DLN: 93493137026060

Form **990** 囫

Department of the Treasury Internal Revenue Service

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Return of Organization Exempt From Income Tax

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

2008

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 4,636,949 4,842,441 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 62,804,570 94,000,534 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 16 Professional fundraising expenses, Part IX, column (D), line 25 13,461,875 0 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) 57,109,177 56,192,595 18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A)) 124,550,696 155,035,570 19 Revenue less expenses Subtract line 18 from line 12 34,637,240 114,441,755 18 Total assets (Part X, line 16) Beginning of Year End of Year 20 Total assets (Part X, line 16) 180,315,255 305,981,521	A Fo	r the 2	2008 cal	endar yea	r, or tax year beginning 10-01-2008 and ending 09-30-2009				
Additional Control Composition Security Control Co	B Che	eck if ap	pplicable	Please	1		D Employer i	dentification number	
Take-exempt status Foundation Take-exempt status Take-exempt status Foundation Take-exempt status Take-ex	☐ Add	lress ch	ange						
Third settlem Specific Third settlem Specific Third settlem Specific Third settlem Specific	┌ Nar	ne char	nge	print or	Doing Business As		E Telephone	number	
Termination Amended return Applications pending F. Name and address of Principal Officer WENDY KOPP 31'S WEST 30'H STREET STH FL NEW YORK, NY 10018 I Tax-exempt status F 30'L(3) ** (west to ') ** (497'(a)(1) or ') ** 527 J Web site: F WWW TEACHFORAMERICA ORG K Type of organization F Corporation Tusid association other F 2 Check this box fithe organization's mission or most significant activities Our mission is to build the movement to eliminate adoutational inequity by enlisting our nation's most promising future leaders in the effort (Continued in Part III) 2 Check this box fithe organization discontinued its operations or disposed of more than 25% of its assets 3 Number of voting members of the governing body (Part VI, line 1a)	┌ Initi	ıal retur			Number and street (or P.O. boy if mail is not delivered to street address) Room/suite		-2080	
New York, NY 10018) Room, suite	G Gross recei	pts \$ 272,211,479	
### F. Name and address of Principal Officer WEDV KO PP 31.5 WEST 36TH ST REET 5TH FL NEW YORK, NY 10018 Tracexempt status	┌ Am	ended r	return			<u> </u>			
NEMOY KOPP S15 WEST 36TH STREET 5TH FL NEWYORK, NY 10018	Г Арр	lication	pending		NEW YORK, NY 10018				
### New York Opps 315 West 367H STREET STH FL New York (Not 1018) New York (Not				F Nam	ne and address of Principal Officer	H(a) Is th	nis a group retui	rn for	
Take exempt status F 501(c) (3)									
Taxe-exempt satus						H/h\ Aras	all affiliatos inslu	dod3	
New bitler WWWTEACHFORAMERICA ORG	I Tax	x-exem	pt status	▽ 501(c)	(3) ◀ (insert no)	• •		,	
Part I Summary	J W	eb site	e: ► WWV	W TEACHF	FORAMERICA ORG				
1 Briefly describe the organization's mission or most significant activities	К Туре	e of org	janization	Corporat	ion	L Year of F	ormation 1989	M State of legal domicile CT	
1 Briefly describe the organization's mission or most significant activities	Dai	rt T	Summ	narv					
### Our mission is to build the movement to eliminate educational inequity by enlisting our nation's most promising future leaders in the effort (Continued in Part III) 2 Check this box [if the organization discontinued its operations or disposed of more than 25% of its assets 3 Number of voting members of the governing body (Part VI, line 1a)				•	e organization's mission or most significant activities				
### the effort (Continued in Part III) Check this box fifthe organization discontinued its operations or disposed of more than 25% of its assets	ų.					ing our nat	ion's most pror	nising future leaders in	
Number of independent voting members of the governing body (Part VI, line 1b)	Ě					-	·	-	
Number of independent voting members of the governing body (Part VI, line 1b)	Ĕ								
Number of independent voting members of the governing body (Part VI, line 1b)	Š			,					
Net unrelated business taxable income from Form 990-T, line 34 .		1		=					
B Net unrelated business taxable income from Form 990-T, line 34 .	ጭ ያሳ ለ					-			
Net unrelated business taxable income from Form 990-T, line 34 .	Ě							· ·	
Net unrelated business taxable income from Form 990-T, line 34 .	5						6	<u> </u>	
Prior Year Current Year	∢					•			
8 Contributions and grants (Part VIII, line 1h)		b	Net unre	lated busi	ness taxable income from Form 990-T, line 34	Т			
9 Program service revenue (Part VIII, line 2g)		_				Pr			
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	a)								
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5– 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 17 Other expenses (Part IX, column (A), line 25 13,461,875 18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A)) 19 Revenue less expenses Subtract line 18 from line 12 20 Total assets (Part X, line 26) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 23 Signature Block Under penalties of perjury, I declare that I have examined this return, including a	eur		=						
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5– 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 17 Other expenses (Part IX, column (A), line 25 13,461,875 18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A)) 19 Revenue less expenses Subtract line 18 from line 12 20 Total assets (Part X, line 26) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 23 Signature Block Under penalties of perjury, I declare that I have examined this return, including a	Š								
12) 13	_			•			3,//1,395	1,353,859	
14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b (Total fundraising expenses, Part IX, column (D), line 25 13,461,875 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 18 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 19 Revenue less expenses Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalities of perjury, I declare that I have examined this return, including a		12		evenue—ac	ad lines 8 through 11 (must equal Part VIII, column (A), line		159,187,936	269,477,329	
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10) 62,804,570 94,000,534 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 57,109,177 56,192,595 18 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 124,550,696 155,035,570 19 Revenue less expenses Subtract line 18 from line 12 34,637,240 114,441,759 20 Total assets (Part X, line 16) 8eginning of Year End of Year 21 Total liabilities (Part X, line 26) 34,282,864 44,524,599 22 Net assets or fund balances Subtract line 21 from line 20 146,032,391 261,456,922 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a		14	Benefits	s paid to o	r for members (Part IX, column (A), line 4)		0	0	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 18 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 19 Revenue less expenses Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a	83	15		s, other co	ompensation, employee benefits (Part IX, column (A), lines 5-	-	62,804,570	94,000,534	
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Beginning of Year End of Year 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 32 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a		18	Totalex	xpenses—	add lines 13-17 (must equal Part IX, line 25, column (A))		124,550,696	155,035,570	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a		19	Revenu	e less exp	enses Subtract line 18 from line 12		34,637,240	114,441,759	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a	\$ 8					Begini	ning of Year	End of Year	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a	ere Fare	20	Totalas	ssets (Par	t X, line 16)		180,315,255	305,981,521	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a	A B.	21	Total lia	abilities (P	Part X, line 26)		34,282,864	44,524,599	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including a	전 전 전 전 전 전 전 전 전 전 전 전 전 (((((((, ,		
Under penalties of perjury, I declare that I have examined this return, including a							,,		
			_						
	Plea	- P							

Plea Sign Signature of officer Here OSMAN KURTULUS VP ACCOUNTING AND CONTROLS Type or print name and title Preparer's signature Paid Firm's name (or yours if self-employed), Preparer's GRANT THORNTON LLP if self-employed), address, and ZIP + 4 **Use Only** 666 THIRD AVENUE

May the IRS discuss this return with the preparer shown above? (See instruction

NEW YORK, NY 100174011

Part III Statement of Program Service Accomplishments (See the instructions.)

