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## Form 990

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

2012
Open to Public Inspection

Α	For the	2012 calendar year, or tax year beginning and	ending								
В	Check if applicable	C Name of organization		D Employer identif	ication number						
	Addres	NATIONAL CONGRESS OF PARENTS & TEACHER	RS								
	Name change	a a management of the contract		36-2	169155						
	initial return		Room/suite	E Telephone number							
	Termin ated	1230 N FITT STREET			3)518-1200						
	Ameno		G Gross receipts \$	15,076,806.							
	Applic	L VIRVAINDKIK' AK 77214		H(a) Is this a group r	eturn						
	pendir	F Name and address of principal officer. ERIC HARGIS		for affiliates?	Yes X No						
		SAME AS C ABOVE		H(b) Are all affiliates in							
		empt status X 501(c)(3) 501(c) ( )	or 527		a list (see instructions)						
		e: WWW.PTA.ORG	<del></del>	H(c) Group exemption							
	Form of <b>art I</b>	organization: X Corporation	L Year	of formation: 1897	M State of legal domicile: IL						
	1	Briefly describe the organization's mission or most significant activities SEE	PART ]	III, LINE 1.							
Governance											
rua	2	Check this box   If the organization discontinued its operations or dispose	sed of more	e than 25% of its net a	ssets						
S S	3	Number of voting members of the governing body (Part VI, line 1a)		3	27						
න	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	27						
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	67						
Activities	6	Total number of volunteers (estimate if necessary)	1	6	250						
Act	7 a	Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), The 12 EVED  Net unrelated business taxable income from Form 990.TUine 34	78	<u>7a</u>	-132,968.						
	b			7 <u>b</u>	<u>-267,595.</u>						
		Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year						
0 RAMALe	8	Contributions and grants (Fart VIII, line III)		12,400,198.	11,452,053.						
<b>J</b>	9	Program service revenue (Part VIII, line 2g)	Γ	602,599.	588,005.						
3	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) OGDEN, U		881,414.	80,251.						
	40	other revenue (rart viii, column (A), lines 3, ou, oc, oc, roc, and ree)	-	-209,628.	-452,997.						
<b>⇔</b>	T	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		13,674,583. 153,332.	11,667,312.						
SCANNEDS AUG	14	Benefits paid to or for members (Part IX, column (A), lines 1-5)		155,552.	111,043.						
A	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	4,777,617.	<del></del>						
Ç	16a	Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.						
艺	b	Total fundraising expenses (Part IX, column (D), line 25)	80. H		<u> </u>						
菿	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	5,181,330.	5,949,118.						
S	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		10,112,279							
		Revenue less expenses Subtract line 18 from line 12		3,562,304.							
200	3		В	eginning of Current Year	End of Year						
sets	20	Total assets (Part X, line 16)		23,265,241.							
Net Assets or	21	Total liabilities (Part X, line 26)		8,966,796.							
		Net assets or fund balances Subtract line 21 from line 20		14,298,445.	14,334,298.						
_	art II	Signature Block									
		lities of perjury, I declare that I have examined this return, including accompanying schedule			ny knowledge and belief, it is						
tru	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich prepare								
		Sometime of Allege Hung			- 13						
Sış	gn	Signature of Officer		Date							
He	re	ERIC HARGIS, EXECUTIVE DIRECTOR Type or print name and title									
	<u> </u>			Date Check	DTINO						
Da	:	Print/Type preparer's name Preparer's signature	/	7/0/12 1	PTIN 1329488						
Pai		Amy boland Amy DI am	<u> </u>		yeo						
	eparer e Only	Firm's name GELMAN, ROSENBERG & FREEDMAN Firm's address 4550 MONTGOMERY AVE SUITE 650N		Firm's EIN	52-1392008						
03	Comy	BETHESDA, MD 20814-2930		Dhona no	(30 <u>1) 95</u> 1-9090						
Ma	v the II	RS discuss this return with the preparer shown above? (see instructions)		Phone no.	X Yes No						
_	001 12-		ons		Form <b>990</b> (2012)						
	16-	=	J. 13.		. 01111 000 (2012)						

