Return of Organization Exempt From Income Tax

OMB No. 1545-0047 \bigcirc

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

Department of the Treasury Internal Revenue Service

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

20	IU	
Open to	Public	C
Inches	ion	

A F	or th	e 201	0 calendar year, or tax year begin	ning 10/01, 2	2010, and endi	ng		09/30,2	0 11	
_			C Name of organization				D Employer ide	ntification nun	nber	
Вс	heck if ap	oplicable:	TEACH FOR AMERICA, IN	IC.						
	Addre	ess ne	Doing Business As				13-3541	.913		
	7 1	change	Number and street (or P.O. box if mail is r	not delivered to street address)	Room/suite		E Telephone nu	mber		
	Initial	return	315 WEST 36TH STREET		5TH F	L	(212) 279	9-2080		
	Termi	inated	City or town, state or country, and ZIP + 4		L					
	Amen	nded	NEW YORK, NY 10018				G Gross receipts	s \$ 278,	620	,700.
		cation	F Name and address of principal office	cer: WENDY KOPP			H(a) Is this a group		Yes	X No
	pendi	ing	315 WEST 36TH STREET,	5TH FL NEW YORK,	NY 10018		affiliates? H(b) Are all affiliate	es included?	Yes	No
ī -	Tax-ex	empt st			a)(1) or 52	7	` ′	a list. (see instru	_	
			WWW.TEACHFORAMERICA.ORG		2)(1) 01	· ·	H(c) Group exempt	tion number	,	
_			1	Association Other >	L Year o	of format	ion: 1989 M s		micile:	СТ
	rt I		mmary		1 = 1.55					
			describe the organization's mission or	most significant activities:						
	'	TEA(CH FOR AMERICA'S MISSION	N IS TO BUILD THE	MOVEMENT I	O EI	 JIMINATE			
20			CATIONAL INEQUITY BY EN							
Activities & Governance			JRE LEADERS IN THE EFFO							
)Ve	2		this box if the organization di		enosed of more th	an 25%	of its net assets			
ŏ	l .				•		i i	3	3	2.
စ္	4	Numb	er of voting members of the governing	body (Fait VI, line Ia)	16)			4		2.
įŧį	5	Total	er of independent voting members of the	nder year 2010 (Part V. line 20)	10)	• • •			4,18	
Ė	6	Total	number of individuals employed in cale	nual year 2010 (Part V, line 2a)					7,77	
⋖	6	Total	number of volunteers (estimate if necess	carty				•		740.
			gross unrelated business revenue from F					7a		,990.
	D	net ur	nrelated business taxable income from F	-orm 990-1, line 34			Prior Year	Cur	rent Ye	
		Contri	butions and grants (Part VIII line 1b)				93,027,43			246.
ine	8	Drage	butions and grants (Part VIII, line 1h)	· · · · · · · · · · · · · · · · · · ·	OPY FOR		18,232,41			766.
Revenue	9	Progra	am service revenue (Part VIII, line 2g)	PUBLI	C INSPECTION		475,74			728.
Re	10	IIIVES	intent income (i art viii, column (A) , inte	5 5, 4, and 7 u)			1,751,03			,110.
			revenue (Part VIII, column (A), lines 5,				1,731,03			,850.
			revenue - add lines 8 through 11 (must			_	3,585,81			,527.
	13	Grant	s and similar amounts paid (Part IX, colu	imn (A), lines 1-3)				0.	, 332	727
	14	Bener	its paid to or for members (Part IX, colur	Tin (A), line 4)	40)	1	.09,181,48		015	,226.
ses			es, other compensation, employee bene					0.	, 913,	0.
Expenses	тоа	Profes	ssional fundraising fees (Part IX, column	(A), line 11e) (A), line 25) > 21, 556,	112			0.		
Ä			fundraising expenses (Part IX, column (E	·			64,170,91	3 03	929	472.
	17	Other	expenses (Part IX, column (A), lines 11a	a-110, 111-241)		1	76,938,20			,225.
			expenses. Add lines 13-17 (must equal			-	36,548,41			,625.
- v		Rever	ue less expenses. Subtract line 18 from	l line 12		Posin	ning of Current Ye		d of Yea	
ts o		T . (.)	and (Dad V. Par 40)				37,962,46			
sse	20		assets (Part X, line 16)				38,119,02			$\frac{144}{144}$.
Net Assets or Fund Balances	21		liabilities (Part X, line 26)			2	99,843,44			,108.
			ssets or fund balances. Subtract line 21	from line 20.			. 99, 043, 44	0. 330,	, 00 / ,	
	rt II		gnature Block f perjury, I declare that I have examined this re	eturn including accompanying sche	dules and statement	ts and to	n the hest of my kn	owledge and h	elief it i	s true
			plete. Declaration of preparer (other than office					iowicago ana b	01101, 11 1	, truo,
•	ign									
	ere		Signature of officer				 Date			
• • •	CIC		0.ga.a.a o. coo.				Date			
			Type or print name and title							
_			Type preparer's name	Preparer's signature	Date		Check if	PTIN		
Paid	i		- , , p. opa. 5. 5 . idilio	pai oi o oignataro	23.0		self-	<u> </u>	7414	۵n
Pre	parer	<u>-</u>	GRANT THORNTO	N T.T.D			employed ► EIN ► 3	36-60555		
Use	Only		CCC MILEDO AVE	NUE NEW YORK, NY 1	0017-4011			212-599-		
Max	tho !!		cuss this return with the preparer shown							-
			Reduction Act Notice see the separate						es and	(2010)

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Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: TEACH FOR AMERICA'S MISSION IS TO BUILD THE MOVEMENT TO ELIMINATE
	EDUCATIONAL INEQUITY BY ENLISTING OUR NATION'S MOST PROMISING FUTURE
	LEADERS IN THE EFFORT.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$37,599,204. including grants of \$0.) (Revenue \$23,198,766.) TEACHER RECRUITMENT AND SELECTION
	TFA RECRUITS AND SELECTS A TEACHING CORPS OF OUTSTANDING COLLEGE
	GRADUATES TO TEACH THE NATION'S MOST UNDERSERVED STUDENTS. THE
	RECRUITMENT AND SELECTION PROCESS CONSISTS OF SCHEDULING AND
	ATTENDING ON- AND OFF-CAMPUS RECRUITING EVENTS, PROCESSING
	APPLICATIONS (APPROXIMATELY 48,000 IN 2011 AND 46,000 IN 2010),
	AND CONDUCTING DAY-LONG INTERVIEW SESSIONS IN MULTIPLE SITES
	ACROSS THE COUNTRY. TFA HAD APPROXIMATELY 5,100 AND 4,500 NEW
	CORPS MEMBERS, WHO BEGAN THEIR FALL TEACHING ASSIGNMENTS IN 2011 AND 2010, RESPECTIVELY.
	AND ZUIU, RESPECTIVELI.
4b	(Code:) (Expenses \$33,090,226. including grants of \$0.) (Revenue \$0.
	(Code:) (Expenses \$91,707,720.including grants of \$4,378,600.) (Revenue \$) PLACEMENT, PROFESSIONAL DEVELOPMENT, EDUCATION AWARDS, AND OTHER
	TFA PLACES CORPS MEMBERS IN VARIOUS URBAN AND RURAL REGIONS
	THROUGHOUT THE UNITED STATES. IN EACH REGION, TFA HAS REGIONAL
	OFFICES, WHICH ARE RESPONSIBLE FOR PLACING CORPS MEMBERS IN
	SCHOOLS, MONITORING PROGRESS THROUGHOUT THEIR TWO-YEAR COMMITMENT,
	PROVIDING OPPORTUNITIES FOR ONGOING PROFESSIONAL DEVELOPMENT, AND
	HELPING CORPS MEMBERS TO FEEL PART OF A NATIONAL CORPS. IN 2011
	AND 2010, TFA PLACED CORPS MEMBERS IN 43 AND 39 REGIONS,
	RESPECTIVELY.
4d	Other program services. (Describe in Schedule O.) ATTACHMENT 2
_	(Expenses \$ 20,182,362. including grants of \$ 573,927.) (Revenue \$ 1,813,000.)
4e	Total program service expenses ► 182,579,512.

Part	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,"		х	
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		Х
	candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4	х	
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		
•	Part III	-		
6	the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes,"</i>			
		6		Х
7	complete Schedule D, Part I	-		- 21
7	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
o	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	_ <u> </u>		
3	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes,"</i>			
	complete Schedule D, Part N	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
• •	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete</i>			
_	Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV -	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		v	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	4.		v
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		Х
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Λ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18	х	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	71	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		Х
20.0	If "Yes," complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form	ua		- 1
b	990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20h		
	ous more that operate one or more neophale must attach addited initialitial statements (see instructions)	<u>, </u>		

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
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		
	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			
	Schedule L. Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
·	was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
30	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>			
J 1	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>		
0 2	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
0 7	IV, and V, line 1	34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Х	
а	Did the organization receive any payment from or engage in any transaction with a			
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
-	related organization? If "Yes," complete Schedule R, Part V, line 2	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
J.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		
50	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
	10. Neterial control of increase to complete conclude C. T.			/aa./-:

Form **990** (2010)

13-3541913 Form 990 (2010) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V.............

