

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax****Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)**

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

OMB No. 1545-0047

2008**Open to Public
Inspection****A For the 2008 calendar year, or tax year beginning****10/01, 2008, and ending****09/30, 2009**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <u>TEACH FOR AMERICA, INC.</u>		D Employer identification number <u>13-3541913</u>
		Doing Business As		E Telephone number <u>(212) 279-2080</u>
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>315 WEST 36TH STREET</u> <u>5TH FL</u>		
		City or town, state or country, and ZIP + 4 <u>NEW YORK, NY 10018</u>		
F Name and address of principal officer: <u>WENDY KOPP</u> <u>SAME AS 'C' ABOVE</u>		G Gross receipts \$ <u>272,211,479.</u>		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (<u>3</u>) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)		
J Website: ▶ <u>WWW.TEACHFORAMERICA.ORG</u>		H(c) Group exemption number ▶		
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1989</u> M State of legal domicile: <u>CT</u>		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>OUR MISSION IS TO BUILD THE MOVEMENT TO ELIMINATE EDUCATIONAL INEQUITY BY ENLISTING OUR NATION'S MOST PROMISING FUTURE LEADERS IN THE EFFORT.</u> <u>(CONTINUED IN PART III)</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	<u>30</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>30</u>
	5 Total number of employees (Part V, line 2a)	5	<u>4,167</u>
	6 Total number of volunteers (estimate if necessary)	6	<u>4,075</u>
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	<u>NONE</u>
7b Net unrelated business taxable income from Form 990-T, line 34	7b	<u>NONE</u>	
Revenue	8 Contribution and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	<u>142,345,312.</u>	<u>251,515,886.</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>11,637,480.</u>	<u>16,167,915.</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>1,433,749.</u>	<u>439,669.</u>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>3,771,395.</u>	<u>1,353,859.</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>159,187,936.</u>	<u>269,477,329.</u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)	<u>4,636,949.</u>	<u>4,842,441.</u>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>NONE</u>	<u>NONE</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e)	<u>62,804,570.</u>	<u>94,000,534.</u>
	b Total fundraising expenses, Part IX, column (D), line 25) ▶ <u>13,461,875.</u>	<u>NONE</u>	<u>NONE</u>
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u>57,109,177.</u>	<u>56,192,595.</u>
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>124,550,696.</u>	<u>155,035,570.</u>
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	<u>34,637,240.</u>	<u>114,441,759.</u>
	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	<u>180,315,255.</u>	<u>305,981,521.</u>
	22 Net assets or fund balances. Subtract line 21 from line 20.	<u>34,282,864.</u>	<u>44,524,599.</u>
		<u>146,032,391.</u>	<u>261,456,922.</u>

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	▶ Signature of officer		Date	
	▶ Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) <u>P00504182</u>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ <u>GRANT THORNTON LLP</u>	EIN ▶ <u>36-6055558</u>	Phone no. ▶ <u>212-542-9609</u>	
	<u>666 THIRD AVENUE NEW YORK, NY 10017-4011</u>			

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

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

Part III Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

SEE STATEMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes" describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the 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 \$ 23,943,691. including grants of \$) (Revenue \$)

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
RECRUITMENT EVENTS, PROCESSING APPLICATIONS (APPROXIMATELY 35,000
IN 2009 AND 24,000 IN 2008) AND CONDUCTING DAYLONG INTERVIEW
SESSIONS IN MULTIPLE SITES ACROSS THE COUNTRY. TFA HAD
APPROXIMATELY 4,100 AND MORE THAN 3,700 NEW CORPS MEMBERS BEGIN
THEIR FALL TEACHING ASSIGNMENTS IN 2009 AND 2008 RESPECTIVELY.

4b (Code:) (Expenses \$ 26,640,523. including grants of \$) (Revenue \$)

SEE STATEMENT 2

4c (Code:) (Expenses \$ 66,625,247. including grants of \$ 4,842,441.) (Revenue \$ 16,167,915.)

PLACEMENT, PROFESSIONAL DEVELOPMENT, EDUCATION AWARDS, AND OTHER:
TFA PLACES CORPS MEMBERS IN VARIOUS URBAN AND RURAL REGIONS OF THE
UNITED STATES. IN EACH REGION, TFA HAS REGIONAL OFFICES, WHICH ARE
RESPONSIBLE FOR PLACING CORPS MEMBERS IN SCHOOLS, MONITORING THEIR
PROGRESS THROUGHOUT THE TWO-YEAR COMMITMENT, PROVIDING
OPPORTUNITIES FOR ONGOING PROFESSIONAL DEVELOPMENT, AND HELPING
CORPS MEMBERS TO FEEL PART OF A NATIONAL CORPS. IN 2009 AND 2008,
TFA PLACED CORPS MEMBERS IN 35 AND 29 REGIONS RESPECTIVELY.