			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	77	<u>X</u> _
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		v
_	Schedule D, Parts XI and XII  Was the arganization included in consolidated, independent sudited financial statements for the tax year?	12a		X
Ø	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	104	v	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	<u> X</u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		- 41
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
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? If "Yes," complete Schedule F, Parts II and IV	15		х
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, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2012)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23_	_X_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	i		
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	_X_	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	}		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Х	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	X
36	Section 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	ļ <u>.</u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
-			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 67			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			_
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting $N/A$			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?  N/A	9a		
10	Did the organization make a distribution to a donor, donor advisor, or related person?  N/A	9b		
10	Section 501(c)(7) organizations. Enter.  Initiation fees and capital contributions included on Part VIII, line 12  N/A   10a			
a b		-		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter	1		
''	Gross income from members or shareholders  N/A			
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 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a	_	<u> </u>
_	Note. See the instructions for additional information the organization must report on Schedule O	.50		
b		1		
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2012)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 27			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_		77
l.	more members of the governing body?	7a		_X_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		<u>X</u>
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD.	- 22	
Ū	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	ļ
14	Did the organization have a written document retention and destruction policy?	14	_X	<u></u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Х	7.5
b	Other officers or key employees of the organization	15b		X
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
iva	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		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	
	for public inspection Indicate how you made these available Check all that apply.		_	
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	d finar	ncial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕨	· _	
	JESSICA RENZI - (703)518-1250			
0060°	1250 N PITT STREET, ALEXANDRIA, VA 22314			
23200 12-10		Form	990	(2012)

10320703 745960 24133

### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and 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

(A)	(B)			((	(C)			(D)	(E)	(F)
Name and Title	Average	(do		Position check more than one				Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week	-	cer an	dad	recto	or/trus	Tee)	from	from related	other
	(list any	or director						the	organizations	compensation
	hours for related	D TO a	18			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	trus		e e	mpen		(44.2/1099-101130)		organization and related
	below	Individual trustee	Institutional trustee	_ '	Key employee	stco	1 55			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	former			
(1) ELIZABETH LANDERS	1.00									
PRESIDENT	0.00	X		$X_{-}$				5,500.	0.	0.
(2) OTHA THORNTON	1.00									
PRESIDENT ELECT	0.00	X		X		<u> </u>		0.	0.	0.
(3) LAURA BAY	1.00	]								
SECRETARY/TREASURER	1.00	X		X				0.	0.	0.
(4) DERRICK BYRD	1.00									
DIRECTOR	0.00	X			_		ļ	0.	0.	0.
(5) LESLIE CUSHMAN	1.00	}							1	
DIRECTOR	0.00	X	<u> </u>	<u>.</u>		<u> </u>	_	0.	0.	0.
(6) SHARON GOLDBLATT	1.00	1								
DIRECTOR	0.00	X	ļ	L.	_		╽	0.	0.	0.
(7) PHILIP HORN	1.00									
DIRECTOR	0.00	X	<u> </u>			<u> </u>	<u> </u>	0.	· 0.	0.
(8) MARQUES IVEY	1.00								_	_
DIRECTOR	0.00	Х	ļ			_	_	0.	0.	0.
(9) DEE JONES	1.00	1		i						_
DIRECTOR	0.00	X	<u> </u>	-		ļ	-	0.	0.	0.
(10) SUSAN LIPMAN	1.00	⊦			ĺ					_
DIRECTOR	0.00	X			<u> </u>	_	-	0.	0.	0.
(11) MELISSA NEHRBASS	1.00	┨								
DIRECTOR	0.00	X	-	-	<u> </u>	┼	-	0.	0.	0.
(12) DARLINE ROBLES	1.00									
DIRECTOR	0.00	X	-	-	┝	₩	<del> </del>	0.	0.	0.
(13) ERIC SNOW	1.00	١.,								
DIRECTOR	0.00	X	-	<del> </del>	<u> </u>	-	-	0.	0.	0.
(14) DENISE SULTZ	1.00	١,,				ļ				
DIRECTOR	0.00		-		-	<del> </del>	┼	0.	0.	0.
(15) ROBERT ACCERA	1.00									
DIRECTOR	0.00			├	$\vdash$	-	┼	0.	0.	0.
(16) SCOTT ALLEN	1.00									
DIRECTOR	0.00		-	-	<del> </del>	-	+-	0.	0.	0.
(17) NOEL CASTORENA	1.00			1					_	_
DIRECTOR	0.00	Į Ā.				Щ.		0.	0.	0.
232007 12-10-12										Form <b>990</b> (2012)

