE 12B, II	DECA INC.		X

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

Schedule R (Form 990) (Rev. 1-2025)

Schedule R (Form 990) (Rev. 1-2025) **INC. GROUP RETURN**

23-7079474 Page 2

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.

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

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.

[illegible]

DISTRIBUTIVE EDUCATION CLUBS OF AMERICA,

Schedule R (Form 990) (Rev. 1-2025) **INC. GROUP RETURN**

23-7079474 Page **3**

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.

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

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)			

Schedule R (Form 990) (Rev. 1-2025) **INC. GROUP RETURN**

Page 4

Part VI

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

[illegible]

Schedule R (Form 990) (Rev. 1-2025)

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