4d Other program services. (Describe in Schedule O.) SEE STATEMENT 3

(Expenses \$ 10,009,941. including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 127,219,402. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 1,041	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b NONE	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . .	2a 4,167	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Did the organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	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:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . .	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . .	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Form **990** (2008)

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

Section A. Governing Body and Management

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a	30
b	Enter the number of voting members that are independent	1b	30
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6	Does the organization have members or stockholders?	6	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9a	Does the organization have local chapters, branches, or affiliates?	9a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11	Is there any officer, director or 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	11	X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13	Does the organization have a written whistleblower policy?	13	X
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:		
a	The organization's CEO, Executive Director, or top management official?	15a	X
b	Other officers or key employees of the organization?	15b	X
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	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► SEE STATEMENT 4

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.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► OSMAN KURTULUS 315 WEST 36TH STREET, 5TH FLOOR NEW YORK, NY 10018

212 279-2080

Part VIII Statement of Revenue

13-3541913

				(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	Federated campaigns	1a 160,814.				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e 33,632,832.				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f 217,722,240.				
	g	Noncash contributions included in lines 1a-1f: \$	1,779,287.				
	h	Total. Add lines 1a-1f ▶		251,515,886.			
Program Service Revenue			Business Code				
	2a	FEE FOR SERVICE REVENUE	611710	16,167,915.	16,167,915.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f ▶		16,167,915.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		453,937.			453,937.
	4	Income from investment of tax-exempt bond proceeds . . . ▶		NONE			
	5	Royalties ▶		NONE			
			(i) Real (ii) Personal				
	6a	Gross Rents	17,664.				
	b	Less: rental expenses . . .					
	c	Rental income or (loss) . .	17,664.				
	d	Net rental income or (loss) ▶		17,664.			17,664.
			(i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than inventory	2,290,021.	NONE			
	b	Less: cost or other basis and sales expenses	2,288,961.	15,328.			
	c	Gain or (loss)	1,060.	-15,328.			
	d	Net gain or (loss) ▶		-14,268.			-14,268.
	8a	Gross income from fundraising events (not including \$ NONE of contributions reported on line 1c). See Part IV, line 18. a	1,564,031.				
	b	Less: direct expenses b	429,861.				
	c	Net income or (loss) from fundraising events ▶		1,134,170.			1,134,170.
	9a	Gross income from gaming activities. See Part IV, line 19. a					
	b	Less: direct expenses b					
	c	Net income or (loss) from gaming activities ▶		NONE			
	10a	Gross sales of inventory, less returns and allowances a					
b	Less: cost of goods sold b						
c	Net income or (loss) from sales of inventory. ▶		NONE				
		Business Code					
11a	MISCELLANEOUS	900099	202,025.			202,025.	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d ▶		202,025.				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶		269,477,329.	16,167,915.		1,793,528.	