								& TEACHERS		155 Page 8
Part VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	iH t	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0	<b>&gt;</b> )			(D)	(E)	(F)
Name and title	Average hours per week	box,	not c	ss pe	more	N e than one i is both an or/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) NANCY COX	1.00									
DIRECTOR		X						0.	0.	0.
(19) RONALD HERNDON DIRECTOR	1.00	x						0.	0.	0.
	1.00	Λ				-	H	<u>U•</u>	· ·	<u></u>
(20) KIM HUNT DIRECTOR		х						0.	0.	0.
(21) C. ED MASSEY DIRECTOR	1.00	х						0.	0.	0.
(22) KATHY NEVANS DIRECTOR	1.00							0.	0.	0.
(23) ESTHER PARKER	1.00									
DIRECTOR (24) SHANNON SEVIER	1.00							0.	0.	0.
DIRECTOR		X		<u></u>		<u> </u>		0.	0.	0.
(25) DEBRA STRAUSS	1.00							_		
DIRECTOR	0.00	X	<u> </u>	ļ		ļ	_	0.	0.	0.
(26) SOPHIA WAUGH	1.00	<b>.</b>						0.	0.	0.
DIRECTOR 45 Sub-Astal	0.00	<u> </u>	L	L	L	<u> </u>	l	5,500.	0.	0.
1b Sub-total c Total from continuation sheets to Part V	II Cootion A							954,889.	0.	98,428.
	ii, Section A							960,389.	0.	98,428.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but r	not limited to th	nose	liste	ed al	bove	e) wi	no re		<del></del>	70,440.

compensation from the organization

Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on Х line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 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 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(C) Name and business address Description of services Compensation COLORNET 22570 GLENN DRIVE, STERLING, VA 20164 PRINTING SERVICES <u>523,604.</u> TMA RESOURCES, INC., 1919 GALLOWS RD, 271,264. SUITE 400, VIENNA, VA 22182 SOFTWARE DEVELOPMENT TALBOTT TECHNOLOGIES DATABASE 6202 HAW BRANCH CT, MANASSAS, VA 20112 ADMINISTRATION <u>173,250.</u> RESULTS DIRECT, 5210 E WILLIAMS CIRCLE, SUITE 640, TUCSON, AZ 85711 I.T. CONSULTANTS 117,200.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2012)

Form 990 NATIONAL	CONGRES	<u> </u>	<u> </u>	<u> </u>	PAI	REI	<u> 1TS</u>	& TEACHERS	<u> 36-216</u>	<u>9155                                   </u>
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	oyee	s, a	nd F	ligh	est (	Compensated Employ	ees (continued)	
(A)	(B)				2)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	check a		that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	=		ŀ		loyee		the	organizations	compensation
	(list any hours for	Jirect		Ì		1 emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	related	, e o .	stee			sate		(44-271099-14113C)		organization and related
	organizations	Individual trustee or director	institutional trustee		) se	Highest compensated employee				organizations
	below	ld us	tutton	<sub>10</sub>	Key employee	est co	ıeı			
	line)	Ē	Insti	Officer	Ke.	표	Former			
(27) WILLIAM HITE	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(28) ERIC HARGIS	37.50									
EXECUTIVE DIRECTOR	0.00			Х				257,224.	0.	23,550.
(29) ANNE WALD	37.50									
DEPUTY EXEC. DIR. OF MEMBERSHIP	0.00			X				121,307.	0.	14,426.
(30) HEATHER DEAN	34.50									
DEPUTY EXEC. DIR. OF PROG. & OPS.	3.00			х				138,701.	0.	12,231.
(31) AMY LORENZ	37.50									7,= -
DEPUTY EXEC. DIR. MEMB. & DEV.	0.00			Х				103,833.	0.	8,168.
(32) ELIZABETH RORICK	37.50									<u> </u>
DEPUTY EXEC. DIR. COMM. & GOV. AFF.	0.00			х				114,561.	0.	16,292
(33) MARY PAT KING	37.50									
DIRECTOR OF PROGRAMS	0.00					Х		101,662.	0.	13,689.
(34) JOHN REEB	37.50									
DIRECTOR OF I.T.	0.00	1				Х		117,601.	0.	10,072.
			L.							
								<u> </u>		
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		-								
			<u> </u>	L	<u> </u>		Щ			
								054 000		00 100
Total to Part VII, Section A, line 1c								<u>954,889.</u>		98,428.