1 See Ad	Briefly describe the organization's n	nission				
2	Did the organization undertake the prior Form 990 or 990-EZ		program ser	vices during the year	which were not listed on	ΓYes ▼ No
	If "Yes," describe these new se	ervices on Sched	ule O			
3	Did the organization cease corservices?	nducting or make	significant	changes in how it con-	ducts any program	┌ Yes ┌ No
4	If "Yes," describe these chang					
•	Describe the exempt purpose a Section 501(c)(3) and (4) organ others, the total expenses, and	anızatıons and 49	947(a)(1) tr	usts are required to re	eport the amount of grants a	•
4a	(Code) (Ex TEACHER RECRUITMENT AND SELEC MOST UNDERSERVED STUDENTS TO EVENTS, PROCESSING APPLICATION SITES ACROSS THE COUNTRY TFA AND 2008 RESPECTIVELY	CTION TFA RECRUI HE RECRUITMENT A IS (APPROXIMATELY	TS AND SELECT ND SELECTION 35,000 IN 2009	PROCESS CONSISTS OF S 9 AND 24,000 IN 2008) AN	CHEDULING AND ATTENDING ON ID CONDUCTING DAYLONG INTER	AND OFF CAMPUS RECRUITMENT VIEW SESSIONS IN MULTIPLE
4b	(Code) (Ex Pre-Service Institute For incoming of public school districts In 2009, appr Loyola Marymount University, St Jo the Houston Independent School Dis Department of Education, Phoenix F	corps members, TFA oximately 4,100 corp bhn's University, Geo strict, Los Angeles Ur	conducts inten ps members w rgia Institute o iified School Di	ere trained at one of our s f Technology and Illinois Ir strict, the School District of	ux institute campuses. University of institute of Technology. As a part of f Philadelphia, the Atlanta Public S	of Houston, Temple University, of TFA's ongoing relationship with chools, the New York City
4c	(Code) (Ex PLACEMENT, PROFESSIONAL DEVELO UNITED STATES IN EACH REGION, PROGRESS THROUGHOUT THE TWO MEMBERS TO FEEL PART OF A NATIO	OPMENT, EDUCATION TFA HAS REGIONAL (D-YEAR COMMITMEN	N AWARDS, AN OFFICES, WHIC T, PROVIDING	CH ARE RESPONSIBLE FOR OPPORTUNITIES FOR ONG	PLACING CORPS MEMBERS IN SCOING PROFESSIONAL DEVELOPME	HOOLS, MONITORING THEIR NT, AND HELPING CORPS
	, , ,		10,009,941	including grants of \$) (Revenue \$)
	ALUMNI AFFAIRS (SEE SCHEDULE O)				
4d	Other program services (Des	scribe in Schedul	le O)			
тм	, •		ng grants of	\$) (Revenue \$)
4e	Total program service expens	ses \$ 12	27,219,402	Must equal Part IX,	Line 25, column (B).	

Form **990** (2008)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🤨	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12		No
13	Is the organization a school as described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If</i> "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
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) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νο
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		V	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		Yes	No
Ia	of U.S. Information Returns. Enter -0- if not applicable			
	1,041			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
·	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	3a		No
h	return?	3b		NO
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νο
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).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		N.a
d	file Form 8282?	7c		No
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	-		
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	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			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	·	j	I	I

Management and Disclosure (Sections A. R. and Crequest information

Part VI	Governance, management, and disclosure (Sections A, B, and C request information
	about policies not required by the Internal Revenue Code.)
Section	A. Governing Body and Management

					Yes	No		
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.							
1a	Enter the number of voting members of the governing body 1a		30					
b	Enter the number of voting members that are independent	1b	30					
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		• •	2		No		
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No		
4	Did the organization make any significant changes to its organizational documents stilled?	ince t	he prior Form 990 was	4		No		
5	Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?							
7a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
b	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νo		
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ur	ndertaken during the					
а	the governing body?			8a	Yes			
Ь	each committee with authority to act on behalf of the governing body? $\ \ . \ \ . \ \ .$			8b		Νo		
9a	Does the organization have local chapters, branches, or affiliates?			9a		Νo		
Ь	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?							
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the		•	10	Yes			
11	11		No					

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA,
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website another's website vpon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization OSMAN KURTULUS 315 WEST 36TH STREET 5TH FLOOR

NEW YORK, NY 10018

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compens	ate any	offic	er, d	lirec	tor, tru	uste	e or key employee		
		Posit t	(C ion (hat a	chec		I				(F)
(A) Name and Title	(B) Average hours per week	Former Highest compensated employee Key employee Officer Institutional Trustee Individual Trustee or Director		Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations			
			\vdash			-				
							1			<u> </u>

Part VII Continued

	(B) Average hours per week		(i tion that a			all			(E)	(F)	
(A) Name and Title		Individual Trustee or Prector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
			-				-				
			1								
			-	$\vdash\vdash$			\vdash				
			\vdash	\vdash			\vdash				
1b Total			<u>.</u>				 	6,184,274	177,508	531,334	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►84

			Yes	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule J for such individual	3		No
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
		4	162	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PLAN ARCHITECTURE PLLC 555 EIGHTH AVENUE SUITE 1602 NEW YORK, NY 10018	ARCHITECTURE	381,421
PETER HAMLEN 375 LINCOLN PLACE 4J BROOKLYN, NY 11238	ARCHITECTURE	244,365
TIMOTHY HOGUE 95 WALL STREET APT 425 NEW YORK, NY 10005	RECRUITMENT	120,600
MULLEN PO BOX 7247-7279 PHILADELPHIA, PA 19170	MARKETING	116,591
JON WELLS 225 E 12TH STREET APT 3A NEW YORK, NY 10003	SOFTWARE DEVELOPMENT	101,875
2 Total number of independent contractors (including those in 1) who rec	• • • • • • • • • • • • • • • • • • • •	5

Part VIII

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
					Revenue		512, 513, or 514
so co	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues					
₽.E	С	Fundraising events					
में इंडि		1c					
<u>_</u> <u>_</u> <u>_</u>	d	Related organizations 1d Government grants (contributions) 1e					
ons sin	e						
黄鱼	f	All other contributions, gifts, grants, and similar amounts not included above	217,722,240				
語品	g	1f Noncash contributions included in					
ŠĒ.		lines 1a-1f \$1,779,287					
O 14	h	Total (Add lines 1a-1f)		251,515,886			
			Business Code				
∃le	2a	FEE FOR SERVICE REVENUE	611,710	16,167,915	16,167,915		
ewe.	ь						
or GE	с						
ě	d						
33	e						
á	f	All other program service revenue					
Program Service Revenue	g	Total. Add lines 2a-2f					
	3	► \$ 16,167,915	donds into "				-
		Investment income (including diviother similar amounts)		453,937			453,937
			▶				,
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
		(ı) Real	(II) Personal				
	6a	Gross Rents 17,664					
	b	Less rental expenses					
	С	Rental income 17,664 or (loss)					
	d	Net rental income or (loss)		17,664			17,664
		(ı) Securities	(II) O ther				
	7a	Gross amount 2,290,021	0				
		from sales of assets other					
	b	than inventory Less cost or 2,288,961	15,328				
		other basis and sales expenses	,				
	с	Gain or (loss) 1,060	-15,328				
	d	Net gain or (loss)		-14,268			-14,268
	8a	Grass income from fundraising	. ►				-
	Oa	Gross income from fundraising events (not including					
Φ		\$1,564,031					
듔		of contributions reported on line 1c) See Part IV, line 18					
ě		Attach Schedule G if total exceeds					
Other Revenue		\$15,000 a	0				
Нe	b	Less direct expensesb Net income or (loss) from fundrais	·	1,134,170			1,134,170
ō	С		ing events	1,131,170			1,131,170
	9a	Gross income from gaming activities See part IV, line 19					
		Complete Schedule G ıf total					
		exceeds \$15,000					
	ь	Less direct expensesb					
	c	Net income or (loss) from gaming		0			
			▶ -				ļ
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	c	Less cost of goods sold b Net income or (loss) from sales of	inventory	0			
	Ť	Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900,099	202,025			202,025
	ь	-					
	c						
		All other revenue					
	d e	Total. Add lines 11a-11d					
			\$ 202,025				
	12	Total Revenue. Add lines 1h, 2g, 3 8c,	3, 4, 5, 6d, 7d,	269,477,329	16,167,915		1,793,528
		9c, 10c, and 11e	•				