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).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	NONE			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,842,441.	4,842,441.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	1,968,306.	878,443.	543,920.	545,943.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages	77,396,392.	63,621,570.	5,690,456.	8,084,366.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions) . .	2,324,416.	1,923,310.	149,229.	251,877.
9 Other employee benefits	6,441,493.	4,231,188.	1,611,650.	598,655.
10 Payroll taxes	5,869,927.	4,770,514.	461,103.	638,310.
11 Fees for services (non-employees):				
a Management	NONE			
b Legal	NONE			
c Accounting	NONE			
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees	NONE			
g Other	NONE			
12 Advertising and promotion	NONE			
13 Office expenses	10,317,103.	8,684,608.	990,285.	642,210.
14 Information technology	NONE			
15 Royalties	NONE			
16 Occupancy	7,665,671.	7,048,113.	435,426.	182,132.
17 Travel	12,111,219.	10,646,530.	657,728.	806,961.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	528,054.	466,069.	41,916.	20,069.
20 Interest	373,505.	12,891.	360,228.	386.
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization . . .	7,939,033.	5,892,691.	1,170,402.	875,940.
23 Insurance	285,437.	220,003.	48,364.	17,070.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a STUDENT LODGING AND MEALS ---	7,168,680.	7,168,651.	29.	NONE
b PROFESSIONAL AND EDUCATIONAL	6,346,097.	5,342,102.	595,551.	408,444.
c BAD DEBT EXPENSE -----	1,509,239.	NONE	1,509,239.	NONE
d REGIONAL COSTS -----	415,258.	124,193.	NONE	291,065.
e FEES AND OTHER EXPENSES -----	296,954.	156,011.	87,162.	53,781.
f All other expenses -----	1,236,345.	1,190,074.	1,605.	44,666.
25 Total functional expenses. Add lines 1 through 24f	155,035,570.	127,219,402.	14,354,293.	13,461,875.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	8,459,270.	1	14,736,109.
	2 Savings and temporary cash investments	29,718,550.	2	40,695,475.
	3 Pledges and grants receivable, net	100,973,434.	3	188,442,142.
	4 Accounts receivable, net	6,447,781.	4	11,101,967.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	5,179,721.	7	6,324,931.
	8 Inventories for sales or use		8	
	9 Prepaid expenses and deferred charges	969,658.	9	583,772.
	10a Land, buildings, and equipment: cost basis	10a 40,496,374.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D.	10b 14,092,638.		
	11 Investments - publicly traded securities	20,790,831.	10c	26,403,736.
	12 Investments - other securities. See Part IV, line 11	7,254,482.	11	17,094,032.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	521,528.	14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	180,315,255.	15	599,357.	
17 Accounts payable and accrued expenses	11,258,066.	16	305,981,521.	
18 Grants payable	1,664,235.	17	10,390,733.	
19 Deferred revenue	NONE	18	1,551,610.	
20 Tax-exempt bond liabilities		19	903,100.	
21 Escrow account liability. Complete Part IV of Schedule D		20		
22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21		
23 Secured mortgages and notes payable to unrelated third parties	20,000,000.	22		
24 Unsecured notes and loans payable		23	30,000,000.	
25 Other liabilities. Complete Part X of Schedule D	1,360,563.	24		
26 Total liabilities. Add lines 17 through 25.	34,282,864.	25	1,679,156.	
27 Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		26	44,524,599.	
28 Unrestricted net assets	58,906,081.	27	83,804,277.	
29 Temporarily restricted net assets	77,964,477.	28	108,490,802.	
30 Permanently restricted net assets	9,161,833.	29	69,161,843.	
31 Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.		30		
32 Capital stock or trust principal, or current funds		31		
33 Paid-in or capital surplus, or land, building, or equipment fund		32		
34 Retained earnings, endowment, accumulated income, or other funds		33		
35 Total net assets or fund balances	146,032,391.	34	261,456,922.	
36 Total liabilities and net assets/fund balances	180,315,255.	35	305,981,521.	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits?	3b	X

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

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

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally Integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	53,722,125.	101,171,184.	76,939,083.	142,345,312.	251,515,886.	625,693,590.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	53,722,125.	101,171,184.	76,939,083.	142,345,312.	251,515,886.	625,693,590.
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)						26,131,739.
6 Public support. Subtract line 5 from line 4.						599,561,851.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4.	53,722,125.	101,171,184.	76,939,083.	142,345,312.	251,515,886.	625,693,590.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	804,617.	1,153,478.	1,482,483.	1,437,614.	453,937.	5,332,129.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	424.	62,545.	111,371.	131,067.	179,433.	484,840.
11 Total support. Add lines 7 through 10						631,510,559.
12 Gross receipts from related activities, etc. (See instructions.)					12	43,784,984.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	94.94 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	81.05 %
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
c 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's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h.	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

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

[illegible]

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, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule

☐ For organizations 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

☒ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1)/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 Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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.) ► \$ _____

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization **TEACH FOR AMERICA, INC.**

Employer identification number

13-3541913

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 5,675,622.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 6,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 5,250,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 35,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 26,047,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 10,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **TEACH FOR AMERICA, INC.**

Employer identification number

13-3541913

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 5,040,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ To be completed by organizations described below.
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2008

Open to Public Inspection

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(cy)(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), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

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

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.
See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$
- 3 Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3).
See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).
See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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-.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.**A** Check ☐ if the filing organization belongs to an affiliated group.**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. Enter -0- if line g is more than line a														
i	Subtract line 1f from line 1c. Enter -0- if line f is more than line c														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

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

Schedule C (Form 990 or 990-EZ) 2008

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

		(a)		(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:			
a	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		X	
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		452,675.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X	
i	Other activities? If "Yes," describe in Part IV		X	
j	Total lines 1c through 1i			452,675.
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			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

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

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

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

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

Part IV Supplemental Information

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

SEE PAGE 4

Part IV Supplemental Information (continued)

