DLN: 93493101003080 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 06-01-2018 , and ending 05-31-2019 **C** Name of organization Teach for America Inc D Employer identification number B Check if applicable ☐ Address change 13-3541913 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 25 Broadway 12th Floor E Telephone number ☐ Amended return ☐ Application pending (212) 279-2080 City or town, state or province, country, and ZIP or foreign postal code New York, NY 10004 **G** Gross receipts \$ 370,165,156 Name and address of principal officer H(a) Is this a group return for Elisa Villanueva Beard □Yes **☑**No subordinates? 25 Broadway 12th Floor New York, NY 10004 H(b) Are all subordinates ☐ Yes ☐No ıncluded? Tax-exempt status 4947(a)(1) or 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www teachforamerica org L Year of formation 1989 M State of legal domicile CT Summary 1 Briefly describe the organization's mission or most significant activities Children growing up in historically marginalized and disenfranchised communities lack access to a broad spectrum of resources and opportunities, and attend schools that are not equipped to meet their unmet needs. To address this, TFA's mission is to find, develop, and support a diverse network of leaders committed to expanding opportunity for children from classrooms, schools, and every sector and field that shapes the broader systems in which schools operate. TFA does this by finding promising leaders, developing and cultivating the Activities & Governance leadership skills and mindsets necessary for systems change through classroom teaching, and supporting the individual and collective leadership, relationships, and learning of those in the TFA network throughout their lifetime 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 3 Number of voting members of the governing body (Part VI, line 1a) . 15 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 12 5 4,787 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 55,700 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 81,160 **b** Net unrelated business taxable income from Form 990-T, line 34 -9,850 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 235,973,769 294,544,810 Program service revenue (Part VIII, line 2g) . 23,601,646 23,612,050 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,699,846 6,237,774 -1,276,345 -308,643 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 324,085,991 263,998,916 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13,552,971 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 15,361,484 **14** Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 191,054,269 193,876,782 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶29,322,763 80,530,300 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 78,043,744 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 284,459,497 287,960,053 19 Revenue less expenses Subtract line 18 from line 12 . -20,460,581 36,125,938 Assets or d Balances End of Year **Beginning of Current Year** 436,749,428 460,149,310 20 Total assets (Part X, line 16) . 60,028,609 21 Total liabilities (Part X, line 26) . 70,025,298 400,120,701 Net assets or fund balances Subtract line 21 from line 20 . 366,724,130 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge <u>2020-04-1</u>0 Signature of officer Sign Here Joshua Griggs EVP, TALENT, OPERATIONS & CFO Type or print name and title Prınt/Type preparer's name Preparer's signature Date Check \square ıf P01231300 Paid self-employed Firm's name ► CROWE LLP Firm's EIN ► 35-0921680 Preparer Use Only Firm's address > 488 Madison Avenue Floor 3 Phone no (212) 572-5500 New York, NY 100225702 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2018) Cat No 11282Y

Form	990 (2018)					Page 2
Pa	t III Statement	of Program Servi	ce Accomplishme	nts		
	Check If Sched	dule O contains a resp	onse or note to any lii	ne in this Part III .		🗹
1	Briefly describe the o	rganızatıon's mıssıon				
and a netwo syste for sy	ittend schools that are ork of leaders committe ms in which schools op	not equipped to mee ed to expanding oppo erate TFA does this classroom teaching,	t their unmet needs T rtunity for children fro by finding promising le	o address this, TFA m classrooms, scho aders, developing	ess to a broad spectrum of resc 's mission is to find, develop, a pols, and every sector and field and cultivating the leadership s ive leadership, relationships, ar	nd support a diverse that shapes the broader kills and mindsets necessary
2	Did the organization i	undertake any signific	ant program services	during the year whi	ıch were not listed on	
	the prior Form 990 or	990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	se new services on So	hedule O			
3	Did the organization of	cease conducting, or i	make significant chang	es in how it conduc	cts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	se changes on Schedu	ule O			
4	Section 501(c)(3) and	d 501(c)(4) organizat		port the amount of	argest program services, as me grants and allocations to other	
4a	(Code) (Expenses \$	93,275,139 inclu	iding grants of \$	3,102,161) (Revenue \$	0)
	See Additional Data					·
4b	(Code) (Expenses \$	57,461,519 inclu	iding grants of \$	3,796,603) (Revenue \$	24,057,850)
	See Additional Data					
4c	(Code) (Expenses \$	36,359,692 inclu	ıdıng grants of \$	156,774) (Revenue \$	0)
	See Additional Data					
	(Code) (Expenses \$	29,608,486 inclu	ıdıng grants of \$	6,497,433) (Revenue \$	0)
	educational opportunity negatively impacting low intended to develop alum policy/organizing work, a superintendents or in oth	TFA engages in activities income communities minimi in leadership practice and social entrepreneursher roles directly impacting	that support and encoura ost notably focused on inf and/or specific programm ip Nearly two thirds of ou ng education while the oth	ige alumni to continue ormation/knowledge d atic areas classroom ir 52,700 alumni in 20 er third worked across	duals present a powerful opportunity to work in education and across sec issemination and networking TFA al practice, school leadership, school s 19 were employed as teachers, as s multiple sectors Approximately 78° g low income communities	tors to address issues lso supports alumni via activities ystems leadership, chool principals, as
4d	Other program service					
	(Expenses \$	29,608,486 ind	cluding grants of \$	6,497,43	33) (Revenue \$)
			216,704,836			

Par	tiv Checklist of Required Schedules			
	T - H		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 🕏	2	Yes	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,	22	Yes	

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

Form	990 (2018)			Page 4
Pa	Checklist of Required Schedules (continued)			_
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R , $Part VI$	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.			

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V $\,$.

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Part V

Yes

Yes

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No

38

3,055

1a

7a

7b

7с

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

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7d |

10a

10b

11a

11b

12b

13b

13c

Yes

Yes

Yes

No

No

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b Gross income from other sources (Do not net amounts due or paid to other sources

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Enter the amount of reserves the organization is required to maintain by the states in

which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders .

If "Yes," did the organization notify the donor of the value of the goods or services provided?

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year
13	Section 501(c)(29) qualified nonprofit health insurance issuers.
а	Is the organization licensed to issue qualified health plans in more than one state?

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	lule O	See instructions	•		lines	
Se	ection A. Governing Body and Management						
					Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	12				
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?							
3	Did the organization delegate control over management duties customarily performed be of officers, directors or trustees, or key employees to a management company or other			3		No	
4	Did the eventuation make any complicant changes to the governing decimants cannot be	E	comm 000 was filed?	4		No	

b	Enter the number of voting members included in line 1a, above, who are independent	1b	12				
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			2			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .						
4	Did the organization make any significant changes to its governing documents since the	prior F	form 990 was filed? .	4			

5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No								
6	Did the organization have members or stockholders?	6		No								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following											
а	The governing body?	8a	Yes									
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No								
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)												
			Yes	No								
10a	Did the organization have local chapters, branches, or affiliates?	10a		No								
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b										
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes									
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990											
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes									
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes									
13	Did the organization have a written whistleblower policy?	13	Yes									
14	Did the organization have a written document retention and destruction policy?	14	Yes									
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO, Executive Director, or top management official	15a	Yes									
b	Other officers or key employees of the organization	15b	Yes									
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)											
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b										
Se	ction C. Disclosure											
17	List the States with which a copy of this Form 990 is required to be filed CA , FL , GA , AL , HI , IL , KS , KY , ME , MS , NH , NJ , NM , NY , NC , OR , PA , RI AR , WV , WI											
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s											

13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b	Yes						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Se	ction C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed CA , FL , GA , AL , HI , IL , KS , KY , ME , MS , NH , NJ , NM , NY , NC , OR , PA , RI , AR , WV , WI								
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply								
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's books and records >Joshua Griggs 25 Broadway 12th Floor New York, NY 10004 (212) 279-2080								

