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Short Form

Return of Organization Exempt From Income Tax

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

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form. The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2010

Open to Public Inspection

Form 990-EZ

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning

and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **TUCSON VALUES TEACHERS**

D Employer identification number: **26-4637708**

E Telephone number: **520-327-7619**

F Group Exemption Number: **▶**

G Accounting Method: Cash Accrual Other (specify) **▶**

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: **WWW.TUCSONVALUESTEACHERS.ORG**

J Tax-exempt status (check only one) - 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ **▶ \$ 10,000.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)

Check if the organization used Schedule O to respond to any question in this Part I

		1	10,000.
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	10,000.
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
Expenses	a Gross sales of inventory, less returns and allowances	7a	
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	Other revenue (describe in Schedule O)	8	
	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	10,000.
	Grants and similar amounts paid (list in Schedule O)	10	10,000.
	Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	
	14 Occupancy, rent, utilities, and maintenance	14	
15 Printing, publications, postage, and shipping	15		
16 Other expenses (describe in Schedule O)	16	104.	
17 Total expenses. Add lines 10 through 16	17	10,104.	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-104.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	508.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	0.
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	404.

LHA For Paperwork Reduction Act Notice, see the separate instructions

Form 990-EZ (2010)

98 14

Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	508.	22	404.
23 Land and buildings		23	
24 Other assets (describe in Schedule O)		24	
25 Total assets	508.	25	404.
26 Total liabilities (describe in Schedule O)		26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	508.	27	404.

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

Check if the organization used Schedule O to respond to any question in this Part III

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

What is the organization's primary exempt purpose? **SEE SCHEDULE O**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 **SEE SCHEDULE O**

(Grants \$) If this amount includes foreign grants, check here

28a

29

(Grants \$) If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ANIL HIEMATH, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	CHIEF EXECUTIVE DIRECTOR	0.50	0.	0.
JACQUELYN JACKSON, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	EXECUTIVE DIRECTOR	40.00	0.	0.
CLARENCE BOYKINS, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
DONALD V. BUDINGER, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
MICHAEL DURAN, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
BILL HOLMES, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
REBECCA HUGHES, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
HELAINA LEVY, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
LISA LOVALLO, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
RONALD MARX, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
JOHN PEDICONE, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.
DONALD PITT, 4400 E. BROADWAY BLVD., #307, TUCSON, AZ 85711	DIRECTOR	0.50	0.	0.

Part V Other Information (Note the statement requirements in the instructions for Part V)

Check if the organization used Schedule O to respond to any question in this Part V

X

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O

Table with columns Yes, No and row 33. No is marked with X.

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

Table with columns Yes, No and row 34. No is marked with X.

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.

a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?

Table with columns Yes, No and row 35a. No is marked with X.

b If "Yes," has it filed a tax return on Form 990-T for this year?

Table with columns Yes, No and row 35b. N/A is marked.

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N

Table with columns Yes, No and row 36. No is marked with X.

37a Enter amount of political expenditures, direct or indirect, as described in the instructions.

37a 0.

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

Table with columns Yes, No and row 37b. No is marked with X.

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

Table with columns Yes, No and row 38a. No is marked with X.

b If "Yes," complete Schedule L, Part II and enter the total amount involved

38b N/A

39 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on line 9

39a N/A

b Gross receipts, included on line 9, for public use of club facilities

39b N/A

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.

b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

Table with columns Yes, No and row 40b. No is marked with X.

c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

0.

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization

0.

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T

Table with columns Yes, No and row 40e. No is marked with X.

41 List the states with which a copy of this return is filed. AZ

42a The organization's books are in care of JACQUELYN JACKSON

Telephone no. 520-327-7619

Located at 4400 E. BROADWAY BLVD. #307, TUCSON, AZ

ZIP + 4 85711

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

Table with columns Yes, No and row 42b. No is marked with X.

If "Yes," enter the name of the foreign country:

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

Table with columns Yes, No and row 42c. No is marked with X.

If "Yes," enter the name of the foreign country:

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year

43 N/A

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

Table with columns Yes, No and row 44a. No is marked with X.

