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DLN: 93493137042660

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury

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

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 D Employer identification number **B** Check if applicable Please use IRS Graduate Teaching Fellows Fed 3544 Address change 93-0766824 label or Doing Business As E Telephone number Name change print or type. See Specific (541) 344-0832 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-G Gross receipts \$ 387,153 Termination tions. Amended return City or town, state or country, and ZIP + 4 Eugene, OR 97401 Application pending Name and address of Principal Officer H(a) Is this a group return for ΓYes **Γ**Nο affiliates? H(b) Are all affiliates included? Tax-exempt status (If "No," attach a list See instructions) Group Exemption Number 🕨 Web site: ► N/A **K** Type of organization

✓ Corporation

trust

association L Year of Formation 1976 M State of legal domicile OR Part I Summary Briefly describe the organization's mission or most significant activities CONTRACT NEGOTIATIONS ENFORCEMENT & ADMINISTRATION FOR ALL OF ITS MEMBERS Activities & Governance Check this box 🗂 if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) . 8 8 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of employees (Part V, line 2a) 3 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) . 0 Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 506 Program service revenue (Part VIII, line 2g) . 304,863 325,356 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1.806 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 55,950 61,291 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 362,619 387,153 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses 121,404 146,313 10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b (Total fundraising expenses, Part IX, column (D), line 25 $\frac{0}{2}$ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 282,052 281,846 403,250 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 18 428,365 19 Revenue less expenses Subtract line 18 from line 12 -40,631 -41,212 89 Beginning of Year **End of Year** Assets (d Balance 20 Total assets (Part X, line 16) 141.530 117,529 21 Total liabilities (Part X, line 26) 18,033 20,729 22 Net assets or fund balances Subtract line 21 from line 20 123,497 96,800 Part II 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 Please ***** 2010-05-17 Sign Signature of officer Here JACOB DITTMER Treasurer Type or print name and title Date Check if Preparer's PTIN (See Gen Inst) signature Larry E Byers Paid empolyed 🕨 「

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

Byers & Hurlburt LLC

Lake Oswego, OR 97035

4000 SW Kruse Way Place Bldg 2-Suit

Preparer's

Use Only

Firm's name (or yours

address, and ZIP + 4

if self-employed),

EIN ▶

Phone no (503) 598-2303

Yes No

Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission CONTRACT NEGOTIATIONS ENFORCEMENT	& ADMINISTRATION FOR ALL	OF ITS MEMBERS		
2	Did the organization undertake an the prior Form 990 or 990-EZ?		rvices during the year	which were not listed on	Yes V No
	If "Yes," describe these new servi	ces on Schedule O			
3	Did the organization cease conductservices?	cting or make significant	t changes in how it cond	ducts any program 	Yes V No
	If "Yes," describe these changes of	on Schedule O			
4	Describe the exempt purpose ach Section 501(c)(3) and (4) organiz others, the total expenses, and re	ations and 4947(a)(1) t	rusts are required to re	port the amount of grants and	
4a	(Code) (Expens	ses \$ 428,365	ıncludıng grants of \$) (Revenue \$)
4b	(Code) (Expens	ses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expens	ses \$	including grants of \$) (Revenue \$)
4d	Other program services (Descri (Expenses \$	be in Schedule O) including grants of	f \$) (Revenue \$)
4e	Total program service expenses	\$ 428,36	5 Must equal Part IX, i	Line 25, column (B).	

Part IV	Checklist	of Red	uired	Schedules

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

Part IV Checklist of Required Schedules (Continued)

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

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a	0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	О		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and i	reportable		
	gaming (gambling) winnings to prize winners?	1c		No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return	3		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	5? 2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covereturn?	ered by this		N o
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other			
	over, a financial account in a foreign country (such as a bank account, securities account, or other account)?			No
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E Financial Accounts.	Bank and		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	? 5a		Νο
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tran	nsaction? 5b		Νo
с	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regardi</i>	ng Prohibited		Νο
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			No
b	If "Yes," did the organization include with every solicitation an express statement that such contribute were not tax deductible?	outions or gifts 6b		No
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 more?	5 or 7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it to file Form 8282?	was required to		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a benefit contract?	a personal 7e		
f				
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as require			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098			
	required?	7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(s)$			
	excess business holdings at any time during the	8		Νο
	year?			
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
а	,	9a		N o
Ь	, , , , , ,	9b		N o
10	Section 501(c)(7) organizations. Enter			
a	, , , , , , , , , , , , , , , , , , ,			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	041? 12a		Νο
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Section	A. Governing	Bouy and	Management	

tion A. Conomina Rody and Management

			165	140
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 8			
b	Enter the number of voting members that are independent 1b 8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
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	
b	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	Yes	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No