			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1,350			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 4,188			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		Х
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 receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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:			
	Initiation fees and capital contributions included on Part VIII, line 12			
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.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
h	Note. See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
	Enter the amount of reserves on hand	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		
JSA			990	(2010
0E1040 1.0	00 6294AP 700J V 10-8.3 0174202-00008	. 51111		,_010

Form **990** (2010)

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

Check if Schedule O contains a response to any question in this Part VI	X

Soci	ion A. Governing Body and Management			
Seci	non A. Governing Body and Management		Yes	No
	Enter the number of voting members of the governing body at the end of the toy year.		163	140
	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		Х
	any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct	,		Х
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3 4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Does the organization have members or stockholders?	•		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a		Х
	of the governing body?	7 b		X
D	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7.0		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following: The governing body?	8a	Х	
a	Each committee with authority to act on behalf of the governing body?	8b		Х
b	, , , , , , , , , , , , , , , , , , , ,	0.5		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	_)	
	on En Chaise (Time Cooken En equecte information about pondice not required by the internal reterioral		Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
u	form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_ATTACHMENT_3			
18	Section 6104 requires an organization to make its Forms 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. X Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interesting the conflict of inter	est		
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MIGUEL ROSSY 315 WEST 36TH ST, 5TH FL NEW YORK, NY 10018	ne		
	organization: MIĞUEL ROSSY 315 WEST 36TH ST, 5TH FL NEW YORK, NY 10018			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B)	Boois	tion (o	(C		that ann	sls A	(D) Reportable	(E) Reportable	(F) Estimated
	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director			Key employee	ম Highest compensated at employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) WALTER ISAACSON										
CHAIR	1.00	Х		Х				0.	0.	. 0
PAULA A. SNEED VICE CHAIR	1.00	Х		х				0.	0.	. 0
(3) JIDE ZEITLIN TREASURER	1.00	х		х				0.	. 0.	. 0
(4) LAURA ARNOLD										
DIRECTOR	1.00	Х						0.	0.	. 0
(5)MAXINE CLARK				\neg						
DIRECTOR	1.00	Х						0.	0.	. 0
(6) THOMAS H. CASTRO										
DIRECTOR	1.00	Х						0.	0.	. 0
(7) PAUL FINNEGAN										
DIRECTOR	1.00	Х						0.	. 0.	. 0
(8) LEW FRANKFORT		.,								0
DIRECTOR	1.00	Х						0.	0.	. 0
OJRECTOR	1.00	Х						0.	0.	. 0
(10)EDDIE S. GLAUDE JR.										
DIRECTOR	1.00	Х						0.	0.	0
(11)LEO J. HINDERY JR.										
DIRECTOR	1.00	Х						0.	0.	. 0
	1.00	х						0.	0.	. 0
(13)JOHN LEGEND										
DIRECTOR	1.00	Х						0.	0.	. 0
	1.00	х						0.	0.	. 0
	1.00							0.	0	. 0
(16)STEPHEN F. MANDEL JR. DIRECTOR	1.00							0.	0	. 0
	1 = 100								1	F 000 (0040)

Form **990** (2010)

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	yee	es,	and I	ligi	hest Compensat	ed Employees (d	ontinued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organizations in Schedule O)		Institutional trustee		Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(17) ANTHONY W. MARX										
DIRECTOR	1.00	Х						0.	0.	0 .
(18) JAMES M. MCCORMICK										
DIRECTOR	1.00	Х						0.	0.	0 .
(19) DARLA MOORE										
DIRECTOR	1.00	Х						0.	0.	0 .
(20) RICHARD S. PECHTER										
DIRECTOR	1.00	Х						0.	0.	0 .
(21) GREG PENNER										
DIRECTOR	1.00	Х						0.	0.	0 .
(22) NANCY PERETSMAN										
DIRECTOR	1.00	Х						0.	0.	0 .
(23) LAURENE POWELL										
DIRECTOR	1.00	Х						0.	0.	0
(24) ARTHUR ROCK										
DIRECTOR	1.00	Х						0.	0.	0 .
(25) VINCE ROIG										
DIRECTOR	1.00	Х						0.	0.	0
(26) SIR HOWARD STRINGER										
DIRECTOR	1.00	Х						0.	0.	0
(27) KURT STROVINK										
DIRECTOR	1.00	Х						0.	0.	0 .
(28) LAWRENCE J. STUPSKI										
DIRECTOR	1.00	Х						0.	0.	0
1b Sub-total							>	0.	0.	0.
c Total from continuation sheets to Part VII, S	ection A A	ATTA	СНМ	ΙEΝ	Т	4	>	3,541,030.	0.	278,613.
d Total (add lines 1b and 1c)	<u></u> .						>	3,541,030.	. 0	. 278,613.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				o re	ceived more than	\$100,000 in	

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

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
ATTACHMENT 5		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 16

Form **990** (2010)

JSA

FOIIII	_					13 3341313		Page 3
Par	t VIII	Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns	1b 1c 1d 1e	229,129. 3,482,268. 42,874,615. 197,061,234. 4,491,751.				
	h	Total. Add lines 1a-1f			243,647,246.			
nue				Business Code				
Seve	2 a	FEE FOR SERVICE REVENUE		611710	23,198,766.	23,198,766.		
Ge F	b	PUBLICATIONS LICENSING FEES		611710	1,813,000.	1,813,000.		
ervi	С							
n S	d							
grar	е							
Program Service Revenue	l f	All other program service revenue Total. Add lines 2a-2f		•	25,011,766.			
	3	Investment income (including dividen			20,022,1001			
	"	other similar amounts) ATTACH	MENT	6 •	128,762.		14,740.	114,022.
	4	Income from investment of tax-exemp			0.		·	
	5	Royalties · · · · · · · · · · · · · · · · · · ·	•		0.			
		(i) R		(ii) Personal				
	6a	Gross Rents 2	64,483.					
	b	Less: rental expenses						
	С	•	64,483.					
	d	Net rental income or (loss)		<u> ▶</u>	264,483.			264,483.
	7a	Gross amount from sales of (i) Sec	urities	(ii) Other				
	' "		55,732.					
	b	Less: cost or other basis						
		and saids expenses	81,766.					
	С	Gaill Of (1033)	26,034.					
	d	Net gain or (loss)		▶	-26,034.			-26,034.
Other Revenue	8 a	Gross income from fundraisin events (not including \$3,482,268 of contributions reported on line 1c). See Part IV, line 18	<u>.</u> a	963,826. 1,066,084.				
Ť		Less: direct expenses Net income or (loss) from fundraising (-102,258.			-102,258.
J		Gross income from gaming activities. See Part IV, line 19			. ,			
	h	Less: direct expenses						
	l .	Net income or (loss) from gaming activ			0.			
		Gross sales of inventory, les returns and allowances	s	65,888.				
		Less: cost of goods sold						
	С	Net income or (loss) from sales of inve	ntory.		65,888.	51,406.		14,482.
		Miscellaneous Revenue		Business Code				
	11a	REGISTRATION FEES		611710	827,895.	827,895.		-
	b	MISCELLANEOUS		900099	655,102.			655,102.
	С							1
	d	All other revenue			1 100 555			
	e	Total. Add lines 11a-11d			1,482,997.	25 001 007	14 740	010 707
	12	Total revenue. See instructions		<u></u>	270,472,850.	25,891,067.	14,740.	919,797.

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 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	633,927.	633,927.		
_	organizations in the U.S. See Part IV, line 21	033,321.	033,327.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,293,600.	4,293,600.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	25 , 000.	25 , 000.		
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	4,611,713.	2,936,992.	720,919.	953,802
6	Compensation not included above, to disqualified	, ,		,	•
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7		105,291,581.	86,939,611.	6,329,320.	12,022,650
	Other salaries and wages	103/231/301.	00,333,011.	0,323,320.	12,022,030
8	Pension plan contributions (include section 401(k)	2,933,557.	2,422,248.	176,343.	334,966
0	and section 403(b) employer contributions)	7,968,857.	6,566,105.	481,923.	920,829
9	Other employee benefits	9,109,518.	7,449,385.	584,436.	1,075,697
10	Payroll taxes	3,103,310.	7,113,303.	301, 130.	1,073,037
11	Fees for services (non-employees):	0.			
	Management	151,047.	46,420.	14,385.	90,242
	Legal	220,282.	150,146.	50,843.	19,293
	Accounting	358,987.	358,987.	30,043.	17,273
	Lobbying	0.	330,307.		
	Professional fundraising services. See Part IV, line 17	440,732.		440,732.	
	Investment management fees	7,218,207.	4,806,563.	1,749,190.	662,454
	Other	1,952,654.	1,364,921.	136,483.	451,250
12	Advertising and promotion	7,099,881.	6,291,534.	308,441.	499,906
13	Office expenses	7,099,001.	0,291,334.	300,441.	499,900
14	Information technology	0.			
15	Royalties	10,139,854.	9,106,222.	413,256.	620,376
16	Occupancy	8,785,124.	7,965,573.	299,807.	519,744
17	Travel	0,705,124.	1,903,313.	299,007.	319, 144
18	Payments of travel or entertainment expenses	0.			
	for any federal, state, or local public officials	12,190,122.	11,009,481.	429,841.	750,800
	Conferences, conventions, and meetings	180,619.	21,637.	88,077.	70,800
20	Interest	0.	21,037.	00,077.	70,903
21	Payments to affiliates	14,696,670.	11,318,000.	1,680,970.	1,697,700
22	Depreciation, depletion, and amortization	322,160.	33,185.	160,094.	128,881
23	Insurance	322,100.	33,103.	100,094.	120,001
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
	CORPS MEMBER SUPPORT	5,963,714.	5,750,062.	2,009.	211,643
~	STUDENT LODGING AND MEALS	8,657,528.	8,657,387.	15.	126
	TELECOMMUNICATIONS	3,008,642.	2,687,903.	129,811.	190,928
-	POSTAGE AND SHIPPING	514,273.	444,431.	18,763.	51,079
	BAD DEBT EXPENSE	579,615.	579,615.	10,703.	31,079
		1,349,361.	720,577.	345,942.	282,842
	All other expenses	218,697,225.	182,579,512.	14,561,600.	21,556,113
	Total functional expenses. Add lines 1 through 24f	210,001,220.	102,010,012.	14,001,000.	21,000,110
26	Joint Costs. Check here ► if following SOP 98-2 (ASC 958-720). Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				
JSA	campaign and fundraising solicitation				Form 990 (2010)