1 a Federated campaigns   1a				Check if Schedule O cont	ains a response	to any question ii	n this Part VIII			
Business Code   Discoverition   Discoveritio					•		(A)	Related or exempt function	Unrelated business	Revenuè excluded from tax under
Business Code   2 a   CONVENTION   900099   134,627,   134,627,   134,627,   900099   15,178,	nts nts	1 :	а	Federated campaigns	1a					-
Business Code   2 a   CONVENTION   900099   134,627,   134,627,   134,627,   900099   15,178,	og ig	1	b	Membership dues	1b	9,698,555.				
Business Code   2 a   CONVENTION   900099   134,627,   134,627,   134,627,   900099   15,178,	S, G		С	Fundraising events	1c					
Business Code   Discoverition   Discoveritio	a it	,	d	Related organizations	1d	50 000				
Business Code   Discoverition   Discoveritio	S, E		е	Government grants (contribute	ions) 1e	,				
Business Code   Discoverition   Discoveritio	P S	1	f	All other contributions, gifts, gran	ts, and	-				
Business Code   Discoverition   Discoveritio	E E				· 1	1 703 498				
Business Code   Discoverition   Discoveritio	ĞĒ	,	a	Noncash contributions included in lines						
Business Code   Discoverition   Discoveritio	a S		_			▶ .	11 452 053.			
2 a   GONVENTION   900099   138,627,   134						Business Code	,,,			
b   ADVERTISING   900099   134,627   134,627	ا بو	2 :	а	CONVENTION			438 200	438 200		
Total, Add lines 2a 2f	ارکج	_				ì		100,200.	134 627	
Total, Add lines 2a 2f	am Se evenu						•	15 178	202,007,	
Total, Add lines 2a 2f						30003	20,270,	10,170.		······
Total, Add lines 2a 2f	P. C.									
3   Total. Add lines 2a 2f	P.			All other program service reve	nue	1				
3   Investment income (including dividends, interest, and other similar amounts)   4						<b>•</b>	588 005			
20   20   20   20   20   20   20   20				Investment income (including	dividends, intere	est, and				
4 Income from investment of tax exempt bond proceeds					,	_	97 444			97 444
Form		4		,	x-exempt bond p	· F				37,333
(i) Real   (iii) Personal						<b>•</b>	62 773			62 773
6 a Gross rents   658,091				•	(ı) Real	(II) Personal	,			02,773.
b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 1,577, -18,770, d Net gain or (loss) 5 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a MISCELLANEOUS 90099 19,601  12 Total revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions  10 (i) Securities (ii) Other 2, 193, 371, -267, 595, -267, 77  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -277, 19  -2		6	а	Gross rents						
C Rental income or (loss)   C   C   C   C   C   C   C   C   C			b	Less rental expenses						
The image of the				·						
7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses 2,197,262, 18,770, c Gain or (loss) 1,577, -18,770, d Net gain or (loss) 2,197,262, 18,770, d Net gain or (loss) 5 of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from sales of inventory. Less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a MISCELLANEOUS 900099 19,601. 19,601  All other revenue e Total. Add lines 11a-11d 19,601. 12 Total revenue. See instructions 11,667, 312, 453, 378, -132,968, -105,155				• •		<b>&gt;</b>	-535 371.		-267 595	-267 776
assets other than inventory b Less cost or other basis and sales expenses c Garn or (loss) d Net gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$					(ı) Securities	(II) Other				207,770.
b Less cost or other basis and sales expenses 2,197,262. 18,770. C Gain or (loss) 1,57718,770. d Net gain or (loss) 5 -17,193.				assets other than inventory	-3/					
and sales expenses  c Gain or (loss)  d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS b C All other revenue e Total. Add lines 11a-11d  12 Total revenue. See instructions  11, 667, 312, 453, 378, -132, 968, -105, 155			b	•						
C Gain or (loss)  1,57718,770. d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS					2 197 262	18 770				
d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601.  19,601.  19,601.  10 Total revenue. See instructions			С	•						