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101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Form 990 (2018)														Page 8
Part VII Section A. Officers, Direct	tors, Trustee:	s, Key	Emp	loye	es,	, and	High	nest Cor	mpensa	ater	d Employees	(con	itinued)	
(A) Name and Title	(B) Average hours per week (list any hours	than o	one bo	ox, u an off	ot che unles fficer	neck mo ess pers er and a tee)	son	Repo compe fror organiza	pensation com om the fro zation (W- organ		(E) Reportable compensation from related organizations (\)	n d (W-	(F) Estima amount o compen from	iated of other nsation
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099	99-MISC)		2/1099-MISC)	organızat relat organız	ted
See Additional Data Table		 		\vdash	\vdash	-	+-'	 		+		+		
		 		\vdash	-	+	+-'	 		\dashv	1	\dashv		
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		<u></u>			'	<u> </u>	'	<u></u>				 		
1b Sub-Total														
d Total (add lines 1b and 1c)					_	•	_	3,	,222,771	_		0		295,537
Total number of individuals (including of reportable compensation from the	ng but not limited	d to thos				e) who) rec	eived moi	re than	\$10	0,000			
3 Did the organization list any former line 1a? If "Yes," complete Schedule.			tee, ke			oyee,	or hı	ighest cor	mpensat	:ed +	employee on	3	Yes	No No
For any individual listed on line 1a, is organization and related organization individual	s the sum of repo	ortable o	comp 0? <i>If</i>	ensa <i>"Yes</i>	ition ;," ci	n and comple	other te Sc	compens	sation fr for suct	om.	the	4		No
5 Did any person listed on line 1a recei	ave or accrue co	mnensa	tion f	rom	any	/ unrel	ated	ordaniza	tion or i	ındıv	adual for	<u> </u>	162	
services rendered to the organization												5	;	No
Section B. Independent Contract					_					_				
Complete this table for your five high from the organization. Report compe												mper	nsation	
	(A)		уси.	En	1119	Wich	I vv.	Jim the c.	Ĭ		(B)		(0	
Blue State Digital Inc	and business addre	∌SS			—						ription of services oftware Developmen	nt		nsation 1,662,000
101 Avenue of Americas12th Floor New York, NY 10013					_				AND Cons					
Salesforceorg					_				Software SERVICES		enses/Subscription			928,529
Department 34293 PO Box 39000 San Francisco, CA 94139								J	SLIVE	5				
Workday Inc											ING AND SOFTWAR	RE		886,486
6230 Stoneridge Mall Dr								J	SERVICES	S				
Pleasanton, CA 94588 Modern Craft Inc					—				SUPPORT	T SE!	RVICES		+	804,432
155 Water Street Unit 1 Vancouver, BC V6B1A7 CA														•
Patterson Belknap Webb & Tyler LLP									Professio	nal l	Legal Services			732,530
1133 Avenue of the Americas New York, NY 100366710														
2 Total number of independent contractor	and Condition of head	+ + I		+a +b		Lictor	200	<u>, , , , , , , , , , , , , , , , , , , </u>	received	mc	re than \$100 or	റ്റ് പ്	e —	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 83

		(2018)											Page 9
Part	VIII												
		Check if Schedul	e O contains :	a respo	onse or no	te to any	(/	A) evenue	Rel e: fu	(B) ated or kempt nction	Unre busi	C) lated ness enue	(D) Revenue excluded from tax under sections 512 - 514
	1:	a Federated campaigi	ns	1a		154,160			16	venue			312 - 314
nts		b Membership dues		1b									
Giffs, Grants nilar Amounts		c Fundraising events		1c	16.	785,328							
s, (An		d Related organizatio		1d									
Sift lar		e Government grants (co		1e	52	451,841							
S, (f All other contributions,	•	ı ie	32,	431,041							
tributions, Gifts, Grants Other Similar Amounts		and similar amounts no above		1f	225,	153,481							
Contributions, and Other Sirr		g Noncash contribution in lines 1a - 1f \$,175,653	_							
<u>ت</u> و		h Total. Add lines 1a-	-11	•				94,544,810					_
<u> </u>						Business	Code	22.4	25 500	22.42	F F00		
ษน		SERVICE FEES REVENUE					611710		35,580	23,43			
Program Service Revenue	b	PUBLICATION REVENUE					900099		.61,315		1,315		
1C+	c	REG/CERTIFICATION FE	ES				611710		15,155	1	5,155		
ž	d			_									
E .	e	· 											
gra	f	All other program se	rvice revenue						0		0		0 0
δĞ	a	Total. Add lines 2a-2	ıf.			23,6	612,050						
	3	Investment income (income)	ncluding divid	ends, ı	nterest, a	nd other		6,604,745	5				6,604,745
	4	Income from investme	mpt bo	ond procee	eds 🕨	· <u> </u>							
	5	Royalties				•	<u> </u>	2,787	7				2,787
	_		(ı) Rea		(II) Pe	rsonal	_						
	6a	Gross rents	2.7	40,828									
	Ŀ	Less rental expenses		40,828									
	c	Rental income or (loss)		0		(0						
		Net rental income of	r (loss)				4	(0
	Ì	• Net rental income of	(ı) Securit			▶ Other	1				-		
	7a	Gross amount from sales of assets other than inventory	. ,	52,696	(11)								
	Ł	Less cost or other basis and sales expenses	41,€	44,712		174,95	5						
	c	Gain or (loss)	-1	92,016		-174,95	5						
	c	l Net gaın or (loss) .		•		>	1	-366,971	1				-366,971
Other Revenue		contributions reporte See Part IV, line 18	16,785,328 ed on line 1c)	of a		680,280	_						
Ğ.		Less direct expenses		b		1,518,670		-838,390					-838,390
hei		: Net income or (loss) Gross income from g			ents .	•	1	-030,390	1				-030,390
ō	<i></i>	See Part IV, line 19		a									
	Ŀ	Less direct expenses	s	ь									
	c	Net income or (loss)	from gaming	activit	ies	>							
	10	aGross sales of invent returns and allowand		a		1,040							
	ŀ	Less cost of goods s	old -	b		1,040	+						
		Net income or (loss)		-1	orv		J	1,040		1,040			
		Miscellaneous				s Code							
	11	- a Insurance Reimburs Fees	sement for Leg	gal		900099	9	306,069		306,069			
	Ŀ	Purchasing Rebate				900099	9	128,694	1	128,694			
	c	IT Services				900099	9	81,160				81,160	
	c	All other revenue .						9,997	7	9,997		0	0
	•	Total. Add lines 11a	-11d			>		525,920					
	12	! Total revenue. See	Instructions										
					•			324,085,991	1	24,057,850		81,160	5,402,171 Form 990 (2018)

Part IV, line 22

key employees .

4 Benefits paid to or for members

section 4958(c)(3)(B) .

9 Other employee benefits .

d Lobbying

f Investment management fees .

12 Advertising and promotion .

13 Office expenses . .

14 Information technology

20 Interest

15 Royalties .

17 Travel .

16 Occupancy .

23 Insurance .

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

federal, state, or local public officials .

22 Depreciation, depletion, and amortization .

19 Conferences, conventions, and meetings

21 Payments to affiliates . . .

expenses on Schedule O) a SUBSCRIPTIONS & DUES

c MISCELLANEOUS EXPENSES

d filing and registration fees

b BAD DEBT EXPENSE

e All other expenses

g Other (If line 11g amount exceeds 10% of line 25, column

10 Payroll taxes 11 Fees for services (non-employees) a Management

7 Other salaries and wages

and 16

b Legal .

c Accounting .

251,341

19,463,931

738,478

2,261,901

1,499,543

37,076

17,954

1,296,295

432,673

446,343

169,770

658,021

84,685

56,946

232,732

98,623

157,931

51,534

9,261

31,001

29,322,763

Form 990 (2018)

98

1,326,626

Part IX Statement of Functional Expenses

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . .

section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)											
Check if Schedule O contains a response or note to any line in this Part IX											
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses							
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,818,693	5,818,693									
2 Grants and other assistance to domestic individuals. See	7,734,278	7,734,278									

0

2,012,338

155,836,221

5,912,556

18,109,710

12,005,957

304.118

147,271

928.855

2.609

9,704,128

6,996,609

7,480,960

3,021,465

14,461,829

26,932,649

1,719,242

5,404,605

1,020,050

739,702

552,885

52,651

176,245

287,960,053

560,683

323,744

290,230

22,475,554

852,741

2,611,882

1,731,565

89,508

43,345

928.855

2,609

2,200,640

224,756

2,272,509

1,185,671

1,955,141

1,914,488

122,211

137,157

2,153,214

237,538

319,741

52,827

33,298

22,306

74,668

41.932.454

O

1,470,767

113,896,736

4,321,337

13,235,927

8,774,849

177,534

85,972

6,207,193

6,339,180

4,762,108

1,666,024

11,848,667

23,691,535

1,512,346

3,018,659

224,522

542,378

686,777

468,053

21,084

70,576

216,704,836

129,641

Page **11**

Form 990 (2018)

Net Assets or Fund Balan

27

28

29

30

31

32

33

34

Unrestricted net assets

Temporarily restricted net assets .