LOBBYING ACTIVITIES CONDUCTED BY THE ORGANIZATION

SCHEDULE C, PART II-B

ON A STATE LEVEL, VOLUNTEERS, PAID STAFF OR MANAGEMENT WORKED TOWARDS

PASSAGE BY THE STATE LEGISLATURE OF EDUCATION BOARD OF CERTAIN

ALTERNATIVE CERTIFICATION REQUIREMENTS AS WELL AS FUNDING FOR THE

ORGANIZATION. ON A FEDERAL LEVEL THERE WAS DIRECT CONTACT WITH

LEGISLATORS, THEIR STAFFS, AND GOVERNMENT OFFICIALS IN SUPPORT OF

ADEQUATE APPROPRIATIONS FOR TEACH FOR AMERICA AS WELL AS PASSAGE OF TEACH

FOR AMERICA'S AUTHORIZING LEGISLATION AND THE SERVE AMERICA ACT. THERE

WAS ALSO LOBBYING DONE AT THE FEDERAL LEVEL IN SUPPORT OF FUNDING FOR

TITLE 1 AND OTHER EDUCATION PROGRAMS IN THE AMERICAN REINVESTMENT AND

RECOVERY ACT.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

TEACH FOR AMERICA, INC.

Supplemental Financial Statements

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Employer identification number

13-3541913

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

	(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 donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically importantly land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) 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 assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	36,973,033.				
b Contributions	20,000,010.				
c Investment earnings or losses	1,461,329.				
d Grants or scholarships					
e Other expenditures for facilities and programs	644,865.				
f Administrative expenses					
g End of year balance	57,789,507.				

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► 46.1135 %
 b Permanent endowment ► 50.4622 %
 c Term endowment ► 3.4243 %

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

- (i) unrelated organizations
 (ii) related organizations

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		11,627,250.	3,879,996.	7,747,254.
d Equipment		24,973,046.	8,967,856.	16,005,190.
e Other		3,896,078.	1,244,786.	2,651,292.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				26,403,736.

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		

Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
DEFERRED RENT PAYABLE	1,679,156.
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) ►	1,679,156.

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.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

SEE PAGE 5

Part XIV Supplemental Information *(continued)*

INTENDED USES OF ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

TEACH FOR AMERICA, INC.'S ENDOWMENT CONSISTS OF SEVERAL INDIVIDUAL FUNDS

ESTABLISHED FOR DIFFERENT PURPOSES. ITS ENDOWMENT INCLUDES BOTH

DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF

DIRECTORS TO FUNCTION AS ENDOWMENTS. GENERALLY SPEAKING, THE PURPOSE OF

THE ORGANIZATION'S ENDOWMENT FUNDS IS TO PROVIDE A CONTINUOUS SOURCE OF

FUNDING TO SUPPORT THE MISSION OF THE INSTITUTION.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
		BENEFIT (event type)	DINNER (event type)	5 (total number)	
Revenue	1 Gross receipts	1,169,460.	301,040.	93,531.	1,564,031.
	2 Less: Charitable contributions	NONE	NONE	NONE	NONE
	3 Gross revenue (line 1 minus line 2)	1,169,460.	301,040.	93,531.	1,564,031.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	224,823.	55,749.	93,934.	374,506.
	7 Other direct expenses	35,336.	5,603.	14,416.	55,355.
	8 Direct expense summary. Add lines 4 through 7 in column (d)				(429,861.)
9 Net income summary. Combine lines 3 and 8 in column (d)					1,134,170.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					()
8 Net gaming income summary. Combine lines 1 and 7 in column (d)					

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain: _____		
11 Does the organization operate gaming activities with nonmembers?	11	
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?	12	

13 Indicate the percentage of gaming activity operated in:

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

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

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? **15a**

- b**
- If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

- c**
- If "Yes," enter name and address:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:

- a**
- Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- 17a**

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

Schedule G (Form 990 or 990-EZ) 2008

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

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

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

Part I General Information on Grants and Assistance

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

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on 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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

[illegible]

- 2 Enter total number of section 501(c)(3) and government organizations ▶
- 3 Enter total number of other organizations ▶

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

Schedule I (Form 990) 2008

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FINANCIAL AID/SUPPORT	2,280	4,842,441.			

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

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

SCHEDULE I, LINE 2

GRANTS/FINANCIAL AID IS OFFERED TO CORPS MEMBERS WHO ARE ATTENDING THE

CURRENT YEAR'S INSTITUTE. A LISTING IS MAINTAINED OF THE PEOPLE WHO TAKE

THE GRANT WITH ALL REQUIRED INFORMATION SUCH AS FULL NAME, SOCIAL

SECURITY NUMBER AND ADDRESS. THE GRANT IS BASED ON THE FINANCIAL NEED OF

THE INDIVIDUAL.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

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

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

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.