8 a Gross income from fundraising events (not including \$				· ·			-17 193.			-17,193.
Including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses b c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19  b Less direct expenses b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a MISCELLANEOUS  b C d All other revenue  e Total. Add lines 11a-11d  12 Total revenue. See instructions  of contributions perfect on line 1c) See a label a	e e			• • •	g events (not					17,223.
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601. 19,60  c d All other revenue e Total. Add lines 11a-11d  19,601.  10 Total revenue. See instructions  11,667,312, 453,378, -132,968, -105,15	je j									
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601. 19,60  c d All other revenue e Total. Add lines 11a-11d  19,601.  10 Total revenue. See instructions  11,667,312, 453,378, -132,968, -105,15	<u>چ</u>			· ·	1c) See					
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601. 19,60  c d All other revenue e Total. Add lines 11a-11d  19,601.  10 Total revenue. See instructions  11,667,312, 453,378, -132,968, -105,15	ē				а					
9 a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601.  19,60  C d All other revenue e Total. Add lines 11a-11d  19,601.  10,607,312, 453,378, -132,968, -105,15	5			•		L				
Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601. 19,60  d All other revenue e Total. Add lines 11a-11d  19,601.  10 a MISCELLANEOUS MISCE					-	<b>•</b>				
b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601.  19,601  19,601  19,601  19,601  19,601  19,601  19,601  10,601  11,667,312,453,378,-132,968,-105,155		9	а		ctivities See					
c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601  c d All other revenue e Total. Add lines 11a-11d  19,601  11,667,312, 453,378, -132,968, -105,15						ļ				
10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601.  c d All other revenue e Total. Add lines 11a-11d  Total revenue. See instructions  11,667,312, 453,378, -132,968, -105,15				•		L				
and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601.  c d All other revenue e Total. Add lines 11a-11d  Total revenue. See instructions  11,667,312, 453,378, -132,968, -105,15				· · · · · · · · · · · · · · · · · · ·	-	<b>&gt;</b>				
b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 19,601.  19,60  c d All other revenue e Total. Add lines 11a-11d  19,601.  10,601.  11,667,312,453,378,-132,968,-105,15		10	а		returns					
C Net income or (loss) from sales of inventory         Miscellaneous Revenue       Business Code         11 a MISCELLANEOUS       900099         b       19,601.         c       4 All other revenue         e Total. Add lines 11a-11d       19,601.         12 Total revenue. See instructions       11,667,312.       453,378.       -132,968.       -105,15										
Miscellaneous Revenue       Business Code         11 a MISCELLANEOUS       900099       19,601.       19,60         b       C       C       C       C         d All other revenue       D       19,601.       C <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>										
11 a MISCELLANEOUS 900099 19,601. 19,60  b c d All other revenue			С			<b>•</b>				
b c d All other revenue e Total. Add lines 11a-11d				····	ie					
c       d All other revenue         e Total. Add lines 11a-11d       ▶ 19,601.         12 Total revenue. See instructions       ▶ 11,667,312.       453,378.       -132,968.       -105,15		11	а	MISCELLANEOUS		900099	19,601.			19,601.
d All other revenue  e Total. Add lines 11a-11d  ▶ 19,601.  12 Total revenue. See instructions  ▶ 11,667,312, 453,378, -132,968, -105,15			b						<del></del>	
e Total. Add lines 11a-11d  19 601.  12 Total revenue. See instructions  11 667 312, 453 378, -132 968, -105 15			С		<del></del>	ļ				
				=		1				
			е			<b>&gt;</b>				'
232009	23200			Total revenue. See instructions		<u> </u>	11,667,312.	453,378.	-132 968	-105 151.