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		33,148,929	1	21,365,351
	2	Savings and temporary cash investments		35,906,496	2	55,366,186
	3	Pledges and grants receivable, net		36,094,892	3	45,196,546
	4	Accounts receivable, net		409,759	4	556,741
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L	ated employees Complete	0	5	0
S	6	Loans and other receivables from other disquality section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations. Part II of Schedule L	n 4958(c)(3)(B), and itions of section 501(c)(9) (see instructions) Complete		6	0
sset	7	Notes and loans receivable, net			7	
SS	8	Inventories for sale or use			8	10,731
٩	9	Prepaid expenses and deferred charges		5,205,255	9	5,918,626
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 66,940,693			

8	8	Inventories for sale or use		•		8	10,731
4	9	Prepaid expenses and deferred charges			5,205,255	9	5,918,626
1	L0a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	66,940,693			
	b	Less accumulated depreciation	10 b	48,696,557	18,916,627	10c	18,244,136
1	L1	Investments—publicly traded securities .			302,067,530	11	306,663,253
1	L2	Investments—other securities See Part IV, line	11 .		0	12	
1	L3	Investments—program-related See Part IV, line	3,633,034	13	4,308,646		
1	L4	Intangible assets				14	
1	L5	Other assets See Part IV, line 11			1,366,906	15	2,519,094
1	L6	Total assets.Add lines 1 through 15 (must equ	ıal lıne	34)	436,749,428	16	460,149,310
1	L 7	Accounts payable and accrued expenses			40,100,565	17	37,310,952
1	18	Grants payable				18	
1	١9	Deferred revenue		19,170,635	19	11,729,399	
١,	20 Tay ayamat hand liabilities					30	

12	Investments—other securities See Part IV, line 11	0	12	
13	Investments—program-related See Part IV, line 11	3,633,034	13	4,308,646
14	Intangible assets		14	
15	Other assets See Part IV, line 11	1,366,906	15	2,519,094
16	Total assets.Add lines 1 through 15 (must equal line 34)	436,749,428	16	460,149,310
17	Accounts payable and accrued expenses	40,100,565	17	37,310,952
18	Grants payable		18	
19	Deferred revenue	19,170,635	19	11,729,399
19 20	Deferred revenue	19,170,635	19 20	11,729,399
		19,170,635 8,000	20	11,729,399

		· ·			
	19	Deferred revenue	19,170,635	19	11,729,399
	20	Tax-exempt bond liabilities		20	
ý	21	Escrow or custodial account liability Complete Part IV of Schedule D	8,000	21	8,000
ilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
idei		persons Complete Part II of Schedule L		22	0
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	10,746,098	25	10,980,258
	26	Total liabilities Add lines 17 through 25	70 025 298	26	60 028 609

jab		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	10,746,098	25	10,980,25
	26	Total liabilities. Add lines 17 through 25	70,025,298	26	60,028,60
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and			

102,551,845 27

28

29

30

31

32

33

34

147,010,411

117,161,874

366,724,130

436,749,428

172,430,100

110,528,727

117,161,874

400,120,701

460,149,310

Form **990** (2018)

3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 18007697
Software Version: 2018v3.1

EIN: 13-3541913

Name: Teach for America Inc

Form 990 (2018)

101111 330 (2010)

Form 990, Part III, Line 4a:

Corps Member Professional Development and Other - In each region, TFA has regional offices, which are responsible for placing corps members in schools, monitoring progress throughout their two-year commitment, providing opportunities for ongoing leadership and/or educator professional development, and helping corps members to feel part of a national corps

Corps Member Recruitment, Selection and Placement - TFA recruits and selects a teaching corps of outstanding college graduates to teach the nation's most underserved students. The recruitment and selection process includes scheduling and attending on and off campus recruiting events, processing applications, and conducting day-long

Interview sessions in multiple sites across the country. TFA places corps members in various urban and rural regions throughout the United States and provides assistance to

Form 990, Part III, Line 4b:

the corps members through a need based financial aid program to support them with their moves to these regions TEACH FOR AMERICA CORPS MEMBERS TAUGHT ACROSS 51 REGIONS IN 2019

Form 990, Part III, Line 4c: Pre-Service Institute - TFA conducts intensive summer training institutes led by its staff and in conjunction with local public school districts as part of teacher preparation for incoming corps members. In Summer 2018, approximately 3,700 corps members were trained at one of our four institute sites run by the national organization. Atlanta

(GA), Houston (TX), Philadelphia (PA), and Tulsa (OK) or at one of our 14 training sites run by regions. Bay Area, Chicago - Northwest Indiana, Dallas - Fort Worth, Delta (rural region collective), Eastern North Carolina, Las Vegas Valley, Los Angeles (regional collective), Massachusetts, Memphis, Miami (regional collective), Milwaukee,

Nashville, New York, and Phoenix

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless person hours per compensation compensation amount of other is both an officer and a week (list from the from related compensation director/trustee)

any hours

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and Independent Contractors

DIRECTOR

DIRECTOR KEVIN HUFFMAN

DAVID KENNY

DIRECTOR

JOEL KLEIN

RANDALL H HARBERT

KAYA HENDERSON

Officer until October 2019

DIRECTOR (THROUGH 5/8/19)

DIRECTOR (THROUGH 3/15/19)

DIRECTOR Beginning 1/19/19/ EVP, Chief External

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

organization (W-

0

0

0

0

0

177,162

0

organizations

from the

0

0

0

0

26,709

	4117 110413	`	411 000	0.70				2/4000 MICC)	(11/ 2/4000	organization and related organizations	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)		
STEPHEN F MANDEL JR	1 0	×		×				0	0	C	
CHAIR		^						0	0	,	
ELISA VILLANUEVA BEARD	61 0	×		x				465,477	0	38,699	
Director/Officer-CEO		_ ^		^				405,477		30,033	
GREG PENNER	1 0	×		×				0	0	C	
DIRECTOR/ TREASURER		^		^				0	0		
WENDY KOPP	4 0							E2 000			
FOUNDER/DIRECTOR		X						52,980	0	C	
THOMAS H CASTRO	1 0										

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation n the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	(direct	or/t	rust	ee)		organization (W-	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1.0	Key employee	Highest compensated	Former	2/1099-MISC)		organization and related organizations	
KEN MEHLMAN	1 0	×									
DIRECTOR		^						0	١	0	
RICHARD D PARSONS	1 0	1									
DIRECTOR (THROUGH 5/8/19)		×								0	
NANCY PERETSMAN	1 0	Ų						0	0		

DIRECTOR						
RICHARD D PARSONS	1 0	,				
DIRECTOR (THROUGH 5/8/19)		^			0	
NANCY PERETSMAN	1 0	,			0	
DIRECTOR		_ ^			0	
LINNEA CONRAD ROBERTS	1 0					
DIRECTOR		^			ľ	

58 0

51 0

.....

and Independent Contractors

DIRECTOR (Started 1/19/19)

EVP, TALENT, OPERATIONS & CFO TRACY-ELIZABETH CLAY

SVP, General Counsel & Chief Risk/Compliance

JOSHUA GRIGGS

Officer, Secretary

		1					
NANCY PERETSMAN	1 0	,,					
DIRECTOR		_ ^				٥	
LINNEA CONRAD ROBERTS	1 0	,,					
DIRECTOR		^			0		
JOSE VILLARREAL	1 0	,,					
DIRECTOR		×			0	l o	

DIRECTOR		^				ľ	
LINNEA CONRAD ROBERTS	1 0						
DIRECTOR		×			0	0	
JOSE VILLARREAL	1 0						,
DIRECTOR		×			0	٥	
MEG WHITMAN	1 0						
DIRECTOR		×			0	0	
SUSAN MCCAW	1 0						

0

0

0

34,780

34,553

DIRECTOR		^			0	ľ	ľ
MEG WHITMAN	1 0	_			0	0	
DIRECTOR		^			0	0	0
SUSAN MCCAW	1 0						
DIRECTOR (Started 9/5/18)		^			0	٥	0

Χ

Χ

330,724

238,528

DIRECTOR							ı
SUSAN MCCAW	1 0				0	0	
DIRECTOR (Started 9/5/18)		_ ^			0		Ì
DAN PORTERFIELD	1 0				0	0	

(A) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and ated

(B)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

(C)