Form 990 (2008) Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgonizations must complete column (A) but are not re).
Do r	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 governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,842,441	4,842,441		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	7,044,744	3,839,660	2,231,891	973,193
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	72,319,954	60,660,353		7,657,116
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,324,416	1,860,920	212,409	251,087
9	Other employee benefits	6,441,493	4,293,578	1,548,470	599,445
10	Payroll taxes	5,869,927	4,770,514	461,103	638,310
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting	0			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	10,317,103	8,684,608	990,285	642,210
14	Information technology	0			
15	Royalties	0			
16	Occupancy	7,665,671	7,048,113	435,426	182,132
17	Travel	12,111,219	10,646,530	657,728	806,961
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	528,054	466,069	41,916	20,069
20	Interest	373,505	12,891	360,228	386
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	7,939,033	5,892,691	1,170,402	875,940
23	Insurance	285,437	220,003	48,364	17,070
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	STUDENT LODGING AND MEALS	7,168,680	7,168,651	29	0
	PROFESSIONAL AND EDUCATIONAL	6,346,097	5,342,102	595,551	408,444
С	BAD DEBT EXPENSE	1,509,239	0	1,509,239	0
d	REGIO NAL COSTS	415,258	124,193	0	291,065
e	FEES AND OTHER EXPENSES	296,954	156,011	87,162	53,781
f	All other expenses	1,236,345	1,190,074	1,605	44,666
25	Total functional expenses. Add lines 1 through 24f	155,035,570	127,219,402	14,354,293	13,461,875
26	Joint Costs. Check I if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	. , -	. , -	5.,,5.,,5.5	

Dart Y	Ralance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			8,459,270	1	14,736,109
	2	Savings and temporary cash investments			29,718,550	2	40,695,475
	3	Pledges and grants receivable, net		100,973,434	3	188,442,142	
	4	Accounts receivable, net			6,447,781	4	11,101,967
	5	Receivables from current and former officers, directors, trustee other related parties Complete Part II of Schedule L		mployees or		5	· · ·
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II of	section 4			6	
	7	Notes and loans receivable, net			5,179,721	7	6,324,931
	8	Inventories for sale or use				8	-,
S	9	Prepaid expenses and deferred charges			969,658	_	583.772
ssets	10a	Trepara expenses and deterred energes 1 1 1 1 1 1					
Ass	100	Land, buildings, and equipment cost basis	10a	40,496,374			
	Ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь	14,092,638	20,790,831	100	26,403,736
	11	Investments—publicly traded securities	100	14,002,000	7,254,482	11	17,094,032
	12	Investments—other securities See Part IV, line 11 Complete I Schedule D	of	7,204,402	12	17,004,002	
	13	Investments—program-related See Part IV, line 11 Complete of Schedule D.			13		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule		521,528		599,357	
		D	52.,,525	15	333,331		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			180,315,255	16	305,981,521
	17	Accounts payable and accrued expenses .		11,258,066	17	10,390,733	
	18	Grants payable			1,664,235	18	1,551,610
	19	Deferred revenue			0	19	903,100
_	20	Tax-exempt bond liabilities				20	
<u> </u>	21	Escrow account liability Complete Part IV of Schedule D				21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third partie	s		20,000,000	23	30,000,000
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D		1,360,563	25	1,679,156	
	26	Total liabilities. Add lines 17 through 25			34,282,864	26	44,524,599
Ses		Organizations that follow SFAS 117, check here ▶ and come through 29, and lines 33 and 34.	plete lin	es 27			
Balance	27	Unrestricted net assets			58,906,081	27	83,804,277
<u>8</u>	28	Temporarily restricted net assets			77,964,477	28	108,490,802
<u> </u>	29	Permanently restricted net assets		9,161,833	29	69,161,843	
r Fund		Organizations that do not follow SFAS 117, check here ► □ a lines 30 through 34.					
S Of	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31			
ASS	32	Retained earnings, endowment, accumulated income, or other f		32			
Net /	33	Total net assets or fund balances		146,032,391	33	261,456,922	
Z	34	Total liabilities and net assets/fund balances		180,315,255		305,981,521	
Pa	rt XI	Financial Statements and Reporting					

Doub VI	Einaneial	Statements	and Reporting
27:14 29:4 20	Financiai	Statements	and keborting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 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?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
ь	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008

Open to Public Inspection

	e of the organization n For America Inc						Em	Employer identification number			
reacii	TOLAII	ienca inc						13	-354191	3	
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganızatıc				
The	organi	zatıon ıs not	a private found	ation because it is (Please	check on	ly one org	anızatıon)		•	
1	\sqcap	A church, o	onvention of cl	nurches, or association of ch	nurches de	escribed ii	Section :	170(b)(1)	(A)(i).		
2	Γ	A school d	escribed in Sec	tion 170(b)(1)(A)(ii). (Atta	ch Schedi	ule E)					
3	Γ	A hospital	or a cooperativ	e hospital service organizat	ıon descrı	bed in Sec	tion 170(b)(1)(A)(i	i ii). (A ttac	h Schedu	le H)
4	Γ	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								Enter the	
5	Γ	An organiza	ation operated 1	for the benefit of a college or	r universit	y owned o	roperated	by a gove	ernmental	unit desc	rıbed ın
		Section 17	D(b)(1)(A)(iv).	(Complete Part II)							
6	Γ	A federal, s	tate, or local g	overnment or governmental	unit desc	rıbed ın S e	ction 170	(b)(1)(A)	(v).		
7	V	Anorganiz	ation that norm	ally receives a substantial p	art of its	support fr	om a gove	rnmental ເ	init or fror	n the gene	eral public
		described i	n Section 170(I	b)(1)(A)(vi) (Complete Par	tII)						
8	Γ	A commun	ıty trust descril	oed in Section 170(b)(1)(A)	(vi) (Con	nplete Par	tII)				
9	Γ	An organiza	ation that norm	ally receives (1) more than	331/3%	of its supp	ort from c	ontribution	ns, membe	ership fees	s, and gross
		receipts fro	m activities re	lated to its exempt functions	s—subject	t to certaii	n exceptio	ns, and (2) no more	than 331,	/3% of
		ıts support	from gross inv	estment income and unrelate	ed busine	ss taxable	income (less section	on 511 ta:	x) from bu	sinesses
		acquired by	the organizati	on after June 30, 1975 See	Section 5	509(a)(2).	(Complet	e Part III)		
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509	(a)(4). (S	ee instruc	tions)
11	Γ	one or more the box tha	e publicly supp	and operated exclusively foorted organizations describe type of supporting organiza Type II c	ed in secti ition and c	on 509(a) complete l	(1) or sec	tion 509(a hrough 11	a)(2) See	Section 5	
e	Γ		foundation man	rtify that the organization is agers and other than one or							
f		If the organ	nization receive box	d a written determination fro as the organization accepte						supporti	ng organization,
g		following pe		as the organization accepte	u any gni	or contrib	ution nom	ally of the	:		
				r indirectly controls, either	alone or t	ogether wi	th persons	describe	d ın (ıı)		Yes No
		and (III) be	low, the govern	ing body of the the supporte	d organıza	ition?				11g	(i)
		(ii) a family member of a person described in (i) above?									
		(iii) a 35%	(iii) a 35% controlled entity of a person described in (i) or (ii) above?								
h 		Provide the	following infor	mation about the organizatio	ons the or	ganızatıon	supports				
Supp		ported (desci		(iii) Type of organization (described on lines 1-9 above or IRC section (See Instructions))	organiz col (i) your go	Is the zation in listed in overning ment?	the orga in col (i	ou notify anization i) of your port?	organiz col (i) o	Is the vation in organized US?	(vii) A mount of support?
					Yes	No	Yes	No	Yes	No	1
					 	1	T	<u> </u>		1	
					1		1	i		1	