JSA 0E1052 1.000 6294AP 700J Form **990** (2010)

Part X **Balance Sheet** Beginning of year End of year 31,536,694. Cash - non-interest-bearing 19,381,808. 1 1 58,589,684. 44,808,362. Savings and temporary cash investments 2 Pledges and grants receivable, net 170,533,366 155,058,043. 3 3 14,090,799. 15,677,477. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7,307,445. 8,888,097. Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 4,239,563. 3,949,629. 9 10a Land, buildings, and equipment: cost or 78,017,422. other basis. Complete Part VI of Schedule D 10a 38,734,000. 30,068,230.10c 39,283,422. b Less: accumulated depreciation 10b 4,335,287. 11 8,363,821. 11 28,772,436. **12** 64,321,828. 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 643,848. 715,879. 15 15 337,962,466. 372,603,252. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 18,556,294. 19,698,146. 17 17 1,465,935. 1,385,766. 18 18 19 Deferred revenue 938,425. 19 221,455. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. 22 14,000,000. 0. 23 23 24 Unsecured notes and loans payable to unrelated third parties. 24 2,016,520. 1,752,629. 25 25 Other liabilities. Complete Part X of Schedule D Total liabilities. Add lines 17 through 25. ______ 38,119,026. 21,916,144. 26 Organizations that follow SFAS 117, check here | X | and complete Balances lines 27 through 29, and lines 33 and 34. 27 124,125,955. 166,396,200. 27 96,555,632. 95,129,045. 28 28 Fund 89,161,863. 29 79,161,853. 29 Organizations that do not follow SFAS 117, check here ▶ ŏ complete lines 30 through 34. Assets 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Net 350,687,108. 33 299,843,440. 33 Total liabilities and net assets/fund balances 337,962,466. **34** 372,603,252.

Form **990** (2010)

13-3541913 Page **12** Form 990 (2010)

Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			X	
1	Total revenue (must equal Part VIII, column (A), line 12)	2	270,4	72,8	850.
2	Total expenses (must equal Part IX, column (A), line 25)	2	218,6	97,2	225.
3	Revenue less expenses. Subtract line 2 from line 1		51,7	75,0	625.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	299,8	43,4	440.
5	Other changes in net assets or fund balances (explain in Schedule O)		-9	31,	957.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	5	350,6	87,3	108.
Pa	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
b			2b	Х	
С					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	X	

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

2010	
Open to Public Inspection	

Name o	f the organization							Emplo	yer iden	tification number	
TEACH	FOR AMERICA,	INC.							13	-3541913	
Part I	Reason for Pub	lic Charity Statu	s (All organizations mu	ıst con	nplete	this pa	art.) Se	e instr	uctions		
The org	_		cause it is: (For lines 1 th	-		-		•			
1			association of churches		ed in s	ection	170(b)((1)(A)(i)	-		
2		school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
3	- · · · · · · · · · · · · · · · · · · ·	•	service organization descr			-					
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).)(1)(A)(iii). Enter the				
	hospital's name, cit										
5			nefit of a college or univ	ersity	owned	or ope	erated t	oy a go	vernme	ntal unit described in	
• [section 170(b)(1)(·	اء ۽ جائين ۽	:	.: 4 7 0	VI-1/41/	A \ (\			
6 v		_	or governmental unit des						it on fro	um the general nublic	
7 X	_		es a substantial part of it . (Complete Part II.)	.s supp	ייונים	nn a go	vermine	entai ui	iit oi iit	in the general public	
8	_		on 170(b)(1)(A)(vi). (Com	nolata E	Dart II \						
9			es: (1) more than 331/3%				contrib	outions	membe	ershin fees, and aross	
• _	_	=	s exempt functions - sub							· -	
	•		ome and unrelated busi	-		-					
			ne 30, 1975. See section							,	
10	-		ted exclusively to test for	-					.).		
11	An organization o	rganized and ope	rated exclusively for the	bene	fit of,	to perf	orm th	e funct	ions of	or to carry out the	
	purposes of one o	r more publicly su	apported organizations de	escribe	d in s	ection 5	509(a)(1) or se	ection 5	09(a)(2). See section	
	509(a)(3). Check the	ne box th <u>at d</u> escrib	es the type of supporting	organ	ization	and co	mplete	lines 1	1e th <u>roι</u>	<u>ı</u> gh 11h.	
	a Type I	b Type				•	-			Type III - Other	
е		=	the organization is not			-		_	-		
	•		igers and other than one	or mo	re put	olicly su	pported	d organ	izations	described in section	
_	509(a)(1) or sectio	` ' ' '							_		
f	_		en determination from th	e IRS	that it	ıs a I	ype I, I	ype II,	or Type	e III supporting	
_	organization, check										
g	-	1006, has the orga	nization accepted any gif	t or co	ntribut	ion from	any or	tne			
	following persons?	directly or indire	ectly controls, either alor	na ar t	ogeth	ar with	nercon	e desc	rihed in	(ii) Yes No	
			dy of the supported organ			SI WILLI	person	13 UC3C	iibea iii	11g(i)	
			scribed in (i) above?	iiZatioii						11g(ii)	
			son described in (i) or (ii) a	bove?						11g(iii)	
h		-	out the supported organization).						
	Name of supported	(ii) EIN	(iii) Type of organization	(iv)	Is the	(v) Did y	ou notify	(vi)	Is the	(vii) Amount of	
.,	organization		(described on lines 1-9 above or IRC section	organi	zation in listed in		anization . (i) of	organia	zation in rganized	support	
			(see instructions))		overning ment?		i. (i) oi ipport?		U.S.?		
				Yes	No	Yes	No	Yes	No		
(A)											
(~)											
(B)											
(C)											
(D)											
(E)											
Total											

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

Schedule A (Form 990 or 990-EZ) 2010

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	76,939,083.	142,345,312.	251,515,886.	193,027,434.	243,647,246.	907,474,961.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	76,939,083.	142,345,312.	251,515,886.	193,027,434.	243,647,246.	907,474,961.
5	The portion of total contributions by each						
	person (other than a governmental unit or						
	publicly supported organization) included						
	on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						59,270,892.
6	Public support. Subtract line 5 from line 4.						848,204,069.
	tion B. Total Support	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
_		76,939,083.	142,345,312.	251,515,886.	193,027,434.	243,647,246.	907,474,961.
7 8	Amounts from line 4	70,939,003.	142,343,312.	231,313,000.	193,027,434.	243,047,240.	907,474,901.
0	payments received on securities loans, rents, royalties and income from similar sources	1,494,757.	1,519,476.	471,601.	507,333.	378,505.	4,371,672.
9	Net income from unrelated business activities, whether or not the business is regularly carried on				14,169.	14,740.	28,909.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATCH 1	111,371.	131,067.	1,766,056.	2,363,219.	4,325,712.	8,697,425.
11	Total support. Add lines 7 through 10						920,572,967.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	74,087,861.
13	First five years. If the Form 990 is f organization, check this box and stop here			d, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
	tion C. Computation of Public Sup		•				02 14
14	Public support percentage for 2010 (li		-			14	92.14% 97.73%
15	Public support percentage from 2009					15	
16a	331/3% support test - 2010. If the c	_					re, check
	this box and stop here . The organizati	•		•			
b	331/3% support test - 2009. If the o						
47-	check this box and stop here. The org						
1/a	10%-facts-and-circumstances test - 2						
	or more, and if the organization mo					-	•
	Part IV how the organization meets t			_	-	-	upported
ل	organization 10%-facts-and-circumstances test - 2						and line
D		_					
	15 is 10% or more, and if the organization Explain in Part IV how the organization						
							Publicly
18	supported organization Private foundation. If the organization						and see
	_						
	instructions						<u> </u>

Schedule A (Form 990 or 990-EZ) 2010 13-3541913 Page **3**

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	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 \$5,000 or 1% of the amount on line 13						
	for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	s a section 501	(c)(3)
	organization, check this box and stop here						▶
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2010 (line 8	, column (f) divide	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2009 Sche			<u> </u>		16	%
Sec	tion D. Computation of Investmer					1	
17	Investment income percentage for 2010 (lin					17	%
18	Investment income percentage from 2009					18	%
19a	331/3% support tests - 2010. If the org	ganization did ne	ot check the box	x on line 14, and	d line 15 is mor	e than 331/3%,	and line
	17 is not more than 331/3%, check th	is box and sto	here . The org	anization qualifies	s as a publicly	supported organ	ization
b	331/3% support tests - 2009. If the orga	inization did not	check a box on	line 14 or line 19	a, and line 16 is	more than 331/	3 %, and
	line 18 is not more than 331/3 %, check	this box and st	top here. The or	ganization qualifi	es as a publicly	supported organ	ization 🕨 🔣
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this bo	x and see insti	ructions >

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Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See

					ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCOM	ИE				
DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
SPECIAL EVENTS	0.	0.	1,564,031.	521,680.	963,826.	3,049,537.
REGISTRATION FEES	0.	0.	0.	23,056.	827,895.	850,951.
LICENSING FEES	0.	0.	0.	1,813,000.	1,813,000.	3,626,000.
MISCELLANEOUS	111,371.	131,067.	202,025.	5,483.	655,102.	1,105,048.
BOOK/MERCHANDISE SALES	0.	0.	0.	0.	65,889.	65,889.
TOTALS	111,371.	131,067.	1,766,056.	2,363,219.	4,325,712.	8,697,425.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of the organization **Employer identification number** TEACH FOR AMERICA, INC. 13-3541913 Organization type (check one): Filers of: Section: Х 501(c)(3Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** X For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \blacktriangleright \$ _ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

JSA

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization TEACH FOR AMERICA, INC.