(D)

258,377

248,984

246,034

233,321

(E)

(F)

38,362

16,013

41,936

8,734

and Independent Contractors

MICHELLE CULVER

SANDEEP CHELLANI

FATIMAH BURNAM

KIRA ORANGE-JONES

SVP, Regional Field Executive

SVP, REGIONAL FIELD EXECUTIVE

SVP, IT & CHIEF INFORMATION OFFICER

SVP, EXECUTIVE LEADERSHIP & LEARNING

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	 Key employee	Highest compensated	Former	2/1033 MISC)	MISC)	related organizations
SUSAN ASIYANBI EVP, Chief Operating & Program Officer	66 0			х			404,391	0	12,31
EVF, Chief Operating & Frogram Officer									
JOSHUA P ANDERSON	63 0								
SVP, Recruit & Adm until Feb 2019/EVP, Chief				Х			270,779	0	22,09

		ैं वि		ned.			
SUSAN ASIYANBI	66 0		x		404,391	0	12,312
EVP, Chief Operating & Program Officer			$ \hat{\ } $		404,331		12,512
JOSHUA P ANDERSON SVP, Recruit & Adm until Feb 2019/EVP, Chief External Officer beginning Feb 2019	63 0		x		270,779	0	22,096
PAUL KEYS EXECUTIVE DIRECTOR	57 0			Х	296,014	0	21,343
MICHELLE CULVER	58 0						

48 0

50.0

50 0

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	m 99	OULE A	Com		Charity Staturganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) o empt charitable	organization or trust.		2018
		f the Treasury		► Go to	www.irs.gov/Form	990 for the late	st information		Open to Public Inspection
ame	e of th	he organiza Jerica Inc	tion					Employer identific	cation number
						<u> </u>		13-3541913	
_	rt I rganiz				us (All organization e it is (For lines 1 thro			See instructions.	
1	. gaz		•		ssociation of churches	•		(A)(i).	
2		,		,	1)(A)(ii). (Attach Sch			C7(-7-	
3					vice organization desc	,	,,	iii).	
4		·	•	·	ed in conjunction with			•	nter the hospital's
_		name, city,			h -6 II				
5	Ш	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, s	state, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
7	✓			mally receives vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	nit or from the gener	al public described in
8					170(b)(1)(A)(vi)	(Complete Part I	I)		
9		An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.							
)		from activit	ies related to income and u	ıts exempt fur ınrelated busır	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
1					d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
2		more public	cly supported	organizations (d exclusively for the be described in section 5 the type of supporting	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting org n(s) the powe	janization oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	nt of the supp		pervised or controlled in ation vested in the sare and C.				
С					supporting organizatio ions) You must com				ated with, its
d		Type III n	on-function	ally integrate he organizatio	 d. A supporting organ n generally must satis rt IV, Sections A and 	Ization operated fy a distribution	ın connection wi requirement and	th its supported orga	
е		Check this	box if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter			on-runctionally organizations	integrated supporting	organization			
g	Provi	de the follow	ing information	on about the su	upported organization(s)			
(i) Name of supported organization						(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No		
			T						
otal									
		work Reduc	tion Act Noti	ce, see the I	nstructions for	Cat No 11285	5F :	Schedule A (Form 9	90 or 990-EZ) 2018

14

15

Schedule A (Form 990 or 990-EZ) 2018

86 70 %

92 55 %

▶□

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

-	Section A. Public Support						_
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) Gifts, grants, contributions, and	· ,	. ,	. ,	. ,		
1	membership fees received (Do not	263,854,521	271,486,327	245,190,571	235,973,769	294,544,810	1,311,049,998
	include any "unusual grant ")		_, _,,	,,		,,,	_,,
2	Tax revenues levied for the						
	organization's benefit and either						0
	paid to or expended on its behalf						· ·
3	The value of services or facilities						
	furnished by a governmental unit to						0
١.	the organization without charge	262.054.524	274 406 227	245 400 574	225 272 762	204 544 040	1 211 212 222
4	Total. Add lines 1 through 3	263,854,521	271,486,327	245,190,571	235,973,769	294,544,810	1,311,049,998
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						144,855,746
	line 1 that exceeds 2% of the						, ,
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5						1,166,194,252
	from line 4						. , ,
	Section B. Total Support	т т			1		
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	263,854,521	271,486,327	245,190,571	235,973,769	294,544,810	1,311,049,998
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	3,849,156	4,003,233	5,802,691	7,453,663	9,348,360	30,457,103
	and income from similar sources						
9	Net income from unrelated						
	business activities, whether or not						0
	the business is regularly carried on						

	(or fiscal year beginning in)	(4)2014	(0)2013	(6)2010	(4)2017	(0)2010	(1)10.01
7	Amounts from line 4	263,854,521	271,486,327	245,190,571	235,973,769	294,544,810	1,311,049,998
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,849,156	4,003,233	5,802,691	7,453,663	9,348,360	30,457,103
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital	579,872	580,852	640,067	590,994	1,125,040	3,516,825

	(or insear year beginning in) F						
7	Amounts from line 4	263,854,521	271,486,327	245,190,571	235,973,769	294,544,810	1,311,049,998
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,849,156	4,003,233	5,802,691	7,453,663	9,348,360	30,457,103
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	579,872	580,852	640,067	590,994	1,125,040	3,516,825
11	Total support. Add lines 7 through 10						1,345,023,926
12	Gross receipts from related activities,	etc (see instruct	ions)			12	164,013,241
13	First five years. If the Form 990 is f	or the organizatio	n's first, second, tl	hird, fourth, or fift	h tax year as a sec	ction 501(c)(3) or	ganization,

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 Schedule A, Part II, line 14

organization

instructions

supported organization

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 Gross receipts from activities that are						
3	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 The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 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						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(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							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	's first, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	id the organization operate for the benefit of any supported organization other than the supported organization(s) that perated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit arried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Sche	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		

•	income or for management, conservation, or maintenance of property held for production of income (see instructions)			
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
ь	Average monthly cash balances	1 b		
- 0	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see			

			(optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1 b	
С	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation Schedule A, Part II, Line 10 DESCRIPTION - PURCHASING CARD REBATE, COLUMN A - 81110 0, COLUMN B - 45262 0, COLUMN C - 1 Other Income 4843 0, COLUMN D - , COLUMN E - 128694 0, COLUMN F - 269909 0, DESCRIPTION - OTHER INCOME, COLUMN A - , COLUMN B - , COLUMN C - , COLUMN D - 47789 0, COLUMN E - 9997 0, COLUMN F -57786 0. DESCRIPTION - OTHER EVENTS, COLUMN A - 53018 0. COLUMN B - 30890 0. COLUMN C - 24 323 0, COLUMN D - 800 0, COLUMN E - , COLUMN F - 109031 0, DESCRIPTION - COMMISSIONS, COLU MN A - 19444 0, COLUMN B - 30000 0, COLUMN C - , COLUMN D - , COLUMN E - , COLUMN F - 4944 4 0. DESCRIPTION - EMPLOYEE SETTLEMENT, COLUMN A - , COLUMN B - 74000 0, COLUMN C - 772 0. COLUMN D - , COLUMN E - , COLUMN F - 74772 0, DESCRIPTION - RECOVERY OF LIABILITY, COLUMN A - , COLUMN B - 10285 0, COLUMN C - 2023 0, COLUMN D - , COLUMN E - , COLUMN F - 12308 0 , DESCRIPTION - INSURANCE REIMBURSEMENT FOR LEGAL FEES, COLUMN A - , COLUMN B - , COLUMN C - , COLUMN D - , COLUMN E - 306069 0, COLUMN F - 306069 0, DESCRIPTION - GROSS INCOME FRO M FUNDRAISING, COLUMN A - 426300 0, COLUMN B - 390415 0, COLUMN C - 598106 0, COLUMN D - 5 42405 0, COLUMN E - 680280 0, COLUMN F - 2637506 0,

Page 8

Schedule A (Form 990 or 990-EZ) 2018

SCHEDULE C

Enter the amount of any excise tax incurred by the organization under section 4955

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Did the filing organization file Form 1120-POL for this year?

Enter the amount of any excise tax incurred by organization managers under section 4955

Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Political Campaign and Lobbying Activities

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

☐ Yes

☐ Yes

☐ Yes

□ No

DLN: 93493101003080

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Was a correction made?