Total

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box o	n line 5, 7, or	8 of Part I.)				
Р	ublic Support							
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	53,722,125	101,171,184	76,939,083	142,345,312	2.	51,515,886	625,693,590
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 line 1-3	53,722,125	101,171,184	76,939,083	142,345,312	2.	51,515,886	625,693,590
5	The portion of total contribution by each							
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column							26,131,739
6	(f) Public Support subtract line 5 from line 4							599,561,851
т	otal Support			L	l			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	Amounts from line 4	53,722,125	1,153,478	76,939,083	142,345,312		51,515,886	625,693,590
8	Gross income from interest, dividends,	,,	_,,	, ,				
0	payments received on securities loans, rents, royalties and income from similar sources	804,617	1,153,478	1,482,483	1,437,614		453,937	5,332,129
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	424	62,545	111,371	131,067		179,433	484,840
11	Total Support (Add lines 7 through 10)							631,510,559
12	Gross receipts from related activities, etc	(See instruction	ıs)			12	·	43,784,984
13	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		rst, second, thır	d, fourth, or fifth	tax year as a 5	01(c)(▶ □
14	Public Support Percentage for 2008 (line 6		ded by line 11 co	olumn (f))		14		94.941 %
15	Public Support Percentage for 2007 Sched		•	(,,,		15		81.045 %
16a	33 1/3% Test - 2008. If the organization did and stop here. The organization qualifies as				3 1/3% or more,	check	this box	▶ ▽
	33 1/3% Test - 2007. If the organization did box and stop here. The organization qualified 10% Facts and Circumstances Test - 2008. If more, and if the organization meets the "facts and circumstances"	es as a publicly If the organizati :ts and circums	supported orgar on dıd not check tances" test, ch	nization k a box on line 1 eck this box and	3, 16a, or 16b a d stop here. Exp	and line lain in	e 14 is 10 Part IV ho	▶ % or
	10% Facts and Circumstances Test - 2007. more, and if the organization meets the "fact the organization meets the "facts and circumstances" and circumstances.	If the organizati ts and circums mstances" test	on did not check tances" test, ch The organizatio	a box on line 1 eck this box and on qualifies as a	3, 16a, 16b, or i stop here. Exp publicly suppor	17a aı laın ın ted or	nd line 15 Part IV ho ganization	is 10% or ow
18	Private Foundation. If the organization did	not check the D	ox on time 13, 10	Ja, 100, 17a 01	I/D, CHECK LIIIS	БОХ А	iiu see	▶ □

Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (d) 2007 Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's taxexempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total Add lines 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Total of lines 7a and 7b Public Support (Substract line 7c from line 6) **Total Support (b)** 2005 (d) 2007 **(e)** 2008 Calendar year (or fiscal year beginning in) (a) 2004 (c) 2006 (f) Total Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b. whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here **Computation of Public Support Percentage** 15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f)) 15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g 16 **Computation of Investment Income Percentage 17** Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f)) 17 18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h 18

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

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

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)					
	Facts and Circumstances Test					

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

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

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax)

► Section 501(c)(4), (5), or (6) orga Name of the organization	anizationo complete i arciii		Employer ider	ntıfıcatıon number
Teach For America Inc			13-3541913	
	I by all organizations exemp See the instructions for Schedule			527
Provide a description of the	organization's direct and indirect pol	litical campaign act	tivities in Part IV	
2 Political expenditures				\$
3 Volunteer hours				
Part I-B To be completed for Schedule C for	d by all organizations exemp	t under section	n 501(c)(3). (See the	instructions
	use tax incurred by the organization i	under section 4955	5	\$
2 Enter the amount of any exc	use tax incurred by organization man	agers under sectio	n 4955	\$
3 If the organization incurred	ın a section 4955 tax, did it file Form	n 4720 for this year	r?	☐ Yes ☐ No
4a Was a correction made?				┌ Yes ┌ No
b If "Yes," describe in Part IV	,			
	by all organizations exemp	t under section	n 501(c), except sect	tion 501(c)(3).
<u> </u>	ns for Schedule C for details.) xpended by the filing organization for	saction 527 avam	nt function activities	
	g organization's internal funds contri			>
527 exempt funtion activities		buteu to other orga	mzations for section	\$
Total of direct and indirect e 1120-POL, line 17b	exempt function expenditures Add lir	nes 1 and 2 and ent	ter here and on Form	
	e Form 1120-POL for this year?			Yes No
5 State the names, addresses were made Enter the amour political contributions received	and Employer Identification Number of paid and indicate if the amount was wed and promptly and directly deliver al action committee (PAC) If additio	paid from the filing ed to a separate po	g organization's own interna olitical organization, such a	ns to which payments Il funds or were s a separate
(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
	ice, see the instructions for Form 990			

	(election under sec	organizations exempt under section 501(tion 501(h)). (See the instructions for Schedule belongs to an affiliated group		768
В	Check If the filing organization			
		bbying Expenditures— es" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (ente	er 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0- if line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Forr	n 4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total	
2a	Lobbying non-taxable amount						
ь	Lobbying ceiling amount (150% of line 2a, column(e))						
С	Total lobbying expenditures						
d	Grassroots non-taxable amount						
e	Grassroots ceiling amount (150% of line d, column (e))						
f	Grassroots lobbying expenditures						

art II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form	
	5768 (election under section 501(h)). (See the instructions for Schedule C for details.)	

		(a	(a)	
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?	Yes		
ь	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes		
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?	Yes		452,67
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		(
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo	
i	Other activities If "Yes," describe in Part IV		Νo	
j	Total lines 1c through			452,675
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
b	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo	
Par	t III-A. To be completed by all organizations exempt under section $501(c)(4)$). section	501(c)(5), or

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.) 1 Dues, assessments and similar amounts from members

2	section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b \$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	

Part IV Supplemental Information

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

Ident if ier	Return Reference	Explanation
LOBBYING ACTIVITIES CONDUCTED BY THE ORGANIZATION		On a state level, volunteers, paid staff or management worked towards passage by the State Legislature of Education Board of certain alternative certification requirements as well as funding for the organization. On a Federal level there was direct contact with legislators, their staffs, and government officials in support of adequate appropriations for Teach For America as well as passage of Teach For America's authorizing legislation and the Serve America Act. There was also lobbying done at the Federal level in support of funding for Title 1 and other education programs in the American Reinvestment and Recovery Act.