Section B. Policies

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

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 - own website another's website upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Graduate Teaching Fellows Fed 870 E 13th Ave

Eugene, OR 97401

(541) 344-0832

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

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

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

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

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

Check this box if the organization did not compensate any officer, director, trustee or key employee										
		(C) Position (check all that apply)								(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
WES SHIRLEY , External relati	1 00	Х						0	0	0
SAM BERNOFSKY, Organizing	1 00	Х						0	0	0
LIBBY SCHOENE , President	1 00	Х						0	0	0
KEITH APPLEBY , Political educa	1 00	X						0	0	0
JESSALYNN STRAUSS , Operations	1 00	Х						0	0	0
JACOB DITTMER , Treasurer	1 00	X						0	0	0
HEATHER HOLMQUEST , Member communic	1 00	Х						0	0	0
DAN ANDERSEN, Grievances	1 00	Х						0	0	0
						ļ				
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							_			
						<u> </u>				
			-	_			-			
						 				
			-	-		-	-			
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Part VII Continued

(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	o at Institutional Trustee	(che apply	y)	Highes employ	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total					•		>			

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►0

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$	100.000 in compensation	_

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization

U

Part State
VIII

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				(A) Total Revenue	(B) Related or Exempt Function	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
	4_	Fodomatod community			Revenue		512, 513, or 514
grants nounts	1a	Federated campaigns 1					
	Ь	Membership dues 1					
	с	Fundraising events					
ा इ.स	_	10					
ਠੰਛੋ	d	Related organizations					
å. Æ	e	Government grants (contributions)	•				
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants, and similar amounts not included above	506				
		11					
	g	Noncash contributions included in	י				
ठ≅	h	lines 1a-1f \$ Total (Add lines 1a-1f)		506			
	-		<u> </u>				
<u>a</u>	2-	Membership Dues & Assessments	Business Code				
Program Service Revenue	2a	Membership Dues & Assessments	-	325,356			325,356
	ь		_				
	С						
	d		-				
3 8	е		_				
<u> </u>	f	All other program service revenue					
Š	g	Total. Add lines 2a-2f					
	3	Investment income (including div				 	
		other similar amounts)	0				
	4	Income from investment of tax-exempt	oond proceeds	0			
			•				
	5	Royalties		0			
	6-	(i) Real	(II) Personal				
	6a b	Gross Rents Less rental					
	"	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)		0			
		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of					
		assets other					
	ь	than inventory Less cost or					
		other basis and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)		0			
	8a	Gross income from fundraising events (not including					
<u> </u>		\$ of contributions reported on line					
듄		1c) See Part IV, line 18					
ě		Attach Schedule G If total exceeds					
Œ		\$15,000					
Other Revenue	b c	Less direct expensesb. Net income or (loss) from fundrais		0			
ō			ing events				
	9a	Gross income from gaming activities See part IV, line 19					
		Complete Schedule G ıf total					
		exceeds \$15,000					
	ь	Less direct expenses					
	c	Net income or (loss) from gaming		0			
			<u> </u>				
	10a	Gross sales of inventory, less returns and allowances .	,				
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales o		0			
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS		4,454	4,454		
	ь	INSURANCE ADMIN FEES		55,809	55,809		
	с	COPE RECEIPTS		1,028	1,028		
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	4.0	——————————————————————————————————————	\$ 61,291	207.453	61,291		325,356
	12	Total Revenue. Add lines 1h, 2g, 8c,		387,153	01,291		323,330
		9c, 10c, and 11e	▶				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).					
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	118,412	118,412		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,360	3,360		
9	Other employee benefits	13,775	13,775		
10	Payroll taxes	10,766	10,766		
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting	2,510	2,510		
d	Lobbying	0	,		
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	14,678	14,678		
17	Travel	2,921	2,921		
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0	2,321		
19	Conferences, conventions and meetings	7,178	7,178		
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,068	1,068		
23	Insurance	0	·		
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	SUPPLIES	6,399	6,399		
	Printing and Publications	7,504	7,504		
c	ORGANIZATION & ARBITRATION	9,746	9,746		
d	MISC PROFESSIONAL FEES	7,875	,		
e	AFFILIATION FEES	209,146	,		
_	All other expenses	13,027	13,027		
25	Total functional expenses. Add lines 1 through 24f	428,365	428,365	0	0
26	Joint Costs. Check If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	120,303	120,303	U	0