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

Table with columns Yes, No and row 44b. No is marked with X.

c Did the organization receive any payments for indoor tanning services during the year?

Table with columns Yes, No and row 44c. No is marked with X.

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Table with columns Yes, No and row 44d.

- 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? Yes No
- a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? Yes No
If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ
- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? Yes No
If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Yes No
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Yes No
- 49a Did the organization make any transfers to an exempt non-charitable related organization? Yes No
- b If "Yes," was the related organization a section 527 organization? Yes No
- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

- f Total number of other employees paid over \$100,000 ▶ _____
- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None." NONE

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

- d Total number of other independent contractors each receiving over \$100,000 ▶ _____
- 52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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.

Sign Here Date 10/11/11
 Signature of officer Jacquelyn J. Jackson
 Type or print name and title JACQUELYN J. JACKSON EXECUTIVE DIRECTOR

Paid Preparer Use Only

Print/Type preparer's name KELLY L. MELTZER, CPA	Preparer's signature <u>[Signature]</u>	Date <u>10-5-11</u>	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶ BEACHFLEISCHMAN PC	Firm's EIN ▶ _____			
Firm's address ▶ P.O. BOX 64130 TUCSON, AZ 85728-4130	Phone no. (520) 321-4600			

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2010

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization

TUCSON VALUES TEACHERS

Employer identification number

26-4637708

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

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

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

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

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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 (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				4,751.	10,000.	14,751.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3				4,751.	10,000.	14,751.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						14,751.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4				4,751.	10,000.	14,751.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						14,751.

12 Gross receipts from related activities, etc (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test - 2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test - 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10% -facts-and-circumstances test - 2010.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15		%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16		%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17		%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18		%

19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

TUCSON VALUES TEACHERS

Employer identification number

26-4637708

FORM 990-EZ, PART I, LINE 10, GRANTS AND ALLOCATIONS:

ACTIVITY CLASSIFICATION: TUCSON VALUES TEACHERS PROJECT FUND

GRANTEE NAME: COMMUNITY FOUNDATION FOR SOUTHERN ARIZONA

GRANTEE ADDRESS: 2250 E. BROADWAY BLVD. TUCSON, AZ 85719

GRANTEE RELATIONSHIP: PROJECT FUND

AMOUNT GIVEN:

10,000.

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:

DESCRIPTION OF OTHER EXPENSES:

AMOUNT:

BANK SERVICE CHARGES

65.

MEALS AND MEETINGS

10.

OFFICE SUPPLIES

29.

TOTAL TO FORM 990-EZ, LINE 16

104.

FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO CREATE AN

EDUCATION-FIRST COMMUNITY BY RAISING AWARENESS OF THE IMPORTANCE OF

QUALITY EDUCATION, ENHANCING THE STANDING OF THE TEACHING PROFESSION,

AND HELPING TO ATTRACT, SUPPORT AND RETAIN THE VERY BEST TEACHERS FOR

EVERY K-12 CLASSROOM.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS:

TUCSON VALUES TEACHERS (TVT), WHICH LAUNCHED IN SEPTEMBER

2008, IS AN INNOVATIVE PARTNERSHIP AMONG THE BUSINESS

COMMUNITY, EDUCATORS AND THE PUBLIC IN PIMA COUNTY

DEDICATED TO TRANSFORMING THE STATUS LEVEL AND ECONOMIC STANDING OF

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

Schedule O (Form 990 or 990-EZ) (2010)

032211
01-24-11

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
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TUCSON VALUES TEACHERS

Employer identification number

26-4637708

K-12 TEACHERS, AS A MEANS OF IMPROVING THE K-12 EDUCATIONAL SYSTEM IN SOUTHERN ARIZONA. IN ITS TWO YEARS OF EXISTENCE, TVT IS PROUD OF ITS MANY SUCCESSES, ALL OF WHICH HAVE RESULTED FROM COLLABORATIONS AMONG SCHOOL SUPERINTENDENTS, PUBLIC AND PRIVATE SCHOOL ADMINISTRATORS, THE UNIVERSITY OF ARIZONA AND A WIDE RANGE OF COMMITTED BUSINESS PARTNERS.