Employer identification number 13-3541913

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1 _		\$5,164,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2_		\$4,995,362.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$5,374,560.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	(b) Name, address, and ZIP + 4	(c) Aggregate contributions \$25,000,000.	(d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
No.	Name, address, and ZIP + 4	\$25,000,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
No4	Name, address, and ZIP + 4	\$25,000,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
No. 4	Name, address, and ZIP + 4	\$25,000,000. (c) Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

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

OMB No. 1545-0047

2010

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Department of the Treasury Internal Revenue Service

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) org	panizations: Complete Part III.	,	, , ,	
Nam	e of organization	·		Employer identif	fication number
	ACH FOR AMERICA, INC			13-35	
Pa	rt I-A Complete if the o	rganization is exempt under s	section 501(c) or is	s a section 527 organ	ization.
1	Provide a description of the candidates for public office	organization's direct and indirect p in Part IV.	olitical campaign ac	ctivities on behalf of or in	n opposition to
2	Political expenditures			▶\$	
3					
		rganization is exempt under so			
1		cise tax incurred by the organization			
2		cise tax incurred by organization ma			
3		a section 4955 tax, did it file Form			
4a b	Was a correction made? If "Yes," describe in Part IV.				L Yes No
		organization is exempt under s	section 501(c), ex	cept section 501(c)(3)).
1		xpended by the filing organization f			,
	activities			 	
2	Enter the amount of the filin	g organization's funds contributed t	o other organizatior	ns for section	
	527 exempt function activiti	es		▶ \$	
3	Total exempt function expe	enditures. Add lines 1 and 2. Ente	r here and on Forn	n 1120-POL,	
	line 17b			▶ \$	
5	Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year?	per (EIN) of all sect or the amount paid otly and directly deli	tion 527 political organ from the filing organiza vered to a separate poli	izations to which filing ation's funds. Also enter itical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

Р	art II-A	Complete if the o	rganizati	on is exen	npt under section	n 501(c)(3) and	filed Form 5768 (ele	ection under
A	Check ▶	if the filing ord	anization	belonas to	an affiliated grou	D.		
В	Check >				oox A and "limited		ons apply.	
_	<u> </u>		•	ying Expen		•	(a) Filing	(b) Affiliated
					nts paid or incurred	.)	organization's totals	group totals
1 a	Total lob	bying expenditures t	o influence	public opin	ion (grass roots lob	bying)		
b	Total lob	bying expenditures t	o influence	a legislative	e body (direct lobby	ing)		
С	Total lob	obying expenditures (add lines 1	a and 1b)				
d		xempt purpose exper						
е		empt purpose expend						
f	Lobbyin	g nontaxable amount	. Enter the	amount fro	m the following table	e in both		
	columns	3.						
	If the am	ount on line 1e, column	(a) or (b) is:	The lobbying	ng nontaxable amount	is:		
	Not over	\$500,000		20% of the	amount on line 1e.			
	Over \$50	0,000 but not over \$1,0	000,000	\$100,000 pl	us 15% of the excess	over \$500,000.		
	Over \$1,0	000,000 but not over \$1	,500,000	\$175,000 pl	us 10% of the excess	over \$1,000,000.		
	Over \$1,	500,000 but not over \$1	7,000,000	\$225,000 pl	us 5% of the excess of	over \$1,500,000.		
	Over \$17	7,000,000		\$1,000,000				
g	Grassro	ots nontaxable amou	nt (enter 25	% of line 1f)			
h	Subtrac	t line 1g from line 1a.	If zero or le	ess, enter -0				
i	Subtrac	t line 1f from line 1c.	If zero or le	ss, enter -0-				
j	If there i	is an amount other th	an zero on	either line	1h or line 1i, did the	organization file	Form 4720 reporting	
	section 4	4911 tax for this year	?				<u> </u>	Yes
			ations that lumns belo	made a seew. See the	instructions for lin	on do not have t nes 2a through 2		ve
			Lobi	ying Expe	nditures During 4-Y	ear Averaging Pe	eriod	I
		year (or fiscal year eginning in)	(a) 2	007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2 a	Lobbying	nontaxable amount						
b	Lobbying	ceiling amount						
	(150% of	line 2a, column (e))						
С	Total lobb	ying expenditures						
d	Grassroot	s nontaxable amount						
е		s ceiling amount line 2d, column (e))						
f	Grassroot	s lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). Part II-B

		(6	a)		(b)	
		Yes	No		Amount	
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? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
b	•	X				
c d	Media advertisements? Mailings to members, legislators, or the public?		Х			
e	Dublications or published or broadcast statements?		X			
f	Grants to other organizations for lobbying purposes?		Х			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х			548	437
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i	Other activities? If "Yes," describe in Part IV		Х			
j	Total. Add lines 1c through 1i				548	437
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			
b	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	ors	ection		
. ~	501(c)(6).	(0)(0)	, 0	COLIOII		
					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	
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501				1	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes."	, iine	3 IS a	inswere	∌a	
1	Dues, assessments and similar amounts from members			1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of			•		
_	expenses for which the section 527(f) tax was paid).	P • · · · · · ·				
а	Current year			2a		
b	Carryover from last year			2b		
С	Total			2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es .		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible I	obbyir	ng			
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			5		
	rt IV Supplemental Information			3		
Con	pplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, complete this part for any additional information.	, line	5; an	Part II-	B, line 1	i.

Schedule C (Form 990 or 990-EZ) 2010

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Part IV Supplemental Information (continued)

LOBBYING ACTIVITIES CONDUCTED BY THE ORGANIZATION

SCHEDULE C, PART II-B

Schedule C (Form 990 or 990-EZ) 2010

POLITICAL AND LOBBYING

ON A STATE LEVEL, LOCAL ADVISORY BOARD MEMBERS, PAID STAFF OR MANAGEMENT HAD DIRECT CONTACT WITH STATE LEGISLATORS, THEIR STAFFS AND MEMBERS OF STATE EXECUTIVE BRANCH AGENCIES IN SUPPORT OF STATE APPROPRIATIONS FOR TEACH FOR AMERICA'S IN-STATE OPERATIONS THROUGH REGULAR STATE BUDGET PROCESSES. IN ADDITION, REGIONAL STAFF ALSO WORKED FOR THE PASSAGE OF VARIOUS PIECES OF LEGISLATION WHICH WOULD IMPACT TEACH FOR AMERICA'S ABILITY TO OPERATE IN A GIVEN COMMUNITY INCLUDING THE PASSAGE OF ALTERNATIVE CERTIFICATION LEGISLATION, LEGISLATION PERMITTING TEACH FOR AMERICA TO BE RECOGNIZED BY THE STATE AS AN ALTERNATIVE PATHWAY TO TEACHER LICENSURE AND EXPANSION OF CHARTER SCHOOLS.

AT THE FEDERAL LEVEL TEACH FOR AMERICA STAFF INTERFACED WITH MEMBERS OF CONGRESS, AS WELL AS PERSONAL AND COMMITTEE STAFF, IN SUPPORT OF ADEQUATE FEDERAL FUNDING FOR TEACH FOR AMERICA AND THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE. IN ADDITION, TEACH FOR AMERICA LOBBIED FOR SPECIFIC LEGISLATIVE PROVISIONS BENEFICIAL TO IT BOTH WITHIN AND OUTSIDE THE CONTEXT OF THE REAUTHORIZATION OF THE ELEMENTARY AND SECONDARY EDUCATION ACT (ESEA).

ALL AMOUNTS PAID BY TEACH FOR AMERICA AS LOBBYING EXPENDITURES IN LINE 1(G) HAVE BEEN REPORTED IN PART IX AS COMPENSATION EXPENSES AND NO AMOUNT HAS BEEN REPORTED ON PART IX, LINE 11(D).

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Cumplement identification u

	e of the organization	Employer identification number
	ACH FOR AMERICA, INC.	13-3541913
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or organization answered "Yes" to Form 990, Part IV, line 6.	r Accounts. Complete if the
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in d	onor advised
	funds are the organization's property, subject to the organization's exclusive legal control? •	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	
•	used only for charitable purposes and not for the benefit of the donor or donor advisor, or fo	
	purpose conferring impermissible private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to F	orm 990 Part IV line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		of an historically important land area
		of a certified historic structure
	Preservation of open space	or a certified flistoric structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a consequation
_	easement on the last day of the tax year.	Title form of a conservation
	addition the last day of the tax year.	Held at the End of the Tax Year
_	Total number of conservation easements	2a
a b	Total acreage restricted by conservation easements	
C	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
u	historic structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terming	
•	tax year >	ated by the organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, have	
3	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation eas	
•		sements during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme	ents during the year
•	►\$	g a year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)
	(i) and 170(h)(4)(B)(ii)?	` ' ' ' '
9	In Part XIV, describe how the organization reports conservation easements in its revenue ar	
-	balance sheet, and include, if applicable, the text of the footnote to the organization's finance	
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, edu	revenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, edu public service, provide, in Part XIV, the text of the footnote to its financial statements that de	ucation, or research in furtherance of
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its i	
b	works of art, historical treasures, or other similar assets held for public exhibition, edu	
	public service, provide the following amounts relating to these items:	, , , , , , , , , , , , , , , , , , , ,
	(i) Revenues included in Form 990, Part VIII, line 1	 ▶ \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these item	<u> </u>
а	Revenues included in Form 990, Part VIII, line 1	
<u>b</u>	Assets included in Form 990, Part X	