	Check if Schedule O contains a respon not include amounts reported on lines 6b,		s Part IX (B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and			g	
	organizations in the United States. See Part IV, line 21	111,043.	111,043.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				7-0
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	815,793.	675,114.	140,679.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	2 000 000	0 644 540	500 000	
7	Other salaries and wages	3,282,270.	2,641,543.	580,933.	59,794
8	Pension plan accruals and contributions (include	1 100 010	400 365	603 570	0 055
_	section 401(k) and 403(b) employer contributions)	1,102,018.	400,365.	693,578.	8,075
9	Other employee benefits	317,773.	97,801.	217,392.	2,580
10	Payroll taxes	318,075.	245,106.	68,119.	4,850
11	Fees for services (non-employees)				
a	Management	65,799.	65,799.		
b	Legal Accounting	33,238.	05,199.	33,238.	· · · · · · · · · · · · · · · · · · ·
c d		33,430.		33,430.	<del>.</del>
e					
f	Investment management fees	17,928.		17,928.	
g		17,520.		11,920.	<del></del>
9	column (A) amount, list line 11g expenses on Sch 0.)	942,132.	776,952.	156,105.	9,075
12	Advertising and promotion	41,996.	40,309.	130,103.	1,687
13	Office expenses	1,114,602.	953,129.	152,224.	9,249
14	Information technology	378,027.	333/1231	378,027.	J, 24J
15	Royalties	0.0702.0		3,0,00,00	
16	Occupancy	280,513.		280,513.	
17	Travel	1,121,703.	1,105,104.	13,330.	3,269
18	Payments of travel or entertainment expenses				5/205
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	400,606.	396,093.	1,828.	2,685
20	Interest	205,367.		205,367.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	395,232.		395,232.	
23	Insurance	37,194.		37,194.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				,
а	ATTOCAMTON OF CCA	0.	2,365,189.	-2,409,090.	43,901
a b	DOMA MED COOD C	278,750.	262,085.	<u> </u>	16,665
C	T T CLAVA TAIMENTANICE	233,748.	202,000.	233,748.	10,005
d	DOLLED DESIGNATION	122,765.		122,765.	
	All other expenses	279,518.	57,338.	213,130.	9,050
25	Total functional expenses Add lines 1 through 24e	11,896,090.	10,192,970.	1,532,240.	170,880
26	Joint costs. Complete this line only if the organization			1,002,210	1,0,000
_5	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2012)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response to any question in this Part X			
		<b>(A)</b> Beginning of year		(B) End of year
1	Cash - non-interest-bearing	5,876,932.	1	4,380,484
2	Savings and temporary cash investments	630,967.	2	1,851,221
3	Pledges and grants receivable, net	39,500.	3	21,134
4	Accounts receivable, net	1,819,013.	4	958,372
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
.	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7 8	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	243,091.	9	342,090
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 11,941,235.			
b		10,839,356.	10c	10,447,037
11	Investments - publicly traded securities	3,390,217.	11	4,011,080
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets	- ' ',-	14	
15	Other assets See Part IV, line 11	426,165.	15	302,350
16	Total assets. Add lines 1 through 15 (must equal line 34)	23,265,241.	16	22,313,768
17	Accounts payable and accrued expenses	502,071.	17	563,722
18	Grants payable		18	
19	Deferred revenue	26,880.	19	15,252
20	Tax-exempt bond liabilities		20	
ဋ္ဌ 21	Escrow or custodial account liability Complete Part IV of Schedule D	<del></del>	21	<del></del>
22	Loans and other payables to current and former officers, directors, trustees,			
21 22	key employees, highest compensated employees, and disqualified persons			
	Complete Part II of Schedule L	6 500 604	22	
23	Secured mortgages and notes payable to unrelated third parties	6,799,604.	23	6,699,306
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X of	1 (20 041		701 100
00	Schedule D	1,638,241.		701,190
26_	Total liabilities. Add lines 17 through 25	8,966,796.	26	7,979,470
,,	Organizations that follow SFAS 117 (ASC 958), check here ► X and			
27 28 29 30 31 32 31 32 3	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	12 000 457		12 246 016
27	Temporarily restricted net assets	12,908,457. 873,497.		13,246,816
28	Permanently restricted net assets	516,491.	-	570,991 516,491
29	·	510,451.	29	310,491
-	Organizations that do not follow SFAS 117 (ASC 958), check here			
2 20	and complete lines 30 through 34.  Capital stock or trust principal, or current funds			
30			30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	1/ 200 //5	32	14 224 200
33	Total net assets or fund balances  Total liabilities and net assets/fund balances	14,298,445.		14,334,298
34	Total naminues and het assets/hund datafices	23,265,241.	34	22,313,768 Form <b>990</b> (201)