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

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a Receive a severance payment or change of control payment?
- b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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

- a The organization?
- b Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

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

- a The organization?
- b Any related organization?
- If "Yes" 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

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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2008

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
WENDY KOPP	(i) 279,525.	(ii) NONE	(iii) NONE	9,429.	9,938.	298,892.	225,174.
	(ii) 54,000.	NONE	NONE	1,821.	1,920.	57,741.	38,494.
MATTHEW KRAMER	(i) 274,050.	(ii) NONE	(iii) NONE	11,250.	11,858.	297,158.	219,044.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KEVIN HUFFMAN	(i) 229,643.	(ii) NONE	(iii) NONE	11,250.	10,411.	251,304.	190,183.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
E M ROSSY	(i) 204,775.	(ii) NONE	(iii) NONE	NONE	8,234.	213,009.	156,923.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELISA V BEARD	(i) 182,637.	(ii) NONE	(iii) NONE	8,753.	10,889.	202,279.	146,751.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
GILLIAN C SMITH	(i) 200,325.	(ii) NONE	(iii) NONE	9,850.	11,803.	221,978.	166,450.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELISSA CLAPP	(i) 189,219.	(ii) NONE	(iii) NONE	9,390.	7,347.	205,956.	153,354.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
AYLON S SAMOUHA	(i) 182,861.	(ii) NONE	(iii) NONE	8,990.	4,155.	196,006.	146,954.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JEFFREY WETZLER	(i) 203,925.	(ii) NONE	(iii) NONE	10,025.	11,807.	225,757.	169,253.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
AIMEE A DAVIS	(i) 179,550.	(ii) NONE	(iii) NONE	8,815.	11,780.	200,145.	149,873.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ANDREW D KOPPLIN	(i) 164,037.	(ii) NONE	(iii) NONE	NONE	7,885.	171,922.	112,089.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELLEN N SHEPARD	(i) 155,102.	(ii) NONE	(iii) NONE	418.	3,131.	158,651.	107,382.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JEMINA R BERNARD	(i) 162,325.	(ii) NONE	(iii) NONE	3,683.	4,133.	170,141.	127,306.
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

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.

[illegible]

**SCHEDULE J-2
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

► **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the Organization

TEACH FOR AMERICA, INC.

Employer Identification number

13-3541913

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
WALTER ISAACSON CHAIR	1.	X						NONE	NONE	NONE
PAULA A SNEED VICE CHAIR	1.	X						NONE	NONE	NONE
JIDE ZEITLIN TREASURER	1.	X						NONE	NONE	NONE
LAURA E ARNOLD DIRECTOR	1.	X						NONE	NONE	NONE
MAXINE CLARK DIRECTOR	1.	X						NONE	NONE	NONE
THOMAS H CASTRO DIRECTOR	1.	X						NONE	NONE	NONE
PAUL FINNEGAN DIRECTOR	1.	X						NONE	NONE	NONE
DONALD G FISHER DIRECTOR	1.	X						NONE	NONE	NONE
LEW FRANKFORT DIRECTOR	1.	X						NONE	NONE	NONE
DAVID GERGEN DIRECTOR	1.	X						NONE	NONE	NONE
EDDIE S GLAUDE JR DIRECTOR	1.	X						NONE	NONE	NONE
LEO J HINDERY JR DIRECTOR	1.	X						NONE	NONE	NONE
JOHN HOTCHKIS DIRECTOR	1.	X						NONE	NONE	NONE
DAVID W KENNY DIRECTOR	1.	X						NONE	NONE	NONE
SHERRY LANSING DIRECTOR	1.	X						NONE	NONE	NONE
SUE LEHMANN DIRECTOR	1.	X						NONE	NONE	NONE
MICHAEL L LOMAX PHD DIRECTOR	1.	X						NONE	NONE	NONE
STEPHEN F MANDEL JR DIRECTOR	1.	X						NONE	NONE	NONE
ANTHONY W MARX DIRECTOR	1.	X						NONE	NONE	NONE
JAMES M MCCORMICK DIRECTOR	1.	X						NONE	NONE	NONE
DARLA MOORE DIRECTOR	1.	X						NONE	NONE	NONE

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

Schedule J-2 (Form 990) 2008

JSA

8E1294 1.000

6294AP 700J

0174202-00003

**SCHEDULE J-2
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

► **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the Organization

TEACH FOR AMERICA, INC.