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 13-3541913 Page **2**

Par	t Organizations Maintain	ing Collecti	ons of Art, I	Historical	Treasures	s, or	Other Similar A	ssets (d	continued)	
3	Using the organization's acquisition collection items (check all that app		n, and other	records, c	heck any of	f the	following that a	re a sigi	nificant use	of its
а	Public exhibition		d		Loan or exc	chang	ge programs			
b	Scholarly research		е		Other					
c	Preservation for future ge	enerations								
4	Provide a description of the orga		llections and	explain ho	ow they fur	ther	the organization's	s exemp	t purpose in	Part
-	XIV.			- · · · · · · · · · · · · · · · · · · ·						
5		on solicit or r	eceive donati	ons of art	historical tre	easur	es or other simil:	ar		
·	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? • • • • • • • • • • • • • • • • • • •									
Dar	t IV Escrow and Custodial A									140
T at	line 9, or reported an ar						wered res to i			
1a	Is the organization an agent, truste	e custodian	or other inter	mediary fo	r contributio	ons o	r other assets no	t		
·u	included on Form 990, Part X?			-				_	Yes	No
b	If "Yes," explain the arrangement in							[165	
b	ii res, explain the arrangement ii	Trait Aiv aii	a complete ti	ie ioliowiii	j labie.		Λ.	mount		
_	Paginning halance					4 -	A	inount		
C	Beginning balance					1c				
a	Additions during the year					1 d				
e	Distributions during the year					1e				
Ť	Ending balance					1f			1	
	Did the organization include an an		m 990, Part X	i, line 21?				L	Yes	No
	If "Yes," explain the arrangement in									
Par	t V Endowment Funds. Cor		_							
		(a) Current	year (b) F	Prior year	(c) Two yea	ars bac	ck (d) Three year	ars back	(e) Four years	s back
1a	Beginning of year balance	91,697,	407. 57	,789,507.	36,9	73,03	3.			
b	Contributions	27,066,	562. 30	,324,929.	20,0	00,01	0.			
С	Net investment earnings, gains,									
	and losses	-1,269,	958. 2	,155,906.	1,4	61,32	9.			
d	Grants or scholarships									
е	Other expenditures for facilities .									
	and programs		-1	,427,065.	6-	44,86	5.			
f	Administrative expenses									
g	End of year balance	117,494,	011. 91	,697,407.	57,78	89,50	7.			
2	Provide the estimated percentage	of the year e	nd balance he	eld as:	•		<u>'</u>			
а	Board designated or quasi-endowr	ment ▶ 31	7.6600%							
b	Permanent endowment ► 58.									
С	Term endowment ► 3.4800									
	Are there endowment funds not in	the possess	ion of the org	anization t	hat are held	d and	administered for	the		
	organization by:	·							Yes	No
	(i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
b	If "Yes" to 3a(ii), are the related or								3b	†
4	Describe in Part XIV the intended	=	-							
	t VI Land, Buildings, and Eq									
	Description of investment		a) Cost or other b (investment)		Cost or other ba	sis	(c) Accumulated depreciation	(0	d) Book value	
1a	Land									
b	Buildings					-				
	•			1	4,665,15	58	7,863,388.		6,801,	770
C C	Leasehold improvements				7,816,34	_	27,997,273.	•	29,819,	
d	Equipment				$\frac{7,010,3}{5,535,92}$	_	2,873,339.	•	2,662,	
Tata	Other		ual Farm 000					•		
iota	I. Add lines 1a through 1e. (Column	ı (u) must eq	uai F0im 990,	ran X, CO	uitili (B), ilh	e 10(<i>∪).)</i> ▶		39,283,	

Schedule D (Form 990) 2010

13-3541913 Schedule D (Form 990) 2010 Page 3

Part VII Investments - Other Securities. S	ee Form 990, Part X, Iin	e 12.	201
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) LIMITED PARTNERSHIPS	64,321,828.	. FMV	
(B)			
(C)			
(D)		<u> </u>	
(E)			
(F)			
<u>(G)</u> (H)			
(l)		+	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	▶ 64,321,828		
Part VIII Investments - Program Related. S			
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	•		
Part IX Other Assets. See Form 990, Par	•		
Care record coor on coo, ran	(a) Description		(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. See Form 990, F			
1. (a) Description of liability	(b) Amount		
(1) Federal income taxes	(0) 1		
(2) DEFERRED RENT PAYABLE	1,722,	162.	
(3) DUE TO AFFILIATE - LEE	30,	467.	
(4)			
(5)			
(6)			
_(7)			
(8)			
(9)			
_(10)			
(11)		500	
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 25.) ▶ 1,752,	629.	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

JSA 0E1270 1.000 6294AP 700J Schedule D (Form 990) 2010 V 10-8.3 0174202-00008

13-3541913 Schedule D (Form 990) 2010 Page 4

Part 2	Reconciliation of Change in Net Assets from Form 990 to Audit	tad Fi	nancial Staten	nant		1 age 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	Ĭ	270,472,850.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		218,697,225.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		51,775,625.
4	Net unrealized gains (losses) on investments			4		-931,957.
5	Donated services and use of facilities			5		
6	Donated services and use of facilities			6		
7	Investment expenses			7		
8	Prior period adjustments Other (Describe in Part XIV.)			8		
9	Other (Describe in Part XIV.) Total adjustments (net). Add lines 4 through 8			9		-931,957.
10	Excess or (deficit) for the year per audited financial statements. Combine lines			10		50,843,668.
Part						
1	Total revenue, gains, and other support per audited financial statements		•		1	269,362,767.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			• • -	•	
– a	Net unrealized gains on investments	2a	-931,95	57.		
b	Donated services and use of facilities	2b	262,60			
C	Recoveries of prior year grants	2c	. ,	H		
d	Other (Describe in Part XIV.)	2d		\dashv		
e	Add lines 2a through 2d				2e	-669,351.
3	Subtract line 2e from line 1			-	3	270,032,118.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			· •		<u> </u>
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	440,73	32.		
b	Other (Describe in Part XIV.)	4b	•			
	Add lines 4a and 4b				4c	440,732.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			: : -	5	270,472,850.
	Reconciliation of Expenses per Audited Financial Statements W				-	<u> </u>
1	Total expanses and leaves per guidted financial statements				1	218,519,099.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			• •		
а	Donated services and use of facilities	2a	262,60	6.		
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d				2e	262,606.
3	Subtract line 2e from line 1	 			3	218,256,493.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	440,73	32.		
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b				4 c	440,732.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).				5	218,697,225.
Part :	XIV Supplemental Information					
Part V, any ad	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines ditional information. PAGE 5					

Schedule D (Form 990) 2010 13-3541913

Part XIV Supplemental Information (continued)

INTENDED USES OF ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

TEACH FOR AMERICA'S ENDOWMENT IS INTENDED TO PROVIDE A CONTINUOUS SOURCE OF FUNDING TO SUPPORT THE INSTITUTION'S PRIMARY EDUCATIONAL AND SOCIAL MISSION. THE ENDOWMENT'S PRINCIPAL IS INTENDED TO BE LEFT UNTOUCHED, WHILE ITS EARNINGS ARE USED TO FUND VARIOUS ORGANIZATIONAL PROGRAMS (AND GRANTS).

FIN 48 DISCLOSURE

INCOME TAXES

TFA FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX
POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES
RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS
STANDARD PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN
BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS ONLY IF THE
POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE
TO BE CHALLENGED BY A TAXING AUTHORITY. THE STANDARD ALSO PROVIDES
GUIDANCE ON MEASUREMENT, CLASSIFICATION, INTEREST AND PENALTIES, AND
DISCLOSURE AND, HAD NO MATERIAL IMPACT ON THE ACCOMPANYING CONSOLIDATED
FINANCIAL STATEMENTS. THE TAX YEARS ENDED 2008, 2009, AND 2010 ARE STILL
OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. TFA HAS PROCESSES
PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS;
IDENTIFY AND REPORT UNRELATED INCOME; DETERMINE ITS FILING AND TAX
OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND IDENTIFY AND
EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS.

Schedule D (Form 990) 2010

Page 5

13-3541913 Schedule D (Form 990) 2010

Part XIV Supplemental Information (continued)

SCHEDULE D, PART XI RECONCILIATION

TEACH FOR AMERICA FILES A CONSOLIDATED AUDITED FINANCIAL STATEMENT WITH ITS AFFILIATE, LEADERSHIP FOR EDUCATIONAL EQUITY. THE RECONCILIATION IN PART XI OF SCHEDULE D RECONCILES BACK TO TEACH FOR AMERICA'S FINANCIAL INFORMATION AS PRESENTED IN AUDITED FINANCIAL STATEMENTS AND NOT TO THE CONSOLIDATED NUMBERS (INCLUSIVE OF TEACH FOR ALL AND LEADERSHIP).

TEACH FOR AMERICA'S CHANGE IN NET ASSETS FOR THE YEAR IS \$50,843,668.

Page 5

0E1226 1.000 6294AP 700J V 10-8.3 0174202-00008

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 **Open to Public**

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Inspection Employer identification number

13-3541913 TEACH FOR AMERICA, INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

	assistance, the grantees' eligibili grants or assistance?	ty for the gran	ts or assistance	e, and the selection criter	ia used to award the	X Yes No
	For grantmakers. Describe in Pa United States.	art V the orgar	nization's proce	edures for monitoring the	use of grant funds outside	de the
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	pace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	EAST ASIA AND THE PACIFIC			GRANTMAKING		12,500.
(2)	EUROPE			GRANTMAKING		12,500.
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total					25,000.
b	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)					25,000.