THE CREATION OF TVT IS ROOTED IN SIGNIFICANT RESEARCH FROM MCKINSEY AND COMPANY AND THE GATES FOUNDATION THAT IDENTIFIES TEACHERS AS CENTRAL TO HIGH QUALITY EDUCATION. TVT IS FOUNDED ON THIS RESEARCH, AND IS COMMITTED TO PROVIDING THE PROGRAMMING AND SUPPORT THAT ENABLE K-12 TEACHERS TO DO THEIR VERY BEST WORK.

VISION: TO CREATE AN EDUCATION-FIRST CULTURE THAT FULLY RECOGNIZES QUALITY EDUCATION AS CENTRAL TO A PROSPEROUS ECONOMIC FUTURE.

OUR MISSION: TO CREATE AN EDUCATION-FIRST COMMUNITY BY RAISING AWARENESS OF THE IMPORTANCE OF QUALITY EDUCATION, ENHANCING THE STANDING OF THE TEACHING PROFESSION, AND HELPING TO ATTRACT, SUPPORT AND RETAIN THE VERY BEST TEACHERS FOR EVERY K-12 CLASSROOM.

OUR COMMITMENT:

- * CREATE WIN-WIN RELATIONSHIPS BETWEEN BUSINESS AND EDUCATION
- * GENERATE BROAD COMMUNITY ENGAGEMENT AND SUPPORT
- * FOSTER STRATEGIC PARTNERSHIPS WITH EXISTING ORGANIZATIONS
- * BENEFIT SOUTHERN ARIZONA TEACHERS IN ALL DISTRICT, PRIVATE AND

CHARTER SCHOOLS

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MAJOR ASSETS:

1. STRONG BOARD MEMBERSHIP AND INVOLVEMENT.

2. ACTIVE INVOLVEMENT OF NEARLY 75 BUSINESS PARTNERS WHO PROVIDE
DISCOUNTS AND INTERNSHIPS FOR ALL K12 TEACHERS.

3. FINANCIAL SUPPORT FROM RANGE OF TUCSON AND PHOENIX-BASED
FOUNDATIONS INCLUDING COMMUNITY FOUNDATION OF SOUTHERN ARIZONA, THE
RODEL CHARITABLE FOUNDATION OF ARIZONA, THE UNIVERSITY OF ARIZONA
FOUNDATION, ZUCKERMAN COMMUNITY OUTREACH FOUNDATION, HELIOS EDUCATION
FOUNDATION, AND THE DIAMOND FOUNDATION.

4. CURRENT DATA BASE OF NEARLY 4,000 DISTRICT, PRIVATE AND CHARTER
SCHOOL TEACHERS.

5. MEDIA OUTREACH THAT HAS RESULTED IN MORE THAN 75 PRINT AND
BROADCAST STORIES IN SOUTHERN ARIZONA AND NATIONALLY INCLUDING CNN, USA
TODAY, AND THE ASSOCIATED PRESS.

6. STRONG SOCIAL MEDIA PRESENCE INCLUDING MORE THAN 1600 FACEBOOK
FRIENDS AND NEARLY 1000 TWITTER FOLLOWERS.

7. SIGNATURE PROGRAMS (DETAILS BELOW) THAT HAVE GROWN SIGNIFICANTLY
OVER THE PAST TWO YEARS.

8. OPERATIONAL INVESTMENT IN TVT OVER TWO YEARS OF \$215,000, WHICH HAS
GENERATED SIGNIFICANT ECONOMIC BENEFIT FOR OUR REGION.

* NEARLY \$1 MILLION IN THE TWO-YEARS OF EXISTENCE OF THE
INTERNSHIP PROGRAM;

* \$23,000 IN COMMUNITY INVESTMENT IN THE TOAST TO TEACHERS;

* \$21,000 INVESTMENT IN SUPPORT OF TEACHERS' VOICES;

* APPROXIMATELY \$50,000 IN SPENDING GENERATED THROUGH THE TEACHER

INCENTIVE PROGRAMS;

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* \$91,000 DISTRIBUTED IN TWO YEARS FOR TUCSON SUPPLIES TEACHERS.

