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

Group Exemption
Number

Part II **Balance Sheets**

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

(See the instructions for Part II)

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	128,741	22	120,473
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	0	24	0
25 Total assets	128,741	25	120,473
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	128,741	27	120,473

Part III **Statement of Program Service Accomplishments**

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?

To promote mathematics education in Texas

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 Provided 2 \$2000 college scholarships to student teachers in mathematics education (2 students) (Grants \$ 4,000) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	0
29 Published and mailed the Spring 2011 Texas Mathematics Teacher journal to approximately 6,000 members (6,000 members) (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	14,129
30 Provided \$600 grants for 15 teachers to attend the annual statewide mathematics education conference (15 teachers) (Grants \$ 9,000) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	0
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a) <input type="checkbox"/>	32	14,129

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
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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

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		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	No
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)	34	No
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 during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	No
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	No
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	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="checkbox"/> 37a <input type="text" value="0"/>		
b	Did the organization file Form 1120-POL for this year?	37b	No
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?	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____, section 4912 <input type="checkbox"/> _____, section 4955 <input type="checkbox"/> _____		
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	40b	
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 <input type="checkbox"/> _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="checkbox"/> _____		
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	40e	No
41	List the states with which a copy of this return is filed <input type="checkbox"/> _____		
42a	The organization's books are in care of <input type="checkbox"/> Martha Godwin Telephone no <input type="checkbox"/> (903) 276-1007 PO Box 82 Located at <input type="checkbox"/> Queen City, TX ZIP + 4 <input type="checkbox"/> 75572		
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)? If "Yes," enter the name of the foreign country <input type="checkbox"/> _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .	42b	No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country <input type="checkbox"/> _____	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here <input type="checkbox"/> _____ and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 43 <input type="text" value=""/>		
44a	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44a	No
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	44b	No
c	Did the organization receive any payments for indoor tanning services during the year?	44c	No
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	44d	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	No
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

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.

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

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
48	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a	Did the organization make any transfers to an exempt non-charitable related organization?		
49b	If "Yes," was the related organization a section 527 organization?		

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

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 "

(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	<div></div>	2012-08-13		
	Signature of officer	Date		
Paid Preparer's Use Only	Cynthia Schneider Govt Rel Rep & Journal Editor			
	Type or print name and title			
	Preparer's signature	Date	Check if self-employed	Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN		Phone no