Form **990** (2012)

-	990 (2012)	NATIONAL		OF	PARENTS	& TEACH	ERS	36-	<u> 2169:</u>	155	Pag	<sub>je</sub> 12
Par	t XI Reconciliation	n of Net Assets	<b>;</b>									
	Check if Schedule	O contains a respo	nse to any questi	on in ti	his Part XI			-				
								1				
1	Total revenue (must equ	al Part VIII, column	(A), line 12)				<u></u>	1		<u>,66'</u>		
2	Total expenses (must ed	qual Part IX, column	(A), line 25)				_	2		<u>, 89(</u>		
3	Revenue less expenses	Subtract line 2 from	n line 1				<u></u>	3		<u>-228</u>		
4	Net assets or fund balar	nces at beginning of	year (must equal	Part X	I, line 33, column	(A))		4	14	<u>, 298</u>		
5	Net unrealized gains (los	sses) on investment	s					5		264	<u>4,6</u>	<u>31.</u>
6	Donated services and u	se of facilities						6				
7	Investment expenses							7				
8	Prior period adjustments	6						_8				
9	Other changes in net as	sets or fund balanc	es (explain in Sch	edule (	O)			9				0.
10	Net assets or fund balar	nces at end of year.	Combine lines 3 t	hrough	h 9 (must equal F	Part X, line 33,						
	column (B))							10	14	<u>, 334</u>	4,2	98.
Par	t XII Financial Stat		-									
	Check if Schedule	O contains a respo	nse to any questi	on in t	hıs Part XII							<u> </u>
				,					_		Yes	No
1	Accounting method use	• •		-	X Accrual	Other					1	
	If the organization change	=		•				0	ļ	ŀ	1	
2a	_		•							2a		_X_
	If "Yes," check a box be		ther the financial :	statem	ents for the year	were compiled	or reviewed	on a				
	separate basis, consolic			,						ļ		
	Separate basis	Consolidate			consolidated an	•	IS					
b	Were the organization's								-	2b	X	
	If "Yes," check a box be		ther the financial :	statem	ents for the year	were audited of	on a separate	basis,				
	consolidated basis, or b			1							ŀ	
	Separate basis	X Consolidate			consolidated an	•					l	
С	If "Yes" to line 2a or 2b,					=	ersight of the	audıt,	ŀ		- 1	
	review, or compilation o				•					2c	X	
	If the organization chan	_	- '		. •	•	•			j	i	
3a	As a result of a federal a	-	nization required t	o unde	ergo an audit or a	audits as set for	rth in the Sin	gle Aud	lit			
	Act and OMB Circular A								1	3a		<u>X</u>
b	If "Yes," did the organization	-			<del>-</del>		go the requi	red aud	ıt			
	or audits, explain why in	Schedule O and de	escribe any steps	taken i	to undergo such	audits				3b		
										Form	<b>990</b> (	2012)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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.