If "Yes," describe in Part IV

(Form 990 or 990-

EZ)

1 2

3

3

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, 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" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III **Employer identification number** Name of the organization Teach for America Inc 13-3541913 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3).

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were 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-						
1											
2											
3											
1											
5											

ь	Total lobbying expenditures to influence a legislative		
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and		
f	Lobbying nontaxable amount Enter the amount fron columns		
	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 If zero or less, enter -()-	

i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year? 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 separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

che	dule C (Form 990 or 99	0-EZ) 2018				P	age 3
Pa		e if the organization is exempt under section 501(c)(3) and has NOT fil 58 (election under section 501(h)).					
or e	each "Yes" response on	lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	¦)	-	(b)	
ctıv	-		Yes	No		Amou	ınt
1		he filing organization attempt to influence foreign, national, state or local legislation, to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Yes				
b	Paid staff or manager	nent (include compensation in expenses reported on lines 1c through 1i)?	Yes		1		
С	Media advertisements	2		No	1		
d	Mailings to members,	legislators, or the public?	Yes		<u> </u>		82,485
е	Publications, or publis	hed or broadcast statements?		No			
f	Grants to other organ	ızatıons for lobbyıng purposes?		No			
g	Direct contact with le	gislators, their staffs, government officials, or a legislative body?	Yes			1,4	115,303
h	Rallies, demonstration	ns, seminars, conventions, speeches, lectures, or any similar means?		No	T	<u> </u>	
i	Other activities?			No			
j	Total Add lines 1c th	rough 1ı				1,4	197,788
2a	Did the activities in li	ne 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the am	ount of any tax incurred under section 4912			1		
С	If "Yes," enter the am	ount of any tax incurred by organization managers under section 4912					
d	If the filing organizati	on incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete 501(c)(6	e if the organization is exempt under section 501(c)(4), section 501(c)).	(5), o ——	r sectio	on	Yes	No
1	Were substantially all	(90% or more) dues received nondeductible by members?		Г	1		
2	Did the organization i	nake only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization a	igree to carry over lobbying and political expenditures from the prior year?			3		
	and if eit answere		III-A			01(c)(6)
1	•	nd similar amounts from members	1				
2		ductible lobbying and political expenditures (do not include amounts of political the section 527(f) tax was paid).					
а	Current year		2a				
b	Carryover from last y	ear	2b				
С	Total		2c				
3	Aggregate amount re	ported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		nd the amount on line 2c exceeds the amount on line 3, what portion of the excess does to carryover to the reasonable estimate of nondeductible lobbying and political	4				
5	Taxable amount of lo	obying and political expenditures (see instructions)	5				
P		ental Information					
Pro	vide the descriptions re	quired for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), , line 1 Also, complete this part for any additional information	Part II-	·A, lines :	1 an	d 2 (se	 e
	Return Referenc	Explanation					
Return Reference Explanation Schedule C, Part II-B, Line 1 DETAILED On a state level, local advisory board members, paid staff or management legislators, their staff and members of state executive branch agencies in Teach For America's in-state operations through regular state budget procalso worked for the passage of various pieces of legislation which would in operate in a given community including the passage of alternative certification.		port of es In a ct Teac	state app addition, h For Am	prop regi eric	riation onal sta a's abil	aff lity to	

permitting Teach For America to be recognized by the state as an alternative pathway to teach licensure Teach For America has used consultants at the state level to provide lobbying services, such as bill and regulation tracking on matters, including but not limited to, teacher certification and state funding. At the efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE D**

(Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Financial Statements

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

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

DLN: 93493101003080 OMB No 1545-0047

Open to Public **Inspection** Employer identification number

Tea	ch for America Inc				13-3541913	3
Pa	rt I Organizations Maintaining Donor Advi				<u> </u>	
	Complete if the organization answered "Ye				4. - =	
	Tatal number at and of year	(a) Dono	r advis	ed funds	(b)Fur	nds and other accounts
1 2	Total number at end of year Aggregate value of contributions to (during year)					
2 3	Aggregate value of grants from (during year)					
3 4	Aggregate value at end of year					
	,	ra in iliritina that th		te bold in donor od	wood funds as	ro tho
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			ts neid in donor ad	vised runds ai	Yes No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?					
Pa	t II Conservation Easements. Complete if the	e organization a	nswer	ed "Yes" on Forn	n 990. Part '	
1	Purpose(s) of conservation easements held by the organ				11 330) 1 ale .	14 j m 0 7 i
	Preservation of land for public use (e.g., recreation	•		Preservation of an	historically in	portant land area
	Protection of natural habitat		\Box	Preservation of a c	•	•
			_	rreservation of a c	ertined mistor	ic structure
_	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	ion cor	itribution in the for		Vation I at the End of the Year
а	Total number of conservation easements				2a	
b	Total acreage restricted by conservation easements				2b	
С	Number of conservation easements on a certified histori	structure include	d ın (a)		2c	
d	Number of conservation easements included in (c) acquistructure listed in the National Register	red after 7/25/06,	and no	t on a historic	2d	
3	Number of conservation easements modified, transferred tax year ▶	d, released, exting	uished,	or terminated by	the organızatı	on during the
4	Number of states where property subject to conservation	n easement is loca	ted ▶			
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds	ne periodic monitor	_	pection, handling o	of violations,	
6	Staff and volunteer hours devoted to monitoring, inspect		olation	s, and enforcing co	onservation ea	☐ Yes ☐ No esements during the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \begin{align*} \\ \text	handling of violation	ons, an	d enforcing conserv	vation easeme	ents during the year
8	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)$?	above satisfy the	require	ments of section 17	70(h)(4)(B)(ı)	☐ Yes ☐ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the org	janızat	ion's financial state	ements that de	escribes
Par	Organizations Maintaining Collections Complete if the organization answered "Ye				er Similar <i>i</i>	Assets.
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition, e	ducation	on, or research in f		
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1				▶ \$	
(i	i)Assets included in Form 990, Part X				▶ \$	
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS:				ncıal gaın, pro	ovide the
а	Revenue included on Form 990, Part VIII, line 1	,	, .,		▶ \$	
b	Assets included in Form 990, Part X				▶ \$	
or I	Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Cat No	52283D S c	 hedule D (Form 990) 201

Par	t III	Organizations Maintaining Co	llections of Art,	Histori	cal Tr	eası	ures, or	Other !	Similar As	sets (con	tınued)	
3		ng the organization's acquisition, accessions (check all that apply)	n, and other record	ls, check	any of	the fo	ollowing t	hat are a	significant u	se of its co	llection	
а		Public exhibition		d		Loan	or excha	inge prog	rams			
b		Scholarly research		е		Othe	er					
С		Preservation for future generations										
4		vide a description of the organization's co XIII	llections and explai	n how the	ey furth	er the	e organız	atıon's ex	empt purpos	se in		
5		ing the year, did the organization solicit c ets to be sold to raise funds rather than to							lar	☐ Yes		lo
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		orm 990	, Part	IV, lı	ine 9, or	reporte	d an amou	nt on For	m 990,	Part
1a		ne organization an agent, trustee, custodi uded on Form 990, Part X?	an or other interm	edıary for	contrib	oution	ns or othe	r assets r	ot	☐ Yes	☑ N	lo
b	If "\	Yes," explain the arrangement in Part XII:	I and complete the	following	table		[Ar	nount		_
С		inning balance	,	J			Ī	1c				_
d	_	itions during the year					İ	1d				_
е		ributions during the year					İ	1e				_
f		ing balance					İ	1f				_
2a		the organization include an amount on Fo	orm 000 Bort V lin	o 21 for	occrow	05.61	retodial a	ccount lia	hilita 2			<u> </u>
_											□ N	10
b		es," explain the arrangement in Part XIII										
- 6	rt V	Endowment Funds. Complete if	(a)Current year	_	rior year				(d)Three year) Four yea	rc back
1a	Beau	ning of year balance	236,669,18		207,651	-		6,617,046		96,330		329,225
	_	ributions				-		-,,				
		nvestment earnings, gains, and losses	2,116,34	4	29,194	,652	3	1,035,773	-3,2	78,440	17,	567,105
		s or scholarships	, ,						<u> </u>			
	Other	r expenditures for facilities programs										
f	Admi	nistrative expenses	2,60	9	177	,445		844		844		
g	End c	of year balance	238,782,91	7	236,669	,182	20	7,651,975	176,6	17,046	179,	896,330
2	Prov	vide the estimated percentage of the curr	ent vear end baland	ce (line 1	a. colur	nn (a	i)) held a					
а		rd designated or quasi-endowment 🕨	25 98 %		,		,,					
b	Perr	manent endowment ► 49 07 %										
c	Tem	pporarily restricted endowment ► 24	95 %									
·		percentages on lines 2a, 2b, and 2c shou										
3а	Are	there endowment funds not in the posses	·	ation that	t are he	eld an	nd admını	stered for	the		Yes	No
	(i)	unrelated organizations								3a(i))	No
	(ii)	related organizations								3a(ii)	No
b	If "۱	res" on 3a(II), are the related organization	ns listed as require	d on Sche	dule R	٠.				3Ь		
4	Des	cribe in Part XIII the intended uses of the	e organization's end	lowment 1	unds							
Pa	rt VI	Land, Buildings, and Equipme Complete if the organization answ		orm 990	, Part	IV, lı	ine 11a.	See For	m 990, Par	t X, line	10.	
	Desc	ription of property (a) Cost or ot (investme		st or other	basis (c	other)	(c) Acci	umulated d	epreciation	(d)	Book valu	e
1a	Land											
b	Buildi	ings			53	6,252			64,678			471,574
c	Lease	ehold improvements			17,60	4,398			8,191,554		•	9,412,844
d	Eauin	ment			48,71	8,176			40,378,013			3,340,163