Part IV Supplemental Information				
Ident if ier	Return Reference	Explanation		

Schedule C (Form 990 or 990EZ) 2008

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DLN: 93493137026060

OMB No 1545-0047

Department of the Treasury

SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

Employer identification number
Employer identification number
13-3541913
Funds or Accounts. Complete if the
(b) Funds and other accounts
nor advised Yes No
s may be r Yes No
to Form 990, Part IV, line 7.
n historically importantly land area ertified historic structure
m of a conservation easement Held at the End of the Year
2a
2b
2c
2d
ed by the organization during
lations, and Yes No
e year ►
/ear ►\$
ction Yes No
d expense statement, and al statements that describes
or Other Similar Assets.
ent and balance sheet works of rch in furtherance of public service, items
and balance sheet works of art, in furtherance of public service,
► \$
▶ \$
for financial gain, provide the
► \$
▶ \$

Part	III Organizations Maintaining Co	llections of Art,	, His	tori	<u>cal Trea</u>	sures, or Oth	<u>er Sim</u>	ilar Asse	ts (co	ntınued)
	Using the organization's accession and othe items (check all that apply)	r records, check any	ofth	ne fol	lowing that	are a significant	use of its	s collection	ו	
a	Public exhibition		d	Γ	Loan or e	xchange progran	าร			
ь	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
	Provide a description of the organization's co Part XIV	ollections and explai	n hov	w the	y further th	ne organization's	exempt p	urpose in		
	During the year, did the organization solicit of assets to be sold to raise funds rather than t						mılar	Г	Yes	┌ No
Part	Trust, Escrow and Custodial A Part IV, line 9, or reported an an					ganızatıon ans	wered "	Yes" to Fo	orm 9	90,
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for c	ontribution	ns or other assets	not	Г	Yes	┌ No
b 1	If "Yes," explain why in Part XIV and comple	te the following tabl	е							
						<u> </u>		A mou	ınt	
_	Beginning balance					10				
	Additions during the year					10				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									
Part	EV Endowment Funds. Complete					to Form 990, Pa			1	Dl-
1-	Beginning of year balance	(a)Current Year 36,973,033	(E)Prior	Year () I wo Years Back (a)inree ye	ars back (e)Four Y	ears back
	Contributions	20,000,010								
	Investment earnings or losses	1,461,329								
	Grants or scholarships									
e	Other expenditures for facilities and programs	644,865								
	Administrative expenses									
	End of year balance	57,789,507								
-	Provide the estimated percentage of the yea	r end balance held a	s							
	Board designated or quasi-endowment	46 114 %								
	Permanent endowment - 50 462 %									
	2.42.4.0/									
	Term endowment 🕨 - 3 424 % Are there endowment funds not in the posses	ssion of the organiza	tion	thata	are held an	id administered fo	rthe			
	organization by	, 31011 of the organiza	1011	ciiac (are neid di	ia aaiiiiiisterea k	i the		Yes	No
((i) unrelated organizations							. 3a(i)		Νo
	(ii) related organizations							. 3a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organizatio							. 3b		<u> </u>
	Describe in Part XIV the intended uses of th					D 1 1 1 10				
Part	VI Investments—Land, Buildings	s, and Equipmer	nt. S					Т		
	Description of investment				Cost or othe s (investmer		(c) De	preciation	(d) Bo	ok value
	and						_	L		
b B	uildings		•							
	easehold improvements		•			11,627,25	+	3,879,996		7,747,254
d E	quipment		•			24,973,04		8,967,856	1	6,005,190
	ther					3,896,07	8	1,244,786		2,651,292
T-4-1	Add lines 1a-1e (Column (d) should equal Fo	000 0 / 1/ /						b -		6,403,736

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
O ther			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	ee Form 990. Part X. line	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Description of investment type	(b) book value	Cost or end-of-	year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)	•		
(a) Descri			(b) Book value
ACCRUED INTEREST RECEIVABLE			0
SECURITY DEPOSITS			599,357
MISCELLANEOUS			0
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. See Form 990, Part	X, line 25.		
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
DEFERRED RENT PAYABLE	1,679,156		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	1,679,156		

ד.עיו	t XI Reconciliation of Change in Net Assets from Form 990	to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	to i municial otatemen	1 1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6			6	
7	Investment expenses		7	
	Prior period adjustments		- +	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 - 8		9	
LO	Excess or (deficit) for the year per financial statements Combine lines 3 and		10	
	Reconciliation of Revenue per Audited Financial State			<u>rn</u>
L	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			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d	[2e	
3	Subtract line 2e from line 1		3	
ŀ	A mounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b	[4c	
5	Total Revenue Add lines ${f 3}$ and ${f 4c.}$ (This should equal Form 990, Part I, line	12)	5	
ar	Reconciliation of Expenses per Audited Financial State	ements With Expenses	per Re	turn
L	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	i i		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
ŀ	A mounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, lin	e 18)	5	
Do.	t XIV Supplemental Information			

Ident if ier	Return Reference	Explanation
INTENDED USES OF ENDOWMENT FUNDS		Teach for America, Inc s endowment consists of several individual funds established for different purposes. Its endowment includes both donor-restricted endowment funds and funds designated by the Board of Directors to function as endowments. Generally speaking, THE PURPOSE OF THE ORGANIZATION'S ENDOWMENT FUNDS IS TO PROVIDE A CONTINUOUS SOURCE OF FUNDING TO SUPPORT THE MISSION OF THE INSTITUTION

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DLN: 93493137026060

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

Internal Revenue Service		-, ·.g				Inspection
Name of the organization					Employer ider	ntification number
Teach For America Inc					13-3541913	
Part I Fundraising	Activities. Complete	e if the oi	rganızatı	on answered "Yes"	to Form 990, Part IV	, line 17.
1 Indicate whether the o	organization raised funds	through a	ny of the 1	following activities Che	eck all that apply	
a Mail solicitations		J	•	e Solicitation of r		
b Email solicitations	;			f Solicitation of	government grants	
c Phone solicitation	S			g Special fundrais	sing events	
d In-person solicita	tions					
	ave a written or oral agre ed in Form 990, Part VII)					Г _{Yes} Г _{No}
b If "Yes," list the ten hi to be compensated at	ghest paid individuals or least \$5,000 by the orga					
		(iii) fundrais			(v) A mount paid to	
(i) Name of individual	(ii) Activity	custo		(iv) Gross receipts	(or retained by)	(vi) A mount paid to (or retained by)
or entity (fundraiser)	(ii) Activity	contribu		from activity	fundraiser listed in	organization
		Yes	No		col (i)	
			<u> </u>			
Total			<u> </u>			