Employer Identification number

13-3541913

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHRIS NELSON										
DIRECTOR	1.	X						NONE	NONE	NONE
RICHARD S PECHTER										
DIRECTOR	1.	X						NONE	NONE	NONE
GREG PENNER										
DIRECTOR	1.	X						NONE	NONE	NONE
NANCY PERETSMAN										
DIRECTOR	1.	X						NONE	NONE	NONE
LAURENE POWELL										
DIRECTOR	1.	X						NONE	NONE	NONE
ARTHUR ROCK										
DIRECTOR	1.	X						NONE	NONE	NONE
SIR HOWARD STRINGER										
DIRECTOR	1.	X						NONE	NONE	NONE
KURT STROVINK										
DIRECTOR	1.	X						NONE	NONE	NONE
LAWRENCE J STUPSKI										
DIRECTOR	1.	X						NONE	NONE	NONE
BEVERLY DANIEL TATUM PHD										
DIRECTOR	1.	X						NONE	NONE	NONE
JOHN THOMPSON										
DIRECTOR	1.	X						NONE	NONE	NONE
GREGORY W WENDT										
DIRECTOR	1.	X						NONE	NONE	NONE
WENDY KOPP										
CEO AND FOUNDER	40.	X		X				279,525.	54,000.	23,108.
MATTHEW KRAMER										
PRESIDENT	40.			X				274,050.	NONE	23,108.
E M ROSSY										
EVP & CHIEF FINANCIAL OFFICER	40.			X				204,775.	NONE	8,234.
PAUL MOURNING										
SECRETARY	40.			X				NONE	NONE	NONE
OSMAN KURTULUS										
VP ACCTG/CTRLS & AST SECRETARY	40.			X				83,748.	5,873.	5,877.
ELISA V BEARD										
CHIEF OPERATING OFFICER	40.				X			182,637.	NONE	19,642.
ELISSA CLAPP										
SVP, RECRUITMENT	40.				X			189,219.	NONE	16,737.
AYLON S SAMOUHA										
SVP, TEACHER SUPPORT	40.				X			182,861.	NONE	13,145.
JEFFREY WETZLER										
SVP, CHIEF LEARNING OFFICER	40.				X			203,925.	NONE	21,832.

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

Schedule J-2 (Form 990) 2008

JSA

8E1294 1.000

6294AP 700J

0174202-00003

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

2008

Open to Public Inspection

Name of the Organization

TEACH FOR AMERICA, INC.

Employer Identification number	
--------------------------------	--

13-3541913

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

Schedule J-2 (Form 990) 2008

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

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

OMB No. 1545-0047

2008

Open To Public
Inspection

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (STMT 6)		2.	1,779,287.	
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 NONE

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2008

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

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

SCHEDULE M, PART I, LINE 32A

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 O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

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

THE MEETINGS OF THE AUDIT AND FINANCE COMMITTEES FOR THE CURRENT

REPORTING PERIOD WERE NOT DOCUMENTED WITH MINUTES. THE ORGANIZATION

PLANS TO CHANGE THIS PRACTICE GOING FORWARD.

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

PROCESS THE ORGANIZATION USES TO REVIEW FORM 990

FORM 990 PART VI, SECTION A, LINE 10

TEACH FOR AMERICA'S FORM 990 WAS PREPARED BY AN INDEPENDENT CERTIFIED

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.

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

ORGANIZATION'S PRACTICES FOR MONITORING CONFLICTS OF INTEREST

FORM 990 PART VI, SECTION B, LINE 12C

TEACH FOR AMERICA DOES NOT CURRENTLY HAVE A PROCESS TO MONITOR COMPLIANCE

WITH THE CONFLICT OF INTEREST POLICY.

Name of the organization

Employer identification number

TEACH FOR AMERICA, INC.