Dart V	Balance	Shoot
Part X	Balance	Sheet

					(A) Beginning of year			B) fyear
	1	Cash—non-interest-bearing			90,505	1		50,141
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net		46,768	4		57,539	
	5	Receivables from current and former officers, directors, trustees, other related parties Complete Part II of Schedule L		iployees or		5		0
	6	Receivables from other disqualified persons (as defined under sec persons described in section 4958(c)(3)(B) Complete Part II of Sc	tion 49			6		0
	7	Notes and loans receivable, net				7		0
	8	Inventories for sale or use		8		0		
92	9	Prepaid expenses and deferred charges			1,192	9		4,342
Assets	10a	Land, buildings, and equipment cost basis	_{10a}	31,860				
4		Language Market de managation Commista Dark VII of	IUa	31,000				
	b	Less accumulated depreciation Complete Part VI of Schedule D	10Ь	26,853	2,565			5,007
	11	Investments—publicly traded securities		•		11		0
	12	Investments—other securities See Part IV, line 11 Complete Part Schedule D				12		
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Of Schedule D$.	t VIII			13		0
	14	Intangible assets				14		0
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			500	15		500
	16	Total assets. Add lines 1 through 15 (must equal line 34)			141,530	16		117,529
	17	Accounts payable and accrued expenses .			18,033	17		20,729
	18	Grants payable		18				
	19	Deferred revenue		19				
	20	Tax-exempt bond liabilities		20				
<u>a</u>	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ï		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				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			18,033	26		20,729
s e e		Organizations that follow SFAS 117, check here ► ✓ and comple through 29, and lines 33 and 34.	te line	s 27				
an	27	Unrestricted net assets		123,497	27		96,800	
Balance	28	Temporarily restricted net assets			28			
듣	29	Permanently restricted net assets			29			
r Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and lines 30 through 34.	comple	ete				
S 0.	30	Capital stock or trust principal, or current funds			30			
şet.	31	Paid-in or capital surplus, or land, building or equipment fund			31			
Assets	32	Retained earnings, endowment, accumulated income, or other fund			32			
Net ,	33	Total net assets or fund balances	123,497	33		96,800		
Ż	34	Total liabilities and net assets/fund balances		141,530	 		117,529	
	VT	Financial Ctatements and Banautine						
Pa	rt XI	Financial Statements and Reporting					Yes	No

Dort VI	Financial Statements and Reporting
7. 1 - 2. 4 - 1	- Financial Statements and Reporting

			res	140
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
ь	If "Yes." did the organization undergo the required audit or audits?	3b		No

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Open to Public Inspection

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

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

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

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

♦ Se	ection 501(c)(3) organizations that	: have filed Form 5768 (election under the have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 (Form 5768)	under section 501	•	•
N a	ame of the organization aduate Teaching Fellows Fed 3544	zations complete rait iii			ntification number
Pai		y all organizations exempt e the instructions for Schedule		93-0766824 n 501(c) and sectio r	
1	Provide a description of the org	ganızatıon's dırect and ındırect polit	tical campaign act	tivities in Part IV	
2	Political expenditures				\$362
3	Volunteer hours				30
Pai	To be completed b for Schedule C for de	y all organizations exempt etails.)	under section	n 501(c)(3). (See the	nstructions
1	Enter the amount of any excise	tax incurred by the organization ui	nder section 4955	5	\$
2	Enter the amount of any excise	e tax incurred by organization mana	gers under sectio	n 4955	\$
3	If the organization incurred in a	a section 4955 tax, did it file Form	4720 for this year	r?	┌ Yes
4a	Was a correction made?				┌ Yes
ь	If "Yes," describe in Part IV				
Pai		y all organizations exempt for Schedule C for details.)	under section	n 501(c), except sec	ction 501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exemp	pt function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	rganızatıon's ınternal funds contrıb	uted to other orga	nızatıons for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	mpt function expenditures Add line	es 1 and 2 and ent	ter here and on Form	\$
4	Did the filing organization file F	form 1120-POL for this year?			┌ Yes ┌ No
5	were made Enter the amount p political contributions received	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly delivere action committee (PAC) If addition	paid from the filing d to a separate po	g organization's own intern olitical organization, such	al funds or were as a separate
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