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

Pai	rt II	Fundraising Events. Comp more than \$15,000 on Form					repor	ed
		. ,	(a) Event #1	(b) Event #2	(c) Other Events	(d) To	tal Eve	
			BENEFIT	DINNER	5	(Add col	(a)t⊓ √(c))	rougn
			(event type)	(event type)	(total number)			
RUE	1	Gross receipts	1,169,460	301,040	93,531		1,56	4,031
Revenue	2	Less Charitable contributions	0	0	0			0
	3	Gross revenue (line 1 minus line 2)	1,169,460	301,040	93,531		1,56	4,031
	4	Cash Prizes						
ses	5	Non-cash Prizes						
Expenses	6	Rent/Facility costs	224,823	55,749	93,934		37	4,506
ā K	7	Other direct expenses	35,336	5,603	14,416		5	5,355
Direct	8	Direct expense summary Add line	es 4 through 7 in column	(d)	🛌		42	9,861
	9	Net income summary Combine lin	ies 3 and 8 in column (d)				1,13	4,170
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	irt IV, line 19, or repo	rted mo	e thar	1
Revenue		, , , , , , , , , , , , , , , , , , ,	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tota col (a) ti		
~	1	Gross revenue						
—— ഗ	2	Cash prizes						
Expenses	3	Non-cash prizes						
<u>ភ</u> ប	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	┌ Yes%_ ┌ No	┌ Yes	┌ Yes%			
	7	Direct expense summary Add lines	2 through 5 in column (d)				
	8	Net gaming income summary Com	bine lines 1 and 7 in coli	ımn (d)				
9	•	er the state(s) in which the organiza					Yes	No
a b		the organization licensed to operate No," Explain	gaming activities in each	n of these states?		· 9a		
10a b		re any of the organization's gaming li Yes," Explain	censes revoked, suspen	ded or terminated during	the tax year?	10a		
11	 Do	es the organization operate gaming a	ctivities with nonmembe	rs?				
12		the organization a grantor, beneficiar med to administer charitable gaming						

			res	140
13	Indicate the percentage of gaming activity operated in			
а	The organization's facility			
b	An outside facility	_		
L 4	Provide the name and address of the person who prepares the organization's gaming/special events books and records			
	Name •	-		
	Address •	-		
.5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$			
c	If "Yes," enter name and address			
	Name •	-		
	Address ►			
16	Gaming manager information			
	Name 🟲			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🟲			
	Director/officer Employee Independent contractor			
.7	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent	1,4		

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Grants and Other Assistance to Organizations,

OMB No 1545-0047

2008

DLN: 93493137026060

Department of the Treasury Internal Revenue Service Name of the organization

Teach For America Inc

Schedule I

(Form 990)

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

Governments and Individuals in the U.S.

Open to Public Inspect ion Employer identification number

13-3541913

Part I General Inform	mation on Gra	nts and Assistance	2				
 Does the organization mathe selection criteria use Describe in Part IV the organization 	d to award the gra	nts or assistance?					✓ Yes
Part II Grants and Otl Form 990, Part I Part IV and Sch	her Assistance IV, line 21 for al edule I-1 if addi	e to Governments ny recipient that rece	and Organizations erved more than \$5,0	in the United Stat	tes. Complete if the of the first no one recipient rec		
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of seconganizations				<u> </u> •	-		
3 Enter total number of other For Paperwork Reduction Act Not			<u> </u>	Cat No 500551			nedule I (Form 990) 2008
apar work neaded on Act Not	, see the mistine			Cat 110 300331		56.	2 (101111 330 / 2000

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
FINANCIAL AID/SUPPORT	2280	4,842,441			

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

See Additional Data Table

Ident if ier	Return Reference	Explanation
ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS IN THE U S	,	GRANTS/FINANCIAL AID IS OFFERED TO CORPS MEMBERS WHO ARE ATTENDING THE CURRENT YEAR'S INSTITUTE A LISTING IS MAINTAINED OF THE PEOPLE WHO TAKE THE GRANT WITH ALL REQUIRED INFORMATION SUCH AS FULL NAME, SOCIAL SECURITY NUMBER AND ADDRESS THE GRANT IS BASED ON THE FINANCIAL NEED OF THE INDIVIDUAL

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DLN: 93493137026060

OMB No 1545-0047

2008

Schedule J (Form 990)

Compensation Information

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Teach For America Inc

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23. Name of the organization

Employer identification number

13-3541913

Pa	rt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II		ny of the following to or for a person listed in Form vide any relevant information regarding these items			
	First class or charter travel	Γ	Housing allowance or residence for personal use		l	
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees		ľ	
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a v provision of all the expenses described above? If "			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t					
	Compensation committee	<u> </u>	Written employment contract		ľ	
	Independent compensation consultant	<u> </u>	·			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	, Part VI	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a	l	Νο
b	Participate in, or receive payment from, a supplement	ental non	qualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must c	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, dıd the organızatıon pay or accrue any			
а	The organization?			5a	l	Νο
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νο
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	•		8		No

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

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
See Addıtıonal Data Table (i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

Schedule J (Form 990) 2008

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
-		
-		
	•	

Software ID: Software Version:

EIN: 13-3541913

Name: Teach For America Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
wendy kopp ((0	0	9,429 1,821	9,938 1,920	298,892 57,741	225,174 38,494
matthew kramer ((274,050	0	0 0	11,250 0	11,858 0	297,158 0	219,044 0
kevin huffman ((0	0	11,250 0	10,411	251,304 0	190,183
e m rossy ((204,775	0	0	0	8,234 0	213,009 0	156,923 0
elisa v beard (i	182,637	0	0	8,753 0	10,889	202,279 0	146,751 0
aimee a davis ((0	0	8,815 0	11,780 0	200,145 0	149,873
gillian c smith (i	200,325	0	0	9,850 0	11,803	221,978 0	166,450 0
Elissa Clapp ((189,219	0	0	9,390 0	7,347 0	205,956 0	153,354 0
A ylon S Samouha ((182,861	0	0	8,990 0	4,155 0	196,006 0	146,954 0
Jeffrey Wetzler (I	203,925	0	0	10,025 0	11,807	225,757 0	169,253 0
Andrew D Kopplin	164,037	0	0	0	7,885 0	171,922 0	112,089
Jemina R Bernard (0	0	3,683 0	4,133 0	170,141 0	127,306 0
Monique A yotte- (Hoeltzel (1		0	0	2,600 2,200	1,357 2,771	50,143 117,138	47,103 75,126
Ellen N Shepard (1	155,102	0	0	418	3,131 0	158,651 0	107,382
Melissa Golden (1	154,624	0	0	7,817 0	11,753 0	174,194 0	132,432
David A Rosenberg (150,821	0	0	7, 4 05 0	2,131 0	160,357 0	118,634 0
Dena Blank ((0	0	7,275 0	3,920 0	159,145 0	119,338
Darren Stowell ((145,757	0	0	7,275 0	4,791 0	157,823 0	119,486 0

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SCHEDULE M (Form 990)

Department of the Treasury

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Non-Cash Contributions

Attach to Form 990 Internal Revenue Service Name of the organization Teach For America Inc

Employer identification number

13-3541913

Pa	It I Types of Property							
		(a) Check	(b) Number of Contributions	(c) Revenues reported on	(d) Method of de	etermır	nıng	
		ıf applicable		Form 990, Part VIII, line 1g	reven	ues		
1	Art—Works of art			- 5				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock							
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	COMPUTER AND INTERNET Other (describe <u>HARDWARE</u>)	X	1	1,647,509	COST/SELLING PR	ICE		
	BOOK PLANNERS FOR							
26	Other (describe <u>TEACHERS</u>)	Х	1	131,778	COST/SELLING PR	ICE		
27	Other (describe)							
28	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828	- -	ar for contributions for	29			0
							Yes	No
30a	During the year, did the organization hold for at	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it must			1
	least three years from the date			not required to be used for e	exempt purposes			
	for the entire holding period? .					30a		No
b	If "Yes", describe the arrangem	ent in Part 1	II			l I		
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell r	non-cash			
п.		•				32a	res	
	If "Yes", describe in Part II If the organization did not report checked, describe in Part II	revenues i	n Column (c) for a type of p	property for which Column (a) is			