13-3541913

PROCESS FOR DETERMINING COMPENSATIONFORM 990 PART VI, SECTION B, LINE 15A-BTEACH FOR AMERICA, INC. USES INDEPENDENT COMPENSATION CONSULTANTS TOENSURE THAT THE SALARY SET FOR THE CEO IS APPROPRIATE. INDEPENDENTCOMPENSATION CONSULTANTS ARE ALSO USED TO ENSURE THAT THE SALARIES FORTHE OPERATING COMMITTEE MEMBERS AND OTHER KEY OFFICERS ARE APPROPRIATEAND IN LINE WITH THOSE OF COMPARABLE ORGANIZATIONS.COMPENSATION IS SET AND ADJUSTED ANNUALLY AT TEACH FOR AMERICA. EACHYEAR, THE PRESIDENT AND CFO RECOMMEND BASELINE ADJUSTMENTS TO THE FINANCECOMMITTEE, WHICH ARE THEN APPROVED BY THE BOARD. THESE RECOMMENDATIONSARE BASED LARGELY ON RESULTS FROM INDEPENDENT COMPENSATION STUDIES INMOST YEARS. IN THE YEARS WHERE THE ORGANIZATION DOES NOT UNDERTAKE SUCHA STUDY, WE USE GUIDING PRINCIPLES TO DETERMINE THE CORRECT RELATIVEPOSITIONING FOR STAFF MEMBER SALARIES. THESE GUIDELINES INCLUDE PAYINGNEAR THE 75TH PERCENTILE, ADHERING TO INTERNAL EQUITY AND ENSURING WE AREPAYING FAIRLY AND COMPETITIVELY OVER THE COURSE OF STAFF MEMBER CAREERSIN THE ORGANIZATION.IN ADDITION, ON AN ANNUAL BASIS, THE ORGANIZATION CONDUCTS A COMPENSATIONREVIEW PROCESS - WHERE STAFF MEMBERS ARE EVALUATED FOR SALARY ADJUSTMENTSBASED ON THEIR ABILITY TO CONTRIBUTE TO THE ORGANIZATION, IF/WHETHERTHEIR ROLES ARE IMPACTED BY CHANGES IN SCALE OF THE ORGANIZATION ANDIF/WHETHER THEIR POSITIONS WARRANT AN INTERNAL, EXTERNAL OR GEOGRAPHICMARKET ADJUSTMENT. MANAGERS PROVIDE QUALITATIVE GUIDANCE, TEAM LEADERSMAKE PERCENTAGE RECOMMENDATIONS AND SENIOR MANAGEMENT CALIBRATES TOENSURE SALARIES ARE FAIR AND COMPETITIVE ACROSS THE ORGANIZATION AND

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

REFLECTIVE OF OUR COMPENSATION PHILOSOPHY.

Name of the organization

TEACH FOR AMERICA, INC.

Employer identification number

13-3541913

ORGANIZATION'S POLICY REGARDING MAKING CERTAIN DOCUMENTS PUBLIC

FORM 990 PART VI, SECTION C, QUESTION 19

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE TEACH FOR

AMERICA, INC. WEBSITE AND UPON REQUEST.

Name of the organization

Employer identification number

TEACH FOR AMERICA, INC.

13-3541913

ORGANIZATION'S PRACTICES FOR OVERSIGHT OF FINANCIAL STATEMENT AUDIT

FORM 990, PART XI

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

OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS. THE COMMITTEE'S

PROCESS FOR OVERSIGHT OF THE AUDIT, PERFORMED BY AN INDEPENDENT

ACCOUNTING FIRM, HAS NOT CHANGED FOR THE REPORTING YEAR.

Name of the organization

Employer identification number

TEACH FOR AMERICA, INC.

13-3541913

OTHER PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4D

TEACH FOR AMERICA HAS AN ALUMNI BASE OF FORMER CORPS MEMBERS ALL OVER THE

COUNTRY. THESE INDIVIDUALS PRESENT A POWERFUL OPPORTUNITY TO CONTINUE TO

IMPACT THE EDUCATION COMMUNITY THROUGH MANAGEMENT AND GOVERNMENT

POSITIONS. IN RECOGNITION OF THE IMPORTANCE OF ITS ALUMNI BASE, TFA HAS

INCREASED ITS ALUMNI BUDGET.

Name of the organization

Employer identification number

TEACH FOR AMERICA, INC.

13-3541913

AMENDED RETURN

THE 2008 FORM 990 IS BEING AMENDED FOR THE FOLLOWING REASONS:

SCHEDULE J - TWO CHANGES HAVE BEEN MADE TO THE LIST OF INDIVIDUALS

IDENTIFIED AS CORPORATE OFFICERS. IN THE FIRST CHANGE, TEACH FOR AMERICA

HAS CORRECTED HISTORICAL OVER-REPORTING OF ALL SENIOR EXECUTIVES AS

CORPORATE OFFICERS AS SUCH INDIVIDUALS WERE NOT ALL NAMED AS OFFICERS IN

THE BY-LAWS AND/OR RESOLUTIONS OF THE BOARD. IN THE SECOND CHANGE, TEACH

FOR AMERICA HAS REMOVED CERTAIN INDIVIDUALS ORIGINALLY IDENTIFIED AS

CORPORATE OFFICERS. THE BOARD HAS SUBSEQUENTLY DETERMINED THAT IT

MISTAKENLY APPOINTED THESE INDIVIDUALS TO OFFICER POSITIONS AND HAS

REVOKED THE APPOINTMENTS RETROACTIVELY, AS THEY NEVER HAD THE POWERS AND

DUTIES OF CORPORATE OFFICERS.