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

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	bbying Expend	litures—		oly	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line	es 1a and 1b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000		taxable amount				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1	1,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

	5768 (election under section 501(h)). (See the instructions for Schedule C for d					
		(a	1)		(b)	
	·	Yes	No	A	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of Volunteers?					
ь				1		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i	Other activities If "Yes," describe in Part IV					
j	Total lines 1c through					
-	1) Did the patientias in line 1 agree the arrangements in the net decombed in section FO1/a)/2)2		Ī	1		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes" enter the amount of any tax incurred under section 4912			+		
	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	5016) or	
G.	section 501(c)(6). (See the instructions for Schedule C for details.)		301(,, 0.	
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), sec					
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.)	OK II	Part	III-A	٠,	
1	Dues, assessments and similar amounts from members	T	1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	F	'			
	expenses for which the section 527(f) tax was paid).					
	Current Year		2a \$			
b	Carryover from last year		2b\$			
C	Total	<u> </u>	2c \$			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3 \$			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?		4 \$			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5 \$			
Pā	Supplemental Information	•				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information	Part II	l-B, line	e 1ı		
	Identifier Return Reference Explanation	on				

Part IV Supplemental I	nformation	
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

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

Supplemental Financial Statements

Employer identification number Name of the organization Graduate Teaching Fellows Fed 3544 93-0766824 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private henefit?

Par	t II	Conservation Easements. Complete if the organiza	ion (answered "Yes" to Form 990, Part IV, line 7.	
-		ose(s) of conservation easements held by the organization (chec Preservation of land for public use (e g , recreation or pleasure) Protection of natural habitat		that apply) Preservation of an historically importantly land area Preservation of certified historic structure	
2	Com	Preservation of open space plete lines 2a-2d if the organization held a qualified conservation e last day of the tax year	ı con	tribution in the form of a conservation easement Held at the End of the Y	

- Total number of conservation easements

 Total acreage restricted by conservation easements

 Number of conservation easements on a certified historic structure included in (a)

 Number of conservation easements included in (c) acquired after 8/17/06

 Held at the End of the Year

 2a

 2b

 2c

 2d
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
- 4 Number of states where property subject to conservation easement is located **>**
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?
- 6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$
- B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

- \$

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- a Revenues included in Form 990, Part VIII, line 1

- \$

b Assets included in Form 990, Part X

3	Using the organization's accession and other							ontinuea)
	items (check all that apply)		_	-	-			
а	Public exhibition	d	Γ	Loan or excha	ange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co Part XIV	llections and explain ho	w the	y further the or	ganızatıon's ex	empt purpose in		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to					ılar	Ves	□ No
Par	t IV Trust, Escrow and Custodial A	· · · · · · · · · · · · · · · · · · ·				<u> </u>		,
	Part IV, line 9, or reported an am							
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other intermediary	ford	ontributions or	other assets r	not	Yes	┌ No
b	If "Yes," explain why in Part XIV and complet	te the following table						
						A mou	nt	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21?				Γ,	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if	_						
_		(a)Current Year (b) Prior	Year (c)Two	Years Back (d)	Three Years Back (e)	Four Y	ears Back
1a	Beginning of year balance							
b	Contributions							
с	Investment earnings or losses							
d	Grants or scholarships							
e	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year	end balance held as						
а	Board designated or quasi-endowment 🕨							
b	Permanent endowment							
С	Term endowment ▶							
3a	Are there endowment funds not in the posses	sion of the organization	that	are held and ad	ministered for	the		
	organization by						Yes	No
	(i) unrelated organizations					3a(i)		<u> </u>
	(ii) related organizations					3a(ii)		<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the					3b		<u> </u>
	t VI Investments—Land, Buildings				t V line 10			
rei	t vi investments—Land, bundings	, and Equipment. S		a) Cost or other	(b)Cost or other			
	Description of investment			asis (investment)	basis (other)	(c) Depreciation	(d) B	ook value
1a	Land					1		
	Buildings]		
	Leasehold improvements							
	Equipment							
	Other				31,860	26,853		5,007
	I. Add lines 1a-1e (Column (d) should equal For	rm 990, Part X, column (B.), line	e 10(c).)	<u> </u>	, , , , , , , , , , , , , , , , , , ,		5,007
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		<u> </u>		Schedule D (F	orm 9	-

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
	· · · · · · · · · · · · · · · · · · ·	1		