19,555

18,244,136

62,312

81,867

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

Part VII					
	See Form 990, Part X, line 12. (a) Description of security or category		(b)		(c) Method of valuation
	(including name of security)		Book value	Cost	or end-of-year market value
	l derivatives				
2) Closely-l 3)Other <u> </u>	held equity interests				
١)					
3)					
C)					
)) 					
()					
)					
5)					
1)					
otal. (Columr	n (b) must equal Form 990, Part X, col (B) line 12)	•			
art VIII	Investments—Program Related.	<u> </u>	+ T) / lun =	11- 6 5	000 Part V June 13
	Complete if the organization answered 'Yes' on Form (a) Description of investment	(b) Bool			rm 990, Part X, line 13. (c) Method of valuation
					or end-of-year market value
.)					
2)					
3)					
1)					
)					
)					
<u>')</u>					
8)					
7) 8) 9)					
B) Otal. (Column	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered 'Yes'		990. Part	IV. line 11d. Si	ee Form 990. Part X. line 15
3) 9) otal. (Column	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered 'Yes' (a) Description		990, Part	IV, line 11d S	ee Form 990, Part X, line 15 (b) Book valu
3) Otal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
tal. (Column	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
cart IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d Si	
ctal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
cital. (Column Part IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
tal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d Si	
tal. (Column lart IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
tal. (Column lart IX	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
tal. (Column Part IX)))))))))))	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d Si	
part IX))))))))))))))))))	Other Assets. Complete if the organization answered 'Yes'		990, Part	IV, line 11d S	
ctal. (Column))))))))))) otal. (Column	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15)	on Form			(b) Book valu
ctal. (Column))))))))))) otal. (Column	Other Assets. Complete if the organization answered 'Yes' (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25.	on Form	· · · ·	 n 990, Part I\	(b) Book valu
cital. (Column Part IX)))))))))) otal. (Column Part X	Man (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answers See Form 990, Part X, line 25. (a) Description	on Form		 n 990, Part I\	(b) Book valu
ptal. (Column)))))))))))) ptal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability ncome taxes	on Form	· · · ·	 n 990, Part I\ k value	(b) Book valu
tal. (Column part IX))))))))) part X Part X	The man (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability Income taxes The Payable	on Form	· · · ·	 n 990, Part I\	(b) Book valu
tal. (Column art IX))))))))))) tal. (Column))))))) tal. (Column Part X) Federal in ferred Ren her Liabilti pital Lease	The man (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability Income taxes The Payable	on Form	· · · ·		(b) Book valu
tal. (Column art IX)))))))))) patal. (Column Part X) Federal in eferred Ren her Liabilti ipital Lease)	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu
tal. (Column tart IX))))))))))) tal. (Column)))))))) tal. (Column Part X) Federal in eferred Ren eferred Ren eferred Ren eferred Liabilti apital Lease)	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu
part IX)))))))))))))	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu
part IX)))))))))))))) part X Part X Part X Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu
potal. (Column Part IX 2) 2) 2) 3) 4) 5) 6) 7) 6) 7) 6) 7) 7) 7) 8) 8) 8) 8) 8) 8) 8	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu
potal. (Column Part IX 2) 2) 3) 4) 5) 6) 7) 6) 7) 6) 7) 6) 7) 7) 8) 8) 8) 8) 9) 10 11 12 13 13 14 15 16 17 17 18 18 18 18 18 18 18 18	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu
potal. (Column Part IX 2) 3) 4) 5) 6) 7) 6) 7) 6) 7) 6) 7) 7) 7	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability ncome taxes It Payable lies	on Form	· · · ·		(b) Book valu

Part XI

2

b

1

2

c

Schedule D (Form 990) 2018

Page 4

-2,717,062

-4,353,293

324,085,991

292,325,651

4,368,207

2.609

287,957,444

287.960.053

328,439,284

2c c d 2d -2.6092e e

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b -4,353,293 b Add lines **4a** and **4b** 4c c

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments

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

Other (Describe in Part XIII)

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . .

d Add lines 2a through 2d Amounts included on Form 990, Part IX, line 25, but not on line 1:

3

Investment expenses not included on Form 990, Part VIII, line 7b . .

4 b

Return Reference

See Additional Data Table

Add lines **4a** and **4b**

5 Part XIII **Supplemental Information**

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Explanation

2a

2b

2a 2b

2c

2d

4a

4b

4,368,207

-2,820,220

105.767

4c 5

2.609

Schedule D (Form 990) 2018

5

2e

3

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: 18007697 **Software Version:** 2018v3.1

Name: Teach for America Inc

EIN: 13-3541913

Supplemental Information

Return Reference	Explanation
	TEACH FOR AMERICA HELD A SECURITY DEPOSIT FROM A SUBLEASE TENANT FROM IN ITS DC OFFICE IN THE AMOUNT OF \$8,000 THIS AMOUNT IS RECORDED AS A LIABILITY ON TEACH FOR AMERICA'S BALANC E SHEET

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	Teach For America's endowment is intended to provide a continuous source of funding to sup port the institution's primary educational and social mission. The endowment's principal is intended to be left untouched, while its earnings are used to fund various organization programs (and grants).

S

upplemental Information						
Return Reference	Explanation					
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	TFA follows guidance that clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This guidance provides that the tax effects from an uncertain tax position can only be recognized in the financial statements if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. TFA is exempt from federal income tax under IRC section 501(c)(3), though it is subject to tax on in come unrelated to its exempt purpose, unless that income is otherwise excluded by the Code. TFA has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated business income, to determine its filing and tax obligat ions in jurisdictions for which it was nexus, and to identify and evaluate other matters that may be considered tax positions. TFA has determined that there are no material uncerta in tax positions that require recognition or disclosure in the accompanying financial statements. In addition, TFA has not recorded a provision for income taxes as it has no material altax liability from unrelated business income activities.					

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	INVESTMENT MANAGEMENT FEES2609

Explanation
RECLASS IT SERVICES TO PART VIII, LINE 11 - 81160 RECLASS FUNDRAISING EXPENSES TO PART VII I, LINE 8B1518670 RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B2740828 RECLASS LO SS ON DISPOSAL TO PART VIII, LINE 7174955
Ι

Supplemental Information	
Return Reference	Explanation
Other expenses in audited	RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B - 2740828 RECLASS LOSS ON DISPOSAL - 174955 LOSSES ON UNCOLLECTIBLE PLEDGES - 14914 RECLASS IT SERVICES TO PART VIII, LINE 118116 0 RECLASS FUNDRAISING EXPENSES TO PART VIII, LINE 8B - 1518670

-

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	INVESTMENT MANAGEMENT FEES - 2609

_

Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www irs gov/Form990 for instructions and the latest information **Employer identification number** Name of the organization Teach for America Inc 13-3541913 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No

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

Supplemental Information Regarding

Fundraising or Gaming Activities

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

SCHEDULE G

Total

licensing

(Form 990 or 990-EZ)