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. ReturnReference Explanation USE OF THIRD PARTY TO SOLICIT, SCHEDULE M, PART I, LINE 32A THE ORGANIZATION ENGAGES THE SERVICES OF PROCESS, OR SELL NON-CASH INVESTMENT COMPANIES TO HOLD STOCK AND BOND CONTRIBUTIONS DONATIONS FROM CONTRIBUTORS THE INVESTMENT COMPANIES THEN SELL THE INVESTMENTS ON THE ORGANIZATION'S BEHALF

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public

Name of the organization Teach For America Inc Employer identification number

13-3541913

ldentifier	Return Reference	Explanation
DOCUMENTATION OF MEETINGS HELD BY COMMITTEES	FORM 990 PART VI, SECTION A, LINE 8B	THE MEETINGS OF THE AUDIT AND FINANCE COMMITTEES FOR THE CURRENT REPORTING PERIOD WERE NOT DOCUMENT WITH MINUTES THE ORGANIZATION PLANS TO CHANGE THIS PRACTICE GOING FORWARD

ldentifier	Return Reference	Explanation
PROCESS THE ORGANIZATION USES TO REVIEW FORM 990	FORM 990 PART VI, SECTION A, LINE 10	TEACH FOR AMERICA'S FORM 990 WAS PREPARED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM A DRAFT OF THE FORM 990 WAS PROVIDED ELECTRONICALLY TO THE BOARD OF DIRECTORS AUDIT COMMITTEE FOR REVIEW ONCE ALL ISSUES AND QUESTIONS REGARDING THE RETURN WERE RESOLVED, THE FORM 990 WAS FINALIZED TO INCORPORATE ANY NECESSARY CHANGES AN UPDATED VERSION WAS PROVIDED ELECTRONICALLY TO THE ASSISTANT CONTROLLER TO INCLUDE IN MEMBER PACKAGES FOR THE BOARD MEETING FOR THE BOARD'S REVIEW AND APPROVAL ONCE ANY ADDITIONAL MATTERS WERE ADDRESSED AND RESOLVED, THE FINALIZED VERSION OF FORM 990 WAS FILED WITH THE IRS ON OR BEFORE THE MAY 15TH FILING DEADLINE

ldentifier	Return Reference	Explanation					
ORGANIZATION'S PRACTICES FOR MONITORING CONFLICTS OF INTEREST	FORM 990 PART VI, SECTION B, LINE 12C	TEACH FOR AMERICA DOES NOT CURRENTLY HAVE A PROCESS TO MONIOR COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY					

ldentifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990 PART VI, SECTION B, LINE 15A-B	Teach for America, Inc. uses independent compensation consultants to ensure that the salary set for the CEO is appropriate. Independent compensation consultants are also used to ensure that the salaries for the Operating Committee members and other key officers are appropriate and in line with those of comparable organizations. Compensation is set and adjusted annually at Teach For America. Each year, the Operating Committee recommends baseline adjustments, which are then approved by the Board. These recommendations are based largely on results from independent compensation studies in most years. In the years where the organization does not undertake such a study, we use guiding principles to determine the correct relative positioning for staff member salaries. These guidelines include paying near the 75th percentile, adhering to internal equity and ensuring we are paying fairly and competitively over the course of staff member careers in the organization. In addition, on an annual basis, the organization conducts a compensation review process - where staff members are evaluated for salary adjustments based on their ability to contribute to the organization, if/whether their roles are impacted by changes in scale of the organization and if/whether their positions warrant an internal, external or geographic market adjustment Managers provide qualitative guidance, team leaders make percentage recommendations and senior management calibrates to ensure salaries are fair and competitive across the organization and reflective of our compensation philosophy. The operating committee makes a recommendation to the Board, which must adopt the annual salary adjustments before they are implemented at the beginning of the fiscal year.

ldentifier	Return Reference	Explanation				
ORGANIZATION'S POLICY REGARDING MAKING CERTAIN DOCUMENTS PUBLIC	1	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE TEACH FOR AMERICA, INC. WEBSITE AND UPON REQUEST				

ldentifier	Return Reference	Explanation
ORGANIZATION'S PRACTICES FOR OVERSIGHT OF FINANCIAL STATEMENT AUDIT	FORM 990, PART XI	The organization's governing body has a committee charged with oversight of the audit of the organization's financial statements. The committee's process for oversight of the audit, performed by an independent accounting firm, has not changed for the reporting year.

ldentifier	Return Reference	Explanation
OTHER PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4D	Teach for America, Inc. has an alumni base of former corps members all over the world. These individuals present a powerful opportunity to continue to impact the education community through management and government positions. In recognition of the importance of its alumni base, TFA has increased its budget for alumni affairs. Specifically, in 2009 and 2008, alumni-related expenses totaled approximately \$10,010,000 and \$7,825,000, respectively (as measured for Form 990 purposes, reflecting adjustments for donated services)

DLN: 93493137026060

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury

► Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

Related Organizations and Unrelated Partnerships

► See separate instructions. Internal Revenue Service **Employer identification number** Name of the organization Teach For America Inc 13-3541913 Part I Identification of Disregarded Entities (C) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity **Identification of Related Tax-Exempt Organizations** Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) TEACH FOR ALL TEACH FOR AM 315 WEST 36TH STREET EDUCATION NY 501(C)(3) NEW YORK, NY10018 26-2122566

(A) Name, address, and EIN of related organization	Prin	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predomina income(rela investmer unrelated	int Sh ted, it,	(F) nare of total income	(G) Share of end-of- year assets	(F Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	(J) General o managing partner?
									Yes	No		Yes No
Part IV Identification of	Related	l Organizations	Taxable as	a Corporation	or Trust	<u> </u>						
(A) Name, address, and EIN of related orga	nızatıon	(B) Primary activity		(C) Legal domicile (state or foreign country)	: Direc	(D) t controllin entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership	

Part V Transactions with Related Organizations
--

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
L During the tax year, did the orgranization 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 (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1 g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1 <u>j</u>		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	;
n Sharing of paid employees	1n	Yes	i
• Reimbursement paid to other organization for expenses	10		No
p Reimbursement paid by other organization for expenses	1p	Yes	3
q Other transfer of cash or property to other organization(s)	1 q		No
r Other transfer of cash or property from other organization(s)	1r		No

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	TEACH FOR ALL	N	246,196
(2)	TEACH FOR ALL	М	45,299
(3)	TEACH FOR ALL	Р	1,418,241
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

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

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtional allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No
						•		Cala - 4l	R (Form	200) 2000

Software ID: Software Version:

EIN: 13-3541913

Name: Teach For America Inc

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	a !									
		(C) Position (check all that apply)							(5)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Walter Isaacson , chair	10	Х						0	0	0
Paula A Sneed , vice chair	1 0	Х						0	0	0
Jide Zeitlin , treasurer	1 0	Х						0	0	0
Laura E Arnold , director	1 0	Х						0	0	0
Maxine Clark , director	1 0	Х						0	0	0
Thomas H Castro , director	1 0	Х						0	0	0
Paul Finnegan , director	10	Х						0	0	0
Donald G Fisher , director	10	Х						0	0	0
Lew Frankfort , director	10	Х						0	0	0
David Gergen , director	10	Х						0	0	0
Eddie S Glaude Jr , director	10	Х						0	0	0
Leo J Hındery Jr , dırector	10	Х						0	0	0
John Hotchkıs , dırector	1 0	Х						0	0	0
David W Kenny , director	10	Х						0	0	0
Sherry Lansing , director	1 0	Х						0	0	0
Sue Lehmann , director	1 0	Х						0	0	0
Michael L Lomax PhD , director	10	Х						0	0	0
Stephen F Mandel Jr , director	1 0	Х						0	0	0
Anthony W Marx , director	10	Х						0	0	0
James M McCormick , director	10	Х						0	0	0
Darla Moore , director	10	Х						0	0	0
Chrıs Nelson , dırector	10	Х						0	0	0
Richard S Pechter , director	1 0	Х						0	0	0
Greg Penner , director	10	Х						0	0	0
Nancy Peretsman , director	10	Х						0	0	0
Laurene Powell , director	10	Х						0	0	0
Arthur Rock , director	10	Х						0	0	0
Sır Howard Strınger , dırector	1 0	Х						0	0	0
Kurt Strovink , director	10	Х						0	0	0
Lawrence J Stupskı , dırector	1 0	Х						0	0	0