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

Schedule F (Form 990) 2010

13-3541913 Schedule F (Form 990) 2010 Page 2

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			EAST ASIA/PACIFIC	GENERAL SUPP	12,500.				
(2)			EUROPE/ICELAND/GREENLAND	GENERAL SUPP	12,500.				
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
10)									
1)									
12)									
13)									
14)									
15)									
16)									

Schedule F (Form 990) 2010 13-3541913 Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
_(1)							
_(2)							
_(3)							
_ (4)							
_ (5)							
(6)							
(7)							
_(8)							
_(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

V 10-8.3

Schedule F (Form 990) 2010 Page 4

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	X Yes	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2010

13-3541913 13-3541913 Schedule F (Form 990) 2010 Page 5

Part V **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FORM 990, SCHEDULE F, PART IV

FORM 990, SCHEDULE F, PART IV, LINES 1, 4 & 5

TEACH FOR AMERICA INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, TEACH FOR AMERICA'S INVESTMENT IN THESE PARTNERSHIPS DOES NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 8621 OR 8865.

JSA 0E1502 1.000

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization	Attach to Folin 330 of F		, 500 501	diate instructions.	Employer identification	on number
TEACH FOR AMERICA, INC.					13-354191	
- ATM -	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.					
FOITH 990-EZ IIIEIS AIE HOLT						
1 Indicate whether the organization rais	sed funds through a		_			
a Mail solicitations	е			non-government g		
b Internet and email solicitations	f		-	government grant	S	
c Phone solicitations	g	Spec	cial fundra	ising events		
d In-person solicitations						
2a Did the organization have a written or or key employees listed in Form 990,						Yes No
b If "Yes," list the ten highest paid indiv compensated at least \$5,000 by the or		undraiser	s) pursuar	nt to agreements	under which the fun	draiser is to be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total			▶			
3 List all states in which the organizat registration or licensing.	ion is registered o	r licensed	I to solicit	contributions or	has been notified	it is exempt from

Pa	rt I	Fundraising Events. Complete than \$15,000 of fundraising ever gross receipts greater than \$5,0	nt contributions and gros			
			(a) Event #1 NY 2011 GALA (event type)	(b) Event #2 BAY 2011 GALA (event type)	(c) Other Events 11.	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	1,241,700.	793,550.	2,410,844.	4,446,094
Rè		Less: Charitable contributions	1,156,860.	738,990.	1,586,418.	3,482,268
	3	Gross income (line 1 minus line 2)	84,840.	54,560.	824,426.	963,826
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	0.	682.	347,980.	348,662
	7	Food and beverages	235,593.	67,638.	154,766.	457,997
Direct	8	Entertainment			3 , 769.	3,769
	9	Other direct expenses	43,513.	18,379.	193,764.	255 , 656
Pa	11		3, column (d), and line 1	0	<u></u>	1,066,084.) -102,258
		than \$15,000 on Form 990-	EZ, line 6a.	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c))
<u>~</u>	1	Gross revenue				
xpenses	2	Cash prizes				
t Expe	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses	Yes %	Yes %	Yes%	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)	▶	()
_		Net gaming income summary. Comb				
9 a	ı İs	nter the state(s) in which the organizate the organization licensed to operate of "No," explain:	gaming activities in each	of these states?		. Yes No
		/ere any of the organization's gaming "Yes," explain:	licenses revoked, suspe			. Yes No

Schedule G (Form 990 or 990-EZ) 2010

Sched	ule G (Form 990 or 990-EZ) 2010
11	Does the organization operate gaming activities with nonmembers? Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
_	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
_	amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:
C	in res, enter name and address of the third party.
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2010

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

2010

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number Name of the organization TEACH FOR AMERICA, INC. 13-3541913 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part (f) Method of valuation (d) Amount of cash grant (e) Amount of non-cash (a) Name and address of organization (b) EIN (c) IRC section (h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance or assistance assistance (1) LEADERSHIP FOR EDUCATIONAL EQUITY 20-8848357 501(C)(4) 315 WEST 36TH STREET NEW YORK, NY 10018 563,927. (2) THE PRODIGAL SON INITIATIVE 20-2663715 501(C)(3) 5405 E. 33RD AVENUE DENVER, CO 80207 9,000. GENERAL SUPPORT (3) KIPP DELTA PUBLIC SCHOOLS 415 OHIO STREET HELENA, AR 72342 31-1807400 501(C)(3) 60,000. GENERAL SUPPORT (10)2 Enter total number of section 501(c)(3) and government organizations

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

Schedule I (Form 990) (2010)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 CM TRANSITIONAL GRANTS	2,225.	3,664,929.			
2 CM COURSEWORK GRANTS	581.	89,295.			
3 20TH ANNIVERSARY FINANCIAL AID	2,230.	539,376.			
4					
_ 5					
6					
7					

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

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS IN THE U.S.

SCHEDULE I, LINE 2

TEACH FOR AMERICA PROVIDES GRANTS AND/OR FINANCIAL AID TO CORPS MEMBERS WHO ARE ATTENDING THE CURRENT YEAR'S INSTITUTE. OUR ORGANIZATION MAINTAINS A LISTING OF THE INDIVIDUALS THAT BENEFIT FROM THE GRANT, WITH ALL REQUIRED INFORMATION (E.G. FULL NAME, SOCIAL SECURITY NUMBER AND ADDRESS). GRANTS ARE ISSUED BASED ON THE FINANCIAL NEED OF THE RECIPIENT AND MAY BE USED FOR ANY PURPOSE. TEACH FOR AMERICA DOES NOT RESTRICT THE USAGE OF THE GRANTS AND THEREFORE DOES NOT REQUIRE THE GRANTEE TO PROVIDE A REPORT OF HOW THE FUNDS ARE USED.

SCHEDULE J (Form 990)

Compensation Information

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

▶ Complete if the organization area 22

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 **Open to Public**

Department of the Treasury Internal Revenue Service Name of the organization

TEACH FOR AMERICA, INC.

Inspection Employer identification number

13-3541913

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
L	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
D	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
_				
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
			v	
_	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	X	v
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only costion E04(a)(2) and E04(a)(4) arganizations must complete lines E.O.			
5	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Э	compensation contingent on the revenues of:			
•	•	5a		Х
a b		5b		X
b	Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	35		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Ū	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
-	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
-	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2010

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

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

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

-		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)	364,062.	0.	0.	16,400.	13,174.	393,636.	0.
1 WENDY KOPP	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	298,496.	0.	0.	16,496.	13,157.	328,149.	0.
2 MATTHEW KRAMER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	161 , 131.	0.	0.	8 , 782.	4,549.	174,462.	0.
3 TRACY-ELIZABETH CLAY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	156 , 908.	0.	0.	8 , 578.	13,043.	178,529.	0.
4 OSMAN KURTULUS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	215,106.	0.	36,394.	0.	9,107.	260,607.	0.
5 MIGUEL ROSSY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	208,391.	0.	0.	11,878.	13,100.	233,369.	0.
6 ELISA V BEARD	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	199 , 049.	0.	32,262.	11,001.	4,385.	246,697.	0.
7 ELISSA CLAPP	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	210 , 758.	0.	0.	11,443.	13,104.	235,305.	0.
8 JEFFREY WETZLER	(ii)	0.	0.	0.	0.	0.	0.	<u> </u>
	(i)	199,638.	0.	0.	10,566.	4,607.	214,811.	0.
9 ELLEN N SHEPARD	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	226 , 698.	0.	0.	5,044.	11,588.	243,330.	0.
10 KEVIN HUFFMAN	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	198,818.	0.	15,690.	11,228.	13,100.	238,836.	0.
11 GILLIAN C SMITH	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	187,210.	0.	17,743.	10,992.	13,077.	229,022.	0.
12 AIMEE EUBANKS DAVIS	(ii)	0.	0.	0.	0.	0.	0.	<u></u>
	(i)	108,482.	0.	63,424.	0.	6 , 555.	178,461.	0.
13 LILY RAGER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	151 , 359.	0.	96,023.	0.	6,128.	253,510.	0.
14 AYLON SAMOUHA	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	202,253.	0.	24,322.	0.	4,414.	230,989.	0.
15 ERIC SCROGGINS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	166,813.		0.	8,763.	4,354.	179,930.	0.
16 THEORDORE QUINN	(ii)	0.	0.	0.	0.	0.	0.	0.

Part | 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.

SCHEDULE J & PART VII COMPENSATION

SOME OF THE OFFICERS REPORTED ON THE TEACH FOR AMERICA FORM 990, WENDY KOPP AND TRACY-ELIZABETH CLAY ALLOCATE A PORTION OF THEIR COMPENSATION TO AN AFFILIATED ORGANIZATION, TEACH FOR ALL. ON PART VII AND SCHEDULE J, ALL COMPENSATION IS BEING REPORTED AS HAVING BEEN PAID BY TEACH FOR AMERICA (AS THAT ORGANIZATION PROVIDED THE OFFICER HER W-2); HOWEVER, A PORTION OF EACH OFFICER'S COMPENSATION IS ALLOCATED TO TEACH FOR ALL BASED ON SERVICES RENDERED TO THAT ORGANIZATION. IN THE INTERESTS OF CLARITY, TEACH FOR AMERICA IS DISCLOSING THE FOLLOWING SALARY AND BENEFITS AMOUNTS AS HAVING BEEN ALLOCATED TO TEACH FOR ALL:

	SALARY	BENEFITS
WENDY KOPP	\$85,247	\$16,197
TRACY-ELIZABETH CLAY	\$35 , 982	\$6 , 837

SCHEDULE J, PART I, LINE 1

SEVERAL INDIVIDUALS REPORTED ON PART VII AND SCHEDULE J OF THE FORM 990

RECEIVED REIMBURSEMENT FOR COMMUTING EXPENSES INCURRED; THESE AMOUNTS

HAVE BEEN TREATED AS TAXABLE WAGES AND INCLUDED IN EACH INDIVIDUAL'S

Schedule J (Form 990) 2010 13-3541913 Page **3**

Part | 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.