DLN: 93493101003080 OMB No 1545-0047

Open to Public

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.1	Does the organization conduct gaming	activities with nonmember	5?		☐ Yes	□Ne	
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		member of a partnership or other entity		□Yes		
3	Indicate the percentage of gaming activ	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
4	Enter the name and address of the pers	son who prepares the orga	nization's gaming/special events books and ri	ecords			
	Name ►						
	Address ►						
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		anization ▶ \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable di	stributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		ated to other exempt organizations or spent		53		
Pai	t IV Supplemental Informatio	n. Provide the explanat	rions required by Part I, line 2b, column licable. Also provide any additional info				 S.
_	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493101003080 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Teach for America Inc 13-3541913 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

terms and purposes

Schedule I (Form 990) 2018

Software ID: 18007697

Software Version: 2018v3.1

EIN: 13-3541913

Name: Teach for America Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	c Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Leadership For Educational Equity Foundation 1805 7th Street NW Washington, DC 20001	46-2093041	501(c)(3)	4,693,693	0	N/A	N/A	The purpose of this grant is to assist LEE member growth and engagement. To grow overall membership base by an additional 2,000 Teach For America alumni and corps members. At the time of the grant, there are over 41,000 LEE members LEE planned to grow to 43,000 members across the US and aimed to attract more than 65% of Teach For America corps members and alumni by 2018. LEE also planned to grow number of LEE members to include an additional 90 senior leaders in senior policy, advocacy and organizing leaders, as well as an additional 1,500 LEE members who participate in regional workshops and fellowships
Phoenix Union High School District 4502 N Central Ave Phoenix, AZ 85012	86-6000534	Government Entity	125,000	0	N/A	N/A	The purpose of this grant is to create spaces that support the successful programs we have built the past four years. We built a campus on an idea. An idea that all students can achieve greatness no matter the zip-code in which they live and to be the first "A" rated high school in Maryvale. Now that we know what works, our space is not necessarily suited to do that. This money would allow us to build a STEM lab, buy additional athletic equipment, create an office that is more family friendly so there are spaces to call and meet with parents, and help fund our college visits and AMPED and GIC classes

(g) Description of (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) University of Nevada Las Vegas 88-6000024 Government Entity 1,000,000 0 N/A IN/A The purpose of this 4505 South Maryland Parkway grant is to improve the Las Vegas, NV 89154 quality of teacher preparation, be an enterprise with selfsufficiency to make hiring decisions, programmatic implementation, and curriculum changes. have a selective admissions model able to identify ways in which acceptance to this initiative is driving systematic support for ongoing innovation and examination of

promising new approaches to education

and educator preparation and strengthen the College's partnership with TFA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Corp Member/Alumni Alumni Support 1070 814,894 0 N/A N/A
Corp Member/Alumni Award 234 1,069,999 0 N/A N/A

0 N/A

0 N/A

0 N/A

(d)Amount of

(e)Method of valuation (book,

N/A

(f)Description of non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(b)Number of

4585

5970

(c)Amount of

450,010

357,172

449,607

(a)Type of grant or assistance

Corp Member/Alumni Certification Expense

Corp Member/Alumni CM Other Support

Corp Member/Alumni Fellowship

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. (a)Type of grant or assistance (b)Number of (c)Amount of (d)Amount of (e)Method of valuation (book. (f)Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other) Corp Member/Alumni Financial Aid 2441 4,491,044 OIN/A N/A Corp Member/Alumni Student Assessment 1431 53,493 O N/A IN/A Testing Corp Member/Alumni Professional 158 40.108 0 N/A N/A Development (non-staff)

0 N/A

7,951

380

Other Corp Member/Alumni Support

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed Data -	DLN: 934	9310	1003	080		
Sch	nedule J	Compensation Inform	nation ○∾	IB No	1545-0	0047		
(Form 990)		For certain Officers, Directors, Trustees, Key E		18				
	Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.							
► Attach to Form 990.								
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.qov/Form990</u> for instructions a	nd the latest information.		to Pul ectio			
	me of the organiza	ation	Employer identificat	ion nu	ımber			
rea	cn for America Inc		13-3541913					
Pa	rt I Questi	ons Regarding Compensation	•					
					Yes	No		
1a		piate box(es) if the organization provided any of the following to ection A, line 1a Complete Part III to provide any relevant inforn						
			nce or residence for personal use					
	_	· · · · · · · · · · · · · · · · · · ·	usiness use of personal residence					
			club dues or initiation fees					
	L Discretion	ary spending account \square Personal service	es (e g , maid, chauffeur, chef)					
b		kes in line 1a are checked, did the organization follow a written p ill of the expenses described above? If "No," complete Part III to		1 b				
2	Did the organiza	ition require substantiation prior to reimbursing or allowing expei es, officers, including the CEO/Executive Director, regarding the	nses incurred by all	2				
	directors, truste	es, officers, including the CEO/Executive Director, regarding the	items checked in line 147					
3		of any, of the following the filing organization used to establish th						
	_	EO/Executive Director Check all that apply Do not check any bo d organization to establish compensation of the CEO/Executive D						
	П с							
	·	ation committee						
			e board or compensation committee					
4		did any person listed on Form 990, Part VII, Section A, line 1a,	·					
	related organiza							
а	Receive a sever	ance payment or change-of-control payment?		4a		No		
b	Participate in, o	receive payment from, a supplemental nonqualified retirement	olan?	4b		No		
С		receive payment from, an equity-based compensation arrangem		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts	for each item in Part III					
	Only 501(c)(3), $501(c)(4)$, and $501(c)(29)$ organizations must complete	lines 5-9.					
5	For persons liste	ed on Form 990, Part VII, Section A, line 1a, did the organization						
	compensation co	ontingent on the revenues of						
a	The organization			5a		No		
b	Any related orga	anization? 5a or 5b, describe in Part III		5b		No		
6	•	ed on Form 990, Part VII, Section A, line 1a, did the organization	nay or accrue any					
•		ontingent on the net earnings of	pay or decrue any					
а	The organization	17		6a		No		
b	Any related orga	anization?		6b		No		
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A, line 1a, did the organization escribed in lines 5 and 6? If "Yes," describe in Part III	provide any nonfixed	7		No		
8	subject to the in	nts reported on Form 990, Part VII, paid or accured pursuant to a utial contract exception described in Regulations section 53 4958						
	ın Part III			8	L	No		
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow the rebuttable presumption pro	cedure described in Regulations section	9				
Ear I	Danarwark Badu	ction Act Notice, see the Instructions for Form 990.	Cat No 50053T Schedule 1	/Earn	. 000)	2018		

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

Part II Officers, Directors, Trustees, Rey Employees, and Ting							
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	≥ction A, line 1a, a	pplicable column (ر	<u>ン) and (E) amour</u>	nts for that indi	vidual
(A) Name and Title	(B) Breal	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable benefits	columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						•	
	1	1	1		1	I	1
							!
				+			
	+			+			
				+			
1-		-		+			
1							
			1				

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

Additional Data

(1)

(II)

(1)

(III)

(1)

[(II)

(1)

(II)

(1)

(II)

(1)

(11)

(1)

(11)

(1)

(i)

(1)

(II)

Director/Officer-CEO KEVIN HUFFMAN

DIRECTOR Beginning

1/19/19/ EVP, Chief External Officer until October 2019 JOSHUA GRIGGS

& CFO

EVP, TALENT, OPERATIONS

TRACY-ELIZABETH CLAY

SVP, General Counsel &

Chief Risk/Compliance Officer, Secretary SUSAN ASIYANBI

EVP, Chief Operating &

SVP, Recruit & Adm until

Feb 2019/EVP, Chief External Officer beginning

EXECUTIVE DIRECTOR

SVP, REGIONAL FIELD

MICHELLE CULVER

Program Officer JOSHUA P ANDERSON

Feb 2019 PAUL KEYS

EXECUTIVE SANDEEP CHELLANI

SVP, IT & CHIEF INFORMATION OFFICER FATIMAH BURNAM

SVP, EXECUTIVE LEADERSHIP & LEARNING KIRA ORANGE-JONES

SVP, Regional Field

Executive

177,162

327,816

238,528

404,391

270,779

294,894

258,377

248,984

246,034

233,321

Software ID: 18007697 Software Version: 2018v3.1

EIN: 13-3541913

Name: Teach for America Inc								
Form 990, Schedule J,	Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees							
(A) Name and Title	(B) Breakdown	of W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
	(i) Base Compensation	(ii)	(iii)	other deferred		benefits	(B)(ı)-(D)	column (B)
		Bonus & incentive	Other reportable	compensation			reported as deferred on prior Form 990	
		compensation	compensation				prior Form 990	
ELISA VILLANUEVA BEARD (I)	460,977	o	4.500	13.500	25.199	504.176	0	