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

☐ Yes ☐ No

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization TEXAS COUNCIL OF TEACHERS OF MATHEMATICS	Employer identification number 31-1638493
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Identifier	Return Reference	Explanation
F99Z_P01_S00_L08	Form 990-EZ, Part I, Line 8	Two journal advertisements
F99Z_P01_S00_L10	Form 990-EZ, Part I, Line 10	Name/Address Amount Given Relationship to Organization 2011 CAMTership (money to attend annual state conference) Tisa Smith 802 Gordon St Longview, TX 75602 903 234 2865 South Ward Elem, Longview ISD \$600 None 2011 CAMTership (money to attend annual state conference) Christina Korenek 3512 Greenwood Rd Weatherford, TX 76088 Ninth Grade Center, Weatherford ISD 817 944 2001 \$600 None 2011 CAMTership (money to attend annual state conference) Scott Berger 16100 Space Center Blvd Houston, TX 77058 Clear Lake High School, Clear Lake ISD 713 515 1262 sberger@ccisd net \$600 None 2011 CAMTership (money to attend annual state conference) Becky Puckett P O Box 285 Fort Davis, TX 79734 432 386 7780 rspuckett@sbcglobl net Fort Davis Jr/Sr High, Fort Davis ISD \$600 None 2011 CAMTership (money to attend annual state conference) Kimberlyn Brunet 7616 S Western Amarillo, TX 79110 806 670 4484 Kimberlyn brunet@amaisd org Travis Middle School, Amarillo ISD \$600 None 2011 CAMTership (money to attend annual state conference) Bethany Jones 1092 Talley Ln Frisco, TX 75034 469 744 1006 jonesbe@friscoisd org Sparks Elem, Frisco ISD \$600 None 2011 CAMTership (money to attend annual state conference) Heather Upchurch 2448 Dawn Mist Drive Little Elm, TX 75068 214 636 3822 Upchurch@friscoisd org Christie Elem, Frisco ISD \$600 None Name/Address Amount Given Relationship to Organization 2011 President's Grant (money to attend annual state conference) Cindy Pleasant 410 Juanita St Chandler, TX 75758 903 849 2057 pleasant@brownsboro k12 tx us BHS, Brownsboro ISD \$600 None 2011 President's Grant (money to attend annual state conference) Robin Ereman 8234 CR 3600 Brownsboro, TX 75756 903 539 4196 eremanr@brownsboro k12 tx us Brownsboro HS, Brownsboro ISD \$600 None 2011 President's Grant (money to attend annual state conference) Jeanette Kohne 739 Eagle Lake Court Allen, TX 75002 214 929 9371 Jeanette_kohne@allenisd org T H Ereckson MS, Allen ISD \$600 None 2011 President's Grant (money to attend annual state conference) Tracie Ezell 400 Tracy Lane Fairfield, TX 75840 903 388 5047 Tracie ezell@dewisd org Dew Junior High, Dew ISD \$600 None 2011 President's Grant (money to attend annual state conference) Leslie Erwin 14018 CR 761 Alnn, TX 77511 Rogers MS, Pearland ISD erw inl@pearlandisd org 281 799 7301 \$600 None 2011 President's Grant (money to attend annual state conference) Maya Issac 305 County Road 4092 Bon Wier, TX 75928 409 622 1592 Maya issac@newtonisd net Newton Elem, Newton ISD \$600 None 2011 President's Grant (money to attend annual state conference) Trena Tillery 3137 S Mimosa Rd Gilmer, TX 75644 903 790 0179 tilleryt@harmonyisd net James Poole Elem, Harmony ISD \$600 None 2011 President's Grant (money to attend annual state conference) Jodi Childress 1804 Paverstone Lane Longview, TX 75605 903 806 7400 or ends w/ 80 jchildress@lisd org Longview ISD (no campus listed) \$600 None Name/Address Amount Given Relationship to Organization 2011 TCTM Mathematics Specialist College Scholarships Andrea Pikas DOB 8/18/73 Student ID XXX-XX-0092 2424 Montgomery Rd Apt 30 Huntsville, TX 77340 Cell 832-451-0467 Axp026@shsu edu Sam Houston State University 1903 University, Estill 201 Box 2328 Huntsville, TX 77341-2328 \$2,000 None 2011 TCTM Mathematics Specialist College Scholarships Stephanie Erin Campbell DOB 2/1/90 Student ID XXX-XX-1645 PO Box 257 Edgewood, TX 75117 Cell 903-279-8278 Stepherinc9@yahoo com Texas A & M University - Commerce PO Box 3011 Commerce, TX 75429 \$2,000 None Total Line 10 13,000 00
F99Z_P01_S00_L16	Form 990-EZ, Part I, Line 16	270 to NCTM for Organizational Dues, 24,657 for Board Travel, 1,037 for Board Expenses, 10,564 for Reception at Annual Conference

Additional Data

Software ID: 11000129
Software Version: v1.00
EIN: 31-1638493
Name: TEXAS COUNCIL OF TEACHERS OF MATHEMATICS

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(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
Nancy Trapp 15609 Brandt Service Road Raymondville, TX 78580	President 3	0	0	0
Rebecca Ontiveros 1213 Meadowview Dr El Paso, TX 79925	Treasurer (Jan-Jul) 1	0	0	0
Martha Godwin PO Box 82 Queen City, TX 75572	Treasurer (Aug-Dec) 1	0	0	0
Cynthia L Schneider 10015 Derecho Dr Austin, TX 78737	Govt Relations Rep 3	0	0	0