SIGNATURE PROGRAMS:

TVT/UNIVERSITY OF ARIZONA INTERNSHIP PROGRAM:

TVT AND THE UNIVERSITY OF ARIZONA COLLEGE OF EDUCATION, DEPARTMENT OF
TEACHING, LEARNING AND SOCIO-CULTURAL STUDIES LAUNCHED AN INNOVATIVE
INTERNSHIP PROGRAM, INTEGRATED WITH A MASTER'S DEGREE PROGRAM AT UA,
THAT INCLUDES A PAID SUMMER INTERNSHIP FOR K-12 TEACHERS IN AREA
BUSINESSES. SCIENCE FOUNDATION ARIZONA PROVIDED \$250,000 TO START THE
PROGRAM WHICH REQUIRED MATCHING FUNDS FROM AREA BUSINESSES. IN ITS
SECOND YEAR OF EXISTENCE, THE PROGRAM REACHED MORE THAN 30 TEACHERS,
NEARLY DOUBLED THE NUMBER OF PARTICIPATING BUSINESSES AND EXPANDED TO
THE PHOENIX MARKET.

\$10,000 FOR 10,000 DISCOUNT CARD:

MORE THAN 50 LOCAL BUSINESSES HAVE STEPPED UP TO PROVIDE SIGNIFICANT
DISCOUNTS TO ALL K-12 TEACHERS IN SOUTHERN ARIZONA WITH THE TVT
PROGRAM, \$10,000 FOR 10,000. THE CARD, IF ALL DISCOUNTS ARE TAKEN
ADVANTAGE OF, PROVIDES MORE THAN \$10,000 IN DISCOUNTS FOR THE 10,000
DISTRICT, PRIVATE AND CHARTER TEACHERS IN THE REGION. TVT REMAINS
COMMITTED TO FIGHTING FOR MORE NATIONALLY COMPETITIVE SALARIES FOR ALL
TEACHERS, BUT IS WORKING TO STRETCH EXISTING SALARIES AS MUCH AS
POSSIBLE THROUGH PROGRAMS LIKE THE \$10,000 FOR 10,000.

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TUCSON SUPPLIES TEACHERS:

THE EXPANDED PROGRAM IN 2010 COLLECTED AND DISTRIBUTED \$71,000 IN BASIC CLASSROOM SUPPLIES TO AREA DISTRICT, PRIVATE AND CHARTER SCHOOLS - FOUR TIMES THE AMOUNT COLLECTED IN 2009. TUCSON SUPPLIES TEACHERS ALSO RECEIVED IN 2010 A GRANT OF \$25,000 TO SUPPORT THE PROGRAM FROM THE COMMUNITY FINANCE CORPORATION. THIS AMOUNT WAS MATCHED BY WALGREENS, WHICH ALSO DONATED \$3,000 WORTH OF KLEENEX FOR AREA TEACHERS. IN ADDITION, \$18,000 WAS COLLECTED IN SUPPLIES FROM THE COLLECTION BOXES THAT WERE PLACED IN ALL 51 OF WALGREEN'S SOUTHERN ARIZONA STORES.

TEACHERS VOICES:

TUCSON VALUES TEACHERS (TVT), THANKS TO THE UNDERWRITING SUPPORT OF THE UNIVERSITY OF ARIZONA COLLEGE OF EDUCATION AND WELLS FARGO, HAS LAUNCHED A YEAR-LONG RADIO SERIES, PRODUCED BY NPR AFFILIATE ARIZONA PUBLIC MEDIA, AND DEDICATED TO SPREADING THE STORIES OF OUR TEACHERS THROUGHOUT SOUTHERN ARIZONA. TEACHERS' VOICES FEATURES REAL-LIFE STORIES AND CONVERSATIONS WITH TEACHERS, ADMINISTRATORS AND INDIVIDUALS INVOLVED IN EDUCATION IN THE REGION. THE YEAR-LONG SERIES CONSISTS OF 2-3 MINUTE PRODUCED PIECES, MODELED AFTER THE HIGHLY SUCCESSFUL NPR STORYCORPS. THE SEGMENTS FEATURE A TEACHER IN CONVERSATION WITH ANOTHER INDIVIDUAL, WHICH COULD BE ANOTHER TEACHER, A STUDENT, SUPERINTENDENT, BUSINESS LEADER, ELECTED OFFICIAL OR PARENT. IN SHORT, THESE STORIES CAPTURE THE ALCHEMY AND PROFESSIONALISM OF TEACHING. THE SERIES OF RADIO PROGRAMS AIRS WEEKLY ON KUAZ ON ARIZONA SPOTLIGHT, PART OF NPR'S MORNING EDITION AT 8:30 AM, THE MOST LISTENED TO RADIO PROGRAM ON ARIZONA PUBLIC MEDIA WITH A WEEKLY AUDIENCE OF ABOUT 180,000. ARIZONA

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SPOTLIGHT ALSO RE-BROADCASTS ON FRIDAY AT 6 PM AND ON SATURDAYS AT 7:00

P.M. ON KUAZ RADIO (89.1 FM/1550 AM). THE COVERAGE AREA REACHES ALL OF

PIMA COUNTY, AND PARTS OF COCHISE AND SANTA CRUZ COUNTIES. IN

ADDITION, ALL SEGMENTS ARE FEATURED ON THE ARIZONA PUBLIC MEDIA

WEBSITE, AT WWW.AZPM.ORG. JUST CLICK ON RADIO TAB. SEGMENTS ARE ALSO

FEATURED ON TUCSON VALUES TEACHER'S FACEBOOK PAGE, WHICH NOW HAS MORE

THAN 1600 FANS.

TOAST TO TEACHERS:

MORE THAN 1500 TEACHERS AND SUPPORTIVE CITIZENS SHOWED UP FOR THE FIRST

ANNUAL TVT TOAST TO TEACHERS, HELD MAY 7, 2010, THE LAST DAY OF

NATIONAL TEACHER APPRECIATION WEEK. NEARLY HALF OF THE ATTENDEES WERE

K-12 TEACHERS WHO WERE CELEBRATED AND ALSO TOOK ADVANTAGE OF THE 30

BUSINESSES AND EDUCATIONAL GROUPS WHO HAD BOOTH SPACE AT THE EVENT.

THE HIGHLY SUCCESSFUL BLOCK PARTY, WITH TOOLE AVENUE CLOSED OFF BETWEEN

HOTEL CONGRESS AND MAYNARDS, INCLUDED MUSIC, FOOD AND FREE MERCHANDISE

FOR TEACHERS PROVIDED BY BUSINESS PARTNERS, AND PROVIDED THE COMMUNITY

THE OPPORTUNITY TO SHOW UP AND SAY THANKS TO ALL OF OUR TEACHERS.

TEACHER EXCELLENCE AWARDS:

IN PARTNERSHIP WITH OFFICEMAX AND DIXON GOLF PROMOTIONS, TVT EACH MONTH

RECOGNIZES A K-12 TEACHER FOR OUTSTANDING WORK IN THE CLASSROOM. THE

WINNERS RECEIVE \$100 IN OFFICEMAX CARDS, COURTESY OF OFFICEMAX AND

DIXON GOLF. THE AWARD IS PRESENTED AS A SURPRISE TO THE TEACHER AND

INCLUDES FLOWERS AND BALLOONS. KVOA COVERS THE PRESENTATION IN THEIR

TVT-INSPIRED MONTHLY TEACHER FEATURE.

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(PLEASE NOTE THAT DURING 2009 AND 2010, THE MAJORITY OF TVT'S
ACTIVITIES WERE PROVIDED FOR THROUGH A PROJECT FUND WITH THE COMMUNITY
FOUNDATION FOR SOUTHERN ARIZONA (CFSA). FINANCIAL ACTIVITY ASSOCIATED
WITH THE PROJECT FUND IS REPORTED BY CFSA. IN 2011, CFSA CONTRIBUTED
THE BALANCE IN THE FUND TO TVT.)

FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