4,500

2,908

1,120

13,500

5,943

13,500

11,945

13,350

13,500

13,095

12,222

12,442

25,199

20,766

21,280

22,608

12,312

8,746

7,843

25,267

3,791

29,494

8,734

504,176

203,871

365,504

273,081

416,703

292,875

317,357

296,739

264,997

287,970

242,055

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493101003080 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Teach for America Inc 13-3541913 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household 46,677 Cost Χ goods Cars and other vehicles Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 118 11,058,257 Selling cost 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 . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles Food inventory . . . Χ 37,933 Cost 19 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ▶ See Additional Data 26 Other ▶ (______) Other ► (______) 27 Other ▶ (_______) 28 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 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2
	tion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part umber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
Schedule M, Part I COLUMN B	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN PART I, COLUMN (B) OF SCHEDULE M
	Schedule M (Form 990) (2018)

Additional Data

Software ID: 18007697 Software Version: 2018v3.1

EIN: 13-3541913

Name: Teach for America Inc

Other ▶ (

Other ▶ (Personal Care Other ▶ (

Other ▶ (

Other ▶ (

Event Supplies)

Part I, Lines 25-28				
	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	
Other ► (CRYPOTOCURRENCY)	X	1	7,910	Selli

(d) Method of determining noncash contribution amounts ling cost



Χ

Χ

Χ

10,505 Cost

1,630 Cost

2,100 Cost

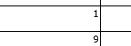
185 Cost

10,456 Cost

Tickets/Membership)

Photos)

Fitness)



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SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury		Complete to prov Form 990 or	ride information fo • 990-EZ or to prov ▶ Attach to Forn	on to Form 990 or 9 r responses to specific questi ide any additional informatio n 990 or 990-EZ. 90 for the latest information.	ons on n.	OMB No 1545-0047 2018 Open to Public Inspection
Vame l 86 the of g Feach for America :	Inc				Employer iden 13-3541913	tification number
990 Schedule	e O, Su	pplemental Information	1			
Return Reference				Explanation		
Form 990, Part III, Line 4d Description of other program services	has an powerfit ties that to addrift formation intended sroom pocial eachers cation of American American and power formation of the second sec	alumni base of former corps rul opportunity to continue to exit support and encourage alumess issues negatively impactir on/knowledge dissemination a di to develop alumni in leaders practice, school leadership, scentrepreneurship Nearly two tis, as school principals, as supwhile the other third worked acceptance of the second principals.	nembers all over the kpand educational op ini to continue to wor ing low income comm ind networking TFA ship practice and/or s shool systems leaders inirds of our 52,700 a erintendents or in other cross multiple sectors ere doing mission aliges	Revenue \$ 0) Alumni Affairs - Tr world These individuals present oportunity TFA engages in activition in education and across sector unities- most notably focused on also supports alumni via activitie opecific programmatic areas classiship, policy/organizing work, and lumni in 2019 were employed as her roles directly impacting edus a Approximately 78% of Teach fogned work either in education or	ta rs in s s t t	

Return Reference

The Board of Directors has designated an Executive Committee which mainly handles CEO perf

Part VI, Line
1a Delegate broad authority to a committee

Return Reference	Explanation
Form 990,	Teach For America's form 990 was prepared by an independent Tax Preparer Management perfo
Part VI, Line	rmed an in-depth review A copy of the 990 was provided to the audit committee of the boar
11b Review	d of directors for review and approval. The full Board receives a copy of the 990 Form via

Part VI, Line
11b Review
of form 990
by governing
body

rmed an in-depth review A copy of the 990 was provided to the audit committee of the boar
d of directors for review and approval. The full Board receives a copy of the 990 Form via
email before the 990 form is officially filed with the IRS

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	Teach For America, Inc requires each officer, director, or key employee annually (1) to review the Conflict of Interest Policy, (2) to disclose any possible personal, family, or business relationship that reasonably could give rise to a conflict of interest or the appearance of a conflict of interest, and (3) to acknowledge by his or her signature that he or she is acting in accordance with the letter and spirit of such Policy. When a Covered Person becomes aware of a proposed Covered Transaction, he or she shall have a duty to take the following actions (a) immediately disclose the existence and circumstances of such Covered Transaction to the Chair (in the case of officers and key employees other than the Chair) or to the Board of Directors of the Organization (the "Board") or applicable committee thereof (in the case of directors and the Chair), (b) refrain from using his or her personal influence to encourage the Organization to enter into the Covered Transaction, and (c) physically excuse himself or herself from participation in any discussions regarding the covered Transaction with officers, directors, and employees of the Organization, except to respond to requests for information. Conflicts of interest are administered by the boar d of Directors, or any applicable committee thereof, with the assistance of the Board chair, and are responsible for reviewing the annual disclosures and receiving disclosures of proposed covered transactions, reviewing proposed covered transactions and determining of a nactual conflict of interest exists. The board documents their review of each declaration in the minutes of the meeting at which the covered transaction is covered Documentation also includes the basis for the final determination and resolution for each covered transaction if the final determination was accomplished by action of a Board committee or the Board chair, a report to the Board of Directors is conducted regarding any covered transaction approved in accordance with the conflicts of interest policy

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	Teach For America, Inc. uses independent compensation consultants to ensure that the salar y set for the CEO is appropriate. CEO compensation is approved by the executive committee of the board. Documentation provided to the committee before voting on CEO compensation in cludes current salary, benchmarked market data, salary recommendations for the upcoming year, and alternative options for potential salary increases. The compensation setting process, as outlined above, was last performed during the period beginning in March 2019 and concluding in June 2019.

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	Independent compensation consultants are used to ensure that the salaries for the manageme nt team members and other key officers are appropriate and in line with those of comparable organizations. Compensation structures and individual staff member salaries are reviewed and adjusted annually at Teach For America. Regarding our compensation structures, each y ear, the Benefits & Compensation team recommends baseline adjustments to the Management Te am based on market research. Once approved, any financial impact is included in the overal. I budget recommended to the finance committee and then approved by the board. These compensation structures are then used to set staff member salaries in the next year in line with the organization's guiding principles. Those guiding principles consist of (1) paying competitively relative to non-profit organizations but not at the top of the market, (2) main taining internal pay equity, (3) accounting for changes in the marketplace for individual roles, and (4) ensuring the organization is paying fairly and competitively over the course of staff member careers through annual evaluation of a staff member's changing contribution to the organization. Staff salaries are calibrated annually by the management team and approved by the CEO to ensure fairness and equity across the organization and alignment with our compensation philosophy. The compensation setting process, as outlined above, per tains to the CEO and EVP level positions and was last performed during the period beginning in March 2019 and concluding in June 2019.

990 Schedule O, Supplemental Information Explanation

Reference	Explanation
Form 990,	Teach For America makes its form 990 available to public by retaining a copy at its place

Part VI, Line
19 Required
documents
available to
the public

of business The form 990 is likewise published on the internet at www guidestar org and a
t www teachforamerica org Teach For America also publishes its financial statements on it
s website The organization's governing documents and legal attachments, Form 1023 and the
conflict of interest policy are available to the public if requested

Return Reference	Explanation
Form 990, Part VIII, Line 2a FEES FOR SERVICES REVENUE	Teach For America has contractual agreements with various school districts across the Unit ed States of America to recruit, select, train, and place corps members to teach within th eir school districts. Teach For America recognizes revenue related to these contractual ag reements as earned, that is, when the corps member is placed.

Return Explanation
Reference

Revenue

Form 990,	OTHER INCOME - Total Revenue 9997, Related or Exempt Function Revenue 9997, Unrelated Bu
Part VIII, Line	siness Revenue,Revenue Excluded from Tax Under Sections 512, 513, or 514,
11d Other	
Miscellaneous	

Return Explanation
Reference
Form 990, LOSSES ON UNCOLLECTIBLE PLEDGES - -14914,

Part XI, Line
9 Other
changes in
net assets or
fund
balances

Return

Reference	
Form 990,	The organization's governing body has a committee charged with oversight of the audit of t
Part XII, Line	he organization's financial statements. The committee's process for oversight of the audit
2c CHANGE	, performed by an independent accounting firm, has not changed for the reporting year
OF	

Explanation

OF
OVERSIGHT
PROCESS
OR
SELECTION
PROCESS