SCHEDULE J - TEACH FOR AMERICA HAS CHANGED THE INDIVIDUALS IDENTIFIED AS

"KEY EMPLOYEES" BASED ON A MORE CAREFUL APPLICATION OF THE NEW THREE-PART

TEST SET FORTH IN THE INSTRUCTIONS TO THE FORM 990.

SCHEDULE J - TEACH FOR AMERICA HAS CHANGED THE INDIVIDUALS IDENTIFIED AS

THE HIGHEST PAID STAFF OTHER THAN OFFICERS/DIRECTORS/TRUSTEES AND KEY

EMPLOYEES IN ORDER TO REFLECT THE ABOVE.

FORM 990, PART IX, LINES 5 & 7 - TEACH FOR AMERICA HAS MODIFIED TOTAL

EXECUTIVE COMPENSATION TO REFLECT THE ABOVE CHANGES.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public
Inspection

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

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
TEACH FOR ALL 26-2122566 315 WEST 36TH STREET NEW YORK, NY 10018	EDUCATION	NY	501(C) (3)	7	TEACH FOR AM

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations?		(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(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

Part V Transactions With Related Organizations**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV.

	Yes	No
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to other organization(s)	1b	X
c Gift, grant, or capital contribution from other organization(s)	1c	X
d Loans or loan guarantees to or for other organization(s)	1d	X
e Loans or loan guarantees by other organization(s)	1e	X
f Sale of assets to other organization(s)	1f	X
g Purchase of assets from other organization(s)	1g	X
h Exchange of assets	1h	X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n Sharing of paid employees	1n	X
o Reimbursement paid to other organization for expenses	1o	X
p Reimbursement paid by other organization for expenses	1p	X
q Other transfer of cash or property to other organization(s)	1q	X
r Other transfer of cash or property from other organization(s)	1r	X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(A) Name of other organization(s)	(B) Transaction type (a–r)	(C) Amount involved
(1) TEACH FOR ALL	N	246,196.
(2) TEACH FOR ALL	M	45,299.
(3) TEACH FOR ALL	P	1,418,241.
(4)		
(5)		
(6)		

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

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

FORM 990, PART III - PROGRAM SERVICES

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4B PROGRAM SERVICE

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 2009, APPROXIMATELY 4,100 CORPS MEMBERS WERE TRAINED AT ONE OF OUR SEVEN INSTITUTE CAMPUSES: ARIZONA STATE UNIVERSITY, UNIVERSITY OF HOUSTON, TEMPLE UNIVERSITY, LOYOLA MARYMOUNT UNIVERSITY, ST. JOHN'S UNIVERSITY, GEORGIA INSTITUTE OF TECHNOLOGY AND ILLINOIS INSTITUTE OF TECHNOLOGY. 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, AND THE CHICAGO PUBLIC SCHOOLS, CORPS MEMBERS TEACH STUDENTS WHO ENROLLED IN THE PUBLIC SUMMER SCHOOL PROGRAMS HOSTED BY THE PARTNER SCHOOL DISTRICTS.

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

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DESCRIPTION

GRANTS

EXPENSES

REVENUE

ALUMNI AFFAIRS (SEE SCHEDULE O)

10,009,941.

TOTALS

10,009,941.

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FORM 990, PART VI, LINE 17 - STATES
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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,

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

NAME AND ADDRESS -----	DESCRIPTION OF SERVICES	COMPENSATION -----
PLAN ARCHITECTURE PLLC 555 EIGHTH AVENUE, SUITE 1602 NEW YORK, NY 10018	ARCHITECTURE	381,421.
PETER HAMLEN 375 LINCOLN PLACE, #4J BROOKLYN, NY 11238	ARCHITECTURE	244,365.
TIMOTHY HOGUE 95 WALL STREET, APT 425 NEW YORK, NY 10005	RECRUITMENT	120,600.
MULLEN PO BOX 7247-7279 PHILADELPHIA, PA 19170	MARKETING	116,591.
JON WELLS 225 E 12TH STREET APT 3A NEW YORK, NY 10003	SOFTWARE DEVELOPMENT	101,875.
	TOTAL COMPENSATION	----- 964,852. =====

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

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DESCRIPTION -----	(A) CHECK -----	(B) NUMBER OF CONTRIBUTIONS -----	(C) REVENUES REPORTED -----	(D) METHOD OF DETERMINING -----
COMPUTER AND INTERNET HARDWARE	X	1	1,647,509.	COST/SELLING PRICE
BOOK PLANNERS FOR TEACHERS	X	1	131,778.	COST/SELLING PRICE
 TOTALS		 ----- 2.	 ----- 1,779,287.	
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