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	its	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	387,153
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	428,365
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-41,212
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	14,516
8	Other (Describe in Part XIV)	8	-55,809
9	Total adjustments (net) Add lines 4 - 8	9	-41,293
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-82,505
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	331,344
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		,
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	331,344
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	55,809
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	387,153
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Retu	rn
1	Total expenses and losses per audited financial statements	1	428,365
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	428,365
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	428,365

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

Ident if ier	Return Reference	Explanation
Part XII, Line 4b	Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Intercompany transfers \$55809
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Intercompany transfers \$ -55809

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DLN: 93493137042660

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information to Form 990**

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

2008
Open to Public

Inspection

Name of the organization
Graduate Teaching Fellows Fed 3544

Employer identification number
93-0766824

ldentifier	Return Reference	Explanation			
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The 990 is provided upon request			

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 10	Form 990, Part VI, Line 10 Form 990 Review Process	The form 990 is reviewed, signed and filed by the Treasurer

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

Cat No 51056K

Schedule O (Form 990) 2008

DLN: 93493137042660

OMB No 1545-0047 2008

Open to Public

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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

Related Organizations and Unrelated Partnerships

Inspection

Name of the organization Graduate Teaching Fellows Fed 3544					ification number
Part I Identification of Disregarded Entities				93-0766824	
(A) Name, address, and EIN of disregarded entity	(B) Primary activity Legal domicile (state or foreign country)		(D) Total income E	(E) nd-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizati	ons		_		
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity sta (if section 501(c))	tus Direct controlling (3)) entity
Graduate Teaching Fellows H&W Trust	Provide health & welfare				
870 E 13th Ave Eugene, OR97401 93-1268942	benefits to GTFF members	OR	501(c)9		N/A

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

(6)

ı	Part V	Transactions with Related	Organizations
		i i a ii ba c ii b ii b ii ii i i i c i a i c a	OI guille a divilo

Pal	Note. Complete line 1 if any entity is listed in Parts II, III or IV			T	res	No
1 D.		as with one or more related organizations listed in Parts II.	1//2	+-	+	
			11	3	+	No
		inty —	11		_	No
			10			No
			10			No
			16	-	\rightarrow	No
	Edding of four guarantees by other organization(3)		<u> </u>			
f	Sale of assets to other organization(s)		11	+		No
			19			No
			11		\neg	No
			11	i		No
-			-		\neg	
i	Lease of facilities, equipment, or other assets from other organization(s)		1j	i		No
		panization(s)	11	_	res	
	· · · · · · · · · · · · · · · · · · ·	• • •	11	ı		No
		· ,	11	n		No
			1r	1		No
0	Reimbursement paid to other organization for expenses		10	,		No
р	Reimbursement paid by other organization for expenses		1,	,		No
-						
q	O ther transfer of cash or property to other organization(s)		10	1		No
r	O ther transfer of cash or property from other organization(s)		11	r		No
			_			
2	If the answer to any of the above is "Yes." see the instructions for information of	n who must complete this line, including covered relationsh	ups and transaction thresholds			
_		(B)				
	Name of other organization(s)		Amount Involved			
(1)						
(2)						
(3)						
(4)						
	the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Ipt of (i) interest (ii) annuities (iii) royalities (iv) rent from a controlled entity grant, or capital contribution to other organization(s) grant, or capital contribution from other organization(s) so or loan guarantees to or for other organization(s) so rolan guarantees by other organization(s) of assets to other organization(s) nase of assets from other organization(s) ange of assets of facilities, equipment, or other assets to other organization(s) rmance of services or membership or fundraising solicitations for other organization(s) mance of services or membership or fundraising solicitations by other organization(s) ng of facilities, equipment, mailing lists, or other assets ng of paid employees bursement paid to other organization for expenses bursement paid to other organization for expenses rtransfer of cash or property to other organization(s) answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (A) (B) (C)					
(5)	iff, grant, or capital contribution to other organization(s) iff, grant, or capital contribution from other organization(s) cans or loan guarantees to or for other organization(s) ale of assets to other organization(s) ale of assets to other organization(s) iff, grant, or capital contribution from other organization(s) ale of assets to other organization(s) iff, grant, or capital contribution from other organization(s) ale of assets to other organization(s) iff, grant, or capital contribution from other organization from other organization from expenses iff, grant, or capital contribution from other organization for expenses iff, grant, or capital contribution from other organization					

Part VI Unrelated Organizations Taxable as a Partnership

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

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