FORMS W-2. THE AMOUNTS HAVE BEEN REPORTED ON SCHEDULE J, PART II, COLUMN

(B) (III). THESE INDIVIDUALS ARE AS FOLLOWS:

ERIC SCROGGINS

GILLIAN SMITH

AIMEE EUBANKS DAVIS

ELISSA CLAPP

MIGUEL ROSSY

ADDITIONALLY, ONE INDIVIDUAL, ELISSA CLAPP, RECEIVED A HOUSING ALLOWANCE

THAT HAS BEEN TREATED AS TAXABLE WAGES AND REPORTED IN HER FORM W-2. THIS

AMOUNT HAS BEEN REPORTED IN SCHEDULE J, PART II, COLUMN (B) (3).

SCHEDULE J, PART I, LINE 4A

CHIEF DEVELOPMENT OFFICER, LILY RAGER, AND SVP, TEACHER PREPARATION,
SUPPORT, AND DEVELOPMENT, AYLON SAMOUOHA, RECEIVED A SEVERANCE PAYMENT OF
\$63,424 AND \$96,023 RESPECTIVELY FROM TEACH OF AMERICA. THESE AMOUNTS

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.

HAVE BEEN REPORTED IN FORM 990, SCHEDULE J, PART II, COLUMN (B) (III).

Schedule J (Form 990) 2010

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

2010

Open To Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

TEACH FOR AMERICA, INC.

13-3541913

Par	t Types of Property			<u> </u>				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
1	Art - Works of art							
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							
11	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			0.5 600				
19	Food inventory	Х		35,629.	COST			
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts		3.	4 456 122				
25	Other ►(_ATCH_1)		٥.	4,456,122.				
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received		•		29			
	which the organization completed F	-orm 8283,	Part IV, Donee Acknowledg	jement	29		Yes	No
30 a	During the year, did the organiza	tion receive	by contribution any prope	erty reported in Part I lin	e 1-28 that		163	140
	it must hold for at least three yea			-				
	used for exempt purposes for the e					30a		Х
b	If "Yes," describe the arrangement i	n Part II.	, , , , , , , , , , , , , , , , , , , ,			Ju		
31	Does the organization have a		ance policy that require	s the review of any r	on-standard			
•	contributions?					31	Х	
32 a	Does the organization hire or use	third parti	es or related organization	s to solicit, process, or s	sell noncash	•		
-	contributions?	•	•	•		32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization did not report ar	amount in	column (c) for a type of pro	perty for which column (a) is checked,			
	describe in Part II.		()	, ,	, ,			
For F	Paperwork Reduction Act Notice, see th	ne Instruction	s for Form 990.		Schedule	M (For	n 990)	(2010)

Schedule M (Form 990) (2010) 13-3541913 Page 2

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.

USE OF THIRD PARTY TO SOLICIT, PROCESS, OR SELL NON-CASH CONTRIBUTIONS

SCHEDULE M, PART I, LINE 32A

THE OPCANIZATION ENCACES THE SERVICES OF INVESTMENT COMPANIES TO HOLD.

THE ORGANIZATION ENGAGES THE SERVICES OF INVESTMENT COMPANIES TO HOLD STOCK AND BOND DONATIONS FROM CONTRIBUTORS. THE INVESTMENT COMPANIES THEN SELL THE INVESTMENTS ON THE ORGANIZATION'S BEHALF.

Schedule M (Form 990) (2010)

0E1508 1.000

Schedule M (Form 990) (2010) 13-3541913 Page **2**

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.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
SUPPLIES	x	1.	72,529.	COST/SELLING PRICE
COMPUTER EQUIPMENT	Х	1.	4,383,045.	COST/SELLING PRICE
OTHER	Х	1.	548.	COST/SELLING PRICE
TOTALS	_	3.	4,456,122.	

JSA Schedule M (Form 990) (2010)

6294AP 700J

0E1508 1.000

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number 13-3541913

DOCUMENTATION OF MEETINGS HELD BY COMMITTEES

FORM 990 PART VI, SECTION A, LINE 8B

ALL OF THE MEETINGS OF THE FINANCE AND/OR AUDIT COMMITTEES OF THE BOARD WERE DOCUMENTED THROUGH MINUTES AND THE MAJORITY OF THE OTHER 7

COMMITTEES WERE SIMILARLY DOCUMENTED BUT NOT ALL. THE ORGANIZATION IS

IMPLEMENTING A NEW MANAGEMENT PROCESS TO ENSURE SUCH DOCUMENTATION IS

COLLECTED CONSISTENTLY THROUGHOUT THE YEAR.

POLICIES

FORM 990 PART VI

LINE 11 - TEACH FOR AMERICA'S FORM 990 WAS PREPARED BY AN INDEPENDENT CERTIFIED ACCOUNTANT. A DRAFT OF THE 990 WAS PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. ONCE ALL QUESTIONS AND COMMENTS FROM THE AUDIT COMMITTEE WERE ADDRESSED, A FINAL VERSION OF THE DRAFT 990 FORM WAS MADE AVAILABLE TO THE ENTIRE BOARD PRIOR TO FILING VIA A SECURE LINK IN AN EMAIL.

LINE 12 - TEACH FOR AMERICA'S CONFLICTS POLICY COVERS THE ACTIVITIES OF OFFICERS, DIRECTORS AND KEY EMPLOYEES. EACH YEAR, COVERED PERSONS ARE REQUIRED TO SIGN A DISCLOSURE STATEMENT INDICATING THEIR ACKNOWLEDGEMENT OF THE CONFLICTS POLICY AND TO DISCLOSE RELATIONSHIPS THAT MIGHT GIVE RISE TO A CONFLICT. IN THE EVENT THAT A POTENTIAL CONFLICT OF INTEREST ARISES REGARDING A COVERED PERSON, THAT INDIVIDUAL IS REQUIRED TO IMMEDIATELY DISCLOSE THE EXISTENCE OF SUCH CONFLICT TO THE CHAIRPERSON OF

THE BOARD OR THE BOARD ITSELF (IN CASES INVOLVING AN OFFICER OR THE CHAIR). DETERMINATIONS REGARDING THE POLICY AND ITS APPLICATION ARE MADE BY THE CHAIR OR, IN CASES INVOLVING THE CHAIR, THE EXECUTIVE COMMITTEE ACTING ON BEHALF OF THE BOARD IN ACCORDANCE WITH ITS CHARTER.

LINE 15 - 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 PRESIDENT AND CFO RECOMMEND BASELINE ADJUSTMENTS TO THE FINANCE COMMITTEE, 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 ABOVE AVERAGE RELATIVE TO THE NON-PROFIT ORGANIZATIONS BUT NOT AT THE TOP OF THE MARKET, 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

Employer identification number 13-3541913

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.

DISCLOSURE

FORM 990 PART VI

LINE 19 - TEACH FOR AMERICA, INC. MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS. THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.ORG AND AT WWW.TEACHFORAMERICA.ORG. TEACH FOR AMERICA ALSO PUBLISHES ITS FINANCIAL STATEMENTS ON ITS WEBSITE. THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION.

FORM 990, PART VII

CHIEF EXECUTIVE OFFICER, WENDY KOPP, AND SECRETARY, TRACY-ELIZABETH CLAY, PROVIDE SERVICES TO A RELATED PARTY, TEACH FOR ALL. MS. KOPP AND MS. CLAY ALLOCATE APPROXIMATELY 25% OF THEIR TIME TO TEACH FOR ALL.

ORGANIZATION'S PRACTICES FOR OVERSIGHT OF FINANCIAL STATEMENT AUDIT FORM 990, PART XI

THE ORGANIZATION'S GOVERNING BODY HAS A COMMITTEE CHARGED WITH OVERSIGHT

Employer identification number

13-3541913

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.

OTHER PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4D

ALUMNI AFFAIRS

TFA 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 INCREASED ITS BUDGET FOR ALUMNI AFFAIRS IN FISCAL 2011.

PUBLICATIONS LICENSING FEES

REVENUE FROM PUBLICATIONS OF OUR FINDINGS, APPROACHES, AND CURRICULA RELATED TO TEACHER EDUCATION AND EFFECTIVENESS. THESE PUBLICATIONS ARE BASED ON YEARS OF EXPERIENCES OF CORPS MEMBERS, ALUMNI, AND ORGANIZATIONAL STAFF IN WORKING IN CLASSROOMS AND SCHOOLS IN LOW-INCOME COMMUNITIES.

FORM 990, PART XI, LINE 5 RECONCILIATION UNREALIZED GAINS ON INVESTMENTS -931,957

Name of the organization TEACH FOR AMERICA, INC.

Employer identification number 13-3541913

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

PRE-SERVICE INSTITUTE

FOR INCOMING CORPS MEMBERS, TFA CONDUCTS INTENSIVE SUMMER TRAINING INSTITUTES HELD ON UNIVERSITY CAMPUSES AND IN CONJUNCTION WITH LOCAL PUBLIC SCHOOL DISTRICTS. IN 2011, APPROXIMATELY 5,400 CORPS MEMBERS WERE TRAINED AT ONE OF OUR EIGHT INSTITUTE CAMPUSES: ARIZONA STATE UNIVERSITY, UNIVERSITY OF HOUSTON, TEMPLE UNIVERSITY, LOYOLA MARYMOUNT UNIVERSITY, ST. JOHN'S UNIVERSITY, GEORGIA INSTITUTE OF TECHNOLOGY, ILLINOIS INSTITUTE OF TECHNOLOGY AND DELTA STATE UNIVERSITY. AS A PART OF TFA'S ONGOING RELATIONSHIP WITH THE PHOENIX PUBLIC SCHOOL DISTRICTS, HOUSTON INDEPENDENT SCHOOL DISTRICT, THE SCHOOL DISTRICT OF PHILADELPHIA, THE LOS ANGELES UNIFIED SCHOOL DISTRICT, THE NEW YORK CITY DEPARTMENT OF EDUCATION, THE ATLANTA PUBLIC SCHOOLS, THE CHICAGO PUBLIC SCHOOLS, QUITMAN PUBLIC SCHOOLS, CLARKSDALE PUBLIC SCHOOLS, CLEVELAND PUBLIC SCHOOLS, TALLAHATCHIE PUBLIC SCHOOLS, COAHOMA PUBLIC SCHOOLS, HOLLANDALE PUBLIC SCHOOLS, HUMPHREYS PUBLIC SCHOOLS AND INDIANOLA PUBLIC SCHOOLS, CORPS MEMBERS TEACH STUDENTS WHO ENROLLED IN THE PUBLIC SUMMER SCHOOL PROGRAMS HOSTED BY THE PARTNER SCHOOL DISTRICTS AND PARTICIPATING PUBLIC CHARTER SCHOOLS.