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
	(B) Average hours per week	(C) Position (check all that apply)								(F)
(A) Name and Title		Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Beverly Daniel Tatum PhD , director	1 0	Х						0	0	0
John Thompson , director	10	Х						0	0	0
Gregory W Wendt , director	10	Х			<u> </u>			0	0	0
wendy kopp , CEO AND FOUNDER	40 0	X		Х	_			279,525	54,000	23,108
matthew kramer , president	40 0		1	X	<u> </u>			274,050	0	23,108
kevin huffman , evp public affairs	400			X	\vdash			229,643	0	21,661
e m rossy, evp & chief financial officer	400			X	 			204,775 182,637	0	8,234 19,642
elisa v beard , chief operating officer aimee a davis , chief people officer	40 0 40 0			X	\vdash			179,550	0	20,595
gillian c smith , chief marketing officer	40 0			x				200,325	0	21,653
Jemina R Bernard , ED/ASSISTANT SECRETARY	40 0			х				162,325	0	7,816
Osman Kurtulus , VP ACCTG/CTRLS & AST SECRETARY	40 0			х				83,748	5,873	5,877
Analisa Barret , VP, PLANNING & ANALYSIS	40 0			Х				30,562	0	13,172
Reshma Singh , VP, DEVELOPMENT OPERATIONS	40 0			х				108,660	0	9,399
Marcia Reina , VP, TECHNOLOGY BUS OPERATIONS	40 0			х				96,084	5,468	7,829
Matt Gould , MD, FACILITIES ADMINISTRATION	40 0			х				94,925	0	16,231
Kwame Griffith , ED/ASSISTANT SECRETARY	40 0			х				89,145	0	8,258
O marı Todd , ED/ASSISTANT SECRETARY	40 0			х				93,632	0	3,861
Eric Scroggins , ED/ASSISTANT SECRETARY	40 0			х				135,857	0	3,907
Josh Biber , ED/ASSISTANT SECRETARY	40 0			х				81,189	0	8,121
Tim Hurley , ED/ASSISTANT SECRETARY	40 0			х				44,451	0	48
Josh Anderson , ED/ASSISTANT SECRETARY	40 0			х				98,278	0	8,632
Edna Novak , ED/ASSISTANT SECRETARY	40 0			х				54,458	0	2,251
Sean Vanberschot , ED/ASSISTANT SECRETARY	40 0			х				94,523	0	12,780
Erin Swanson Oschwald , ED/ASSISTANT SECRETARY	40 0			х				65,569	0	6,991
Kira Orange-Jones , ED/ASSISTANT SECRETARY	40 0			х				106,778	0	3,875
JIII Baldemor, ED/ASSISTANT SECRETARY	40 0			х				121,552	0	<u> </u>
Ann Best , ED/ASSISTANT SECRETARY	400			Х	<u> </u>			113,948	0	9,464
Jason Kloth , ED/ASSISTANT SECRETARY	40 0			х	<u> </u>			75,271	0	3,840
Crystal Jones , ED/ASSISTANT SECRETARY	40 0			х				72,261	0	4,739

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
	(B) Average hours per week	Posit t	(C non () hat a	chec		I		(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(A) Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
Alicia Herald , ED/ASSISTANT SECRETARY	40 0			х				66,448	0	7,065
Allison Serafin , ED/ASSISTANT SECRETARY	40 0			х				83,799	0	7,929
Brian Johnson , ED/ASSISTANT SECRETARY	40 0			х				128,838	0	10,258
Brad Leon , ED/ASSISTANT SECRETARY	40 0			х				82,442	0	8,018
Daniel Sellers , ED/ASSISTANT SECRETARY	40 0			x				40,250	0	1,921
Ron Nurnberg , ED/ASSISTANT SECRETARY	40 0			х				99,897	0	13,863
Heather Calverase , ED/ASSISTANT SECRETARY	40 0			x				103,463	0	16,931
Landon Mascarenaz , ED/ASSISTANT SECRETARY	40 0			х				62,400	0	7,094
Mike Wang , ED/ASSISTANT SECRETARY	40 0			х				108,468	0	9,080
Pearl Esau , ED/ASSISTANT SECRETARY	40 0			х				83,519	0	7,822
Robert Carreon , ED/ASSISTANT SECRETARY	40 0			х				58,175	0	6,429
Catherine Pozniak , ED/ASSISTANT SECRETARY	40 0			х				39,016	0	2,231
Michael Tipton , ED/ASSISTANT SECRETARY	40 0			х				68,344	0	7,208
Emily Barton , ED/ASSISTANT SECRETARY	40 0			х				96,927	0	8,570
Elissa Clapp , SVP, RECRUITMENT	400				Х			189,219	0	16,737
Aylon S Samouha , SVP, TEACHER SUPPORT	40 0				Х			182,861	0	13,145
Jeffrey Wetzler , SVP, CHIEF LEARN OFFICER	40 0				Х			203,925	0	21,832
Andrew D Kopplin , VP, SENIOR ADVISOR	40 0				Х			164,037	0	7,885
Monique Ayotte-Hoeltzel , VP, ADMISSIONS	40 0				х			46,186	112,167	8,928
Ellen N Shepard , CHIEF INFORMATION OFFICER	40 0				х			155,102	0	3,549
Melissa Golden , SMD, DEVELOPMENT RESOURCES	40 0					х		154,624	0	19,570
David A Rosenberg , VP, INSIGHTS & DIGITAL MARKETS	40 0					Х		150,821	0	9,536
Lara C Sellers , VP, REGIONAL OPERATIONS	40 0					Х		148,085	0	215
Dena Blank , VP, COUNTRY SUPPORT	40 0					Х		147,950	0	11,195
Darren Stowell , VP, REGIONAL OPERATIONS	40 0					х		145,757	0	12,066

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

TEACH FOR AMERICA, INC. IS THE NATIONAL TEACHER CORPS OF OUTSTANDING RECENT COLLEGE GRADUATES WHO COMMIT TWO YEARS TO TEACH IN PUBLIC SCHOOLS IN LOW-INCOME URBAN AND RURAL AREAS, AND WHO BECOME LIFELONG LEADERS IN PURSUIT OF EDUCATIONAL EXCELLENCE AND EQUITY. TEACH FOR AMERICA, INC. RECRUITS TOP GRADUATES OF ALL ACADEMIC MAJORS FROM CAMPUSES ACROSS THE COUNTRY, SELECTS CORPS MEMBERS THROUGH AN INTENSIVE APPLICATION PROCESS, TRAINS THEM IN AN INTENSIVE PRE-SERVICE INSTITUTE, PLACES THEM IN SCHOOLS AS REGULAR BEGINNING TEACHERS, COORDINATES AN ONGOING SUPPORT NETWORK AMONG THEM, AND BUILDS A NETWORK AMONG ITS ALUMNI TO FOSTER THEIR ONGOING LEADERSHIP AND COLLABORATION.