ATTACHMENT	2	
TITACILIDIA	_	

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION

GRANTS

EXPENSES

REVENUE

ALUMNI AFFAIRS (SEE SCHEDULE O)

573,927.

20,182,362.

1,813,000.

Schedule O (Form 990 or 990-EZ) 2010

Schedule O (Form 990 or 990-EZ) 2010 Page **2**

Name of the organization

Employer identification number

TEACH FOR AMERICA, INC. 13-3541913

ATTACHMENT 2 (CONT'D)

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION GRANTS EXPENSES REVENUE

TOTALS 573,927. 20,182,362. 1,813,000.

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

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, WV, WI,

ATTACHMENT 4

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

			(C) I	POSITION	COM	PENSATIO	N FROM	
	(A) NAME AND TITLE	(B) HOURS	(1)(2	(3)(4)(5)(6)	(D)ORG.	(E)REL.	ORG.	(F)OTHER
29	BEVERLY DANIEL TATUM PHD							
	DIRECTOR	1.00	X			0.	0.	0.
30	GREGORY W. WENDT							
	DIRECTOR	1.00	X			0.	0.	0.
31	LAWRENCE SUMMERS							
	DIRECTOR	1.00	X			0.	0.	0.
32	MEG WHITMAN							
	DIRECTOR	1.00	X			0.	0.	0.
33	WENDY KOPP							
	CEO AND FOUNDER (NON-VOTING)	40.00	X	X	364 , 06	2.	0.	29,574.
34	MATTHEW KRAMER							
	PRESIDENT	40.00		X	298,49	6.	0.	29,653.
35	TRACY-ELIZABETH CLAY							
	GENERAL COUNSEL/SECRETARY	40.00		X	161,13	1.	0.	13,331.
36	OSMAN KURTULUS							
	VP ACCTG/CTRLS & ASST SEC	40.00		X	156,90	8.	0.	21,621.
37	MIGUEL ROSSY							
	CHIEF FIN & INFRASTRUCTURE OF	'F 40.00		X	251,50	0.	0.	9,107.
38	ELISA V BEARD							
	CHIEF OPERATING OFFICER	40.00		X	208,39	1.	0.	24,978.
39	ELISSA CLAPP							
	SVP, RECRUITMENT	40.00		X	231,31	1.	0.	15,386.
40	ELLEN N SHEPARD							
						0 - 111 - 4	2 (F 20)	0 000 EZ\ 0040

Name of the organization	Employer identification number
TEACH FOR AMERICA, INC.	13-3541913

					ATTACHMENT 4	(CONT'D)
	CHIEF INFORMATION OFFICER	40.00	X	199,638	. 0.	15,173.
41	LILY RAGER					
	EVP, GDP	40.00	X	171,906	. 0.	6,555.
42	AYLON SAMOUHA					
	SVP, TEACHER PREPARATION, SUPP	40.00	X	247,382	. 0.	6,128.
43	ERIC SCROGGINS					
	EXECUTIVE VICE PRESIDENT, GROW	40.00	X	226 , 575	. 0.	4,414.
44	JEFFREY WETZLER					
	SVP, CHIEF LEARN OFFICER	40.00	X	210,758	. 0.	24,547.
45	KEVIN HUFFMAN					
	EVP, PUBLIC AFFAIRS	40.00	X	226,698	. 0.	16,632.
46	GILLIAN C SMITH					
	CHIEF MARKETING OFFICER	40.00	X	214,508	. 0.	24,328.
47	AIMEE EUBANKS DAVIS					
	CHIEF PEOPLE OFFICER	40.00	X	204,953	. 0.	24,069.
48	THEORDORE QUINN					
	VP, STRATEGY & RESEARCH	40.00	X	166,813	. 0.	13,117.

ATTACHMENT 5

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS		DESCRIPTION OF SERVICES	COMPENSATION
MATHEMATICA POLICY RESEARCH P.O. BOX 2393 PRINCETON, NJ 08543-2393	, INC.	CONSULTING	736,394.
INFINITY INFO SYSTEMS CORP. P.O. BOX 3085 HICKSVILLE, NY 11802		TECHNOLOGY	639,823.
ADP, INC. PO BOX 9001006 LOUISVILLE, KY 40290-4107		PAYROLL SERVICE	341,946.
DELOITTE CONSULTING LLP TWO WORLD FINANCIAL CENTER NEW YORK, NY 10001		CONSULTING	320,333.
NAVIGATION ARTS LLC 7901 JONES BRANCH DRIVE STE MCLEAN, VA 22102	400	TECHNOLOGY	245,094.
	TOTAL COMPENSATION		2,283,590.

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Name of the organization			Employer identification	number
TEACH FOR AMERICA, INC.			13-3541913	
			ATTACHMENT 6	
FORM 990, PART VIII - INVESTMENT INCOM	<u>E</u>			
	(A) TOTAL	(B) RELATED OR	(C) UNRELATED	(D) EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INCOME FROM INVESTMENT IN LIMITED PAR	14,74	0.	14,740.	
INTEREST/DIVIDENDS - BANK ACCOUNTS	114,02	2.		114,022.

128,762.

TOTALS

14,740. 114,022.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Attach to Form 990. See separate instructions. Employer identification number

13-3541913 TEACH FOR AMERICA, INC. Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) Part I (c) Legal domicile (state (e) End-of-year assets Total income Direct controlling Name, address, and EIN of disregarded entity Primary activity or foreign country) Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year.) (d) (e) (g) Section 512(b)(13) Name, address, and EIN of related organization Public charity status Primary activity Legal domicile (state Exempt Code section Direct controlling controlled or foreign country) (if section 501(c)(3)) entity entity? Yes No _(1) TEACH FOR ALL 26-2122566 315 WEST 36TH STREET NEW YORK, NY 10018 N/A NY 501 (C) (3) 7 EDUCATION Х (2) LEADERSHIP FOR EDUCATIONAL EQUITY 20-8848357 NEW YORK, NY 10018 PUBLIC POLICY NY N/A 501 (C) (4) N/A Х

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

Schedule R (Form 990) 2010

Page 2

13-3541913 Schedule R (Form 990) 2010 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 Part III because it had one or more related organizations treated as a partnership during the tax year.) (b) Primary activity (g) (e) Predominant (h) (j) (k) Direct controlling Share of total Code V-UBI Name, address, and EIN Lègal Share of end-of-year Percentage General or Disproportionate income (related, domicile entity income amount in box 20 of assets managing ownership allocations? unrelated, excluded from related organization (state or partner? foreign tax under sections 512-514) Schedule K-1 country) (Form 1065) Yes No Yes No (1)____ (5)_____ (7) Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Part IV

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
<u>(1)</u>							
(2)							
(3)							
(4)							
(5)							
<u>(6)</u>							
(7)							

13-3541913 Page 3 Schedule R (Form 990) 2010

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

No	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	,	Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		Х
b	Gift, grant, or capital contribution to other organization(s)	1b	Х	
		1c		Х
	Loans or loan guarantees to or for other organization(s)	1d		X
		1e		Х
·	20dillo of 10dill guarantooc by other digaritzation (o)			
f	Sale of assets to other organization(s)	1f	\neg	Х
q	Calc of assets to strong organization (o)	1g		Х
-		1h		Х
- ''	Exchange of acceleration in the first terms of the	1i		X
•	Lease of facilities, equipment, of other assets to other organization(s)			
	Lease of facilities, equipment, or other assets from other organization(s)	1i	\neg	Х
J		1k	-	X
K	Tenormanice of activities of membership of fundationing constitutions of outloof organization(c)	11		x
١	To the final field of the final field of the		Х	_
	onaling of radiintee, equipment, maining note, of extended account in the control of the control	1n	X	
n	Sharing of paid employees			
		10		Х
0			х	
р	Reimbursement paid by other organization for expenses	1 P		
		4.0		Х
q		1q	\rightarrow	X
<u> </u>	Other transfer of cash or property from other organization(s)	1r	\longrightarrow	

If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)	TEACH FOR ALL	N	264,381.	COST
(2)	TEACH FOR ALL	М	47,605.	COST
(3)	TEACH FOR ALL	P	21,851.	COST
(4)	LEADERSHIP FOR EDUCATIONAL EQUITY	N	335,190.	COST
(5)	LEADERSHIP FOR EDUCATIONAL EQUITY	P	92,509.	COST
(6)	LEADERSHIP FOR EDUCATIONAL EQUITY	В	563,927.	COST

Schedule R (Form 990) 2010 13-3541913 Page **4**

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) 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) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No	(*	Yes	No
<u>(1)</u>										
(2)										
<u>(3)</u>										
(4)										
(5)										
<u>(6)</u>										
<u>(7)</u>										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

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Part VII

Supplemental Information

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