OMB No 1545-0047

2012

Open to Public Inspection

lame of t	he organizati	on						E	Employer	identification nu	mber
		NATIONA	L CONGRESS O	F PAR	ENTS	& TEA	CHERS		3	6-2169155	ı
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	:) See inst	ructions	-		
1	A church, cor A school deso A hospital or	nvention of churches cribed in section 17 a cooperative hospi	because it is (For lines 1 s, or association of churc (0(b)(1)(A)(ii). (Attach Sol tal service organization o operated in conjunction	ches desc hedule E) described	nbed in se	ction 170	(b)(1)(A)(i) (A)(iii).		iii). Enter	the hospital's nan	ne,
	city, and state										
5	An organizati	on operated for the	benefit of a college or ur	niversity o	wned or op	erated by	a governr	nental ur	nit describ	ed in	
		( <b>b)(1)(A)(iv).</b> (Comple	•								
6 <u></u>			ent or governmental unit					, ,,			
7 [X]		on tnat normally rec b)(1)(A)(vi). (Comple	eives a substantial part (	of its supp	ort from a	governme	ental unit o	r from th	e generai	public described	ın
8 🗔	-		ection 170(b)(1)(A)(vı). (	Complete	Part II \						
9 🗔			eives (1) more than 33 1			om contri	butions, m	nembersh	nip fees, a	nd gross receipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	ıın exceptı	ons, and (2	2) no more	than 33 1	/3% of it	s support	from gross invest	tment
	income and u	ınrelated busıness t	axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the org	anızatıon	after June 30, 197	75
		<b>509(a)(2).</b> (Complete	•								
10			perated exclusively to tes								
11			perated exclusively for the						-		or
			ations described in section				2) See sec	tion 509	(a)(3). Ch	eck the box that	
	a Type I	· · · · · · · · · · · · · · · · · · ·	organization and compli pe II		nctionally i		d	ı 🗀 Tv	ne III - No	n-functionally inte	arated
е 🗔	• •		at the organization is not		•	-			•	-	_
•			han one or more publicly			-	-		-	•	
f		=	ten determination from t		•				, , , , , , , , , , , , , , , , , , ,	000110111 000(4)(2)	
	-	rganization, check th			•		, ,,				
g			organization accepted ar	ny gift or c	ontribution	from any	of the follo	owing pe	rsons?		
	(ı) A person	n who directly or ind	irectly controls, either al	one or tog	jether with	persons o	described i	n (II) and	(III) below	, Yes	No
	the gove	erning body of the si	upported organization?							11g(i)	<u> </u>
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)	
	• •	-	person described in (i) o	• •						11g(iii)	
h	Provide the fe	ollowing information	about the supported or	ganızatıon	(s)						
	of supported anization	n (described on lines 1-9		(iv) Is the organization (v) Did you notify the organization in col. (i) listed in your organization in col. governing document? (i) of your support?		organizat (i) organ	(vi) Is the nization in col. ganized in the U.S?		netary		
			(see instructions))	Yes	No	Yes	No	Yes	No		
					<del> </del>						
		<u> </u>	<u> </u>		<u> </u>			<del> </del>		_	
	<u> </u>										
Total			<u> </u>	<u> </u>							

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12 Schedule A (Form 990 or 990 EZ) 2012 NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2169155 Page 2

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)

Sec	tion A. Public Support			·			
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(_,	127200	(5) -50.70	7-1-2-1	10,20.2	
•	membership fees received (Do not						
	include any "unusual grants.")	11,592,532.	10,587,548.	11,051,839.	12,400,198.	11,452,053.	57,084,170.
2	Tax revenues levied for the organ-	11,332,332.	10,307,340.	11,031,035.	12,400,150.	11,452,055.	37,004,170.
_	ization'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	11,592,532.	10,587,548.	11,051,839.	12,400,198.	11 452 053	57,084,170,
5	The portion of total contributions	11,352,332.	10,507,540.	11,031,033.	12,100,150.	11,432,033.	37,004,170.
•	by each person (other than a						
	governmental unit or publicly				[		
	supported organization) included						
	on line 1 that exceeds 2% of the				j		
	amount shown on line 11,						
	column (f)						805,033.
6	Public support. Subtract line 5 from line 4				<del>-</del>		56 279 137
Sec	tion B. Total Support		1		<u> </u>	l	30,275,137
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	11,592,532.	10.587.548.	11,051,839.	12,400,198.	11,452,053.	57,084,170.
8	Gross income from interest,				12,100,130.	22,102,000.	37,001,170,
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	553,755.	306.412.	179.239.	637,625.	656,144.	2,333,175.
9	Net income from unrelated business					3337555	2,330,1,3,
	activities, whether or not the						
	business is regularly carried on	44,103.					44,103.
10	Other income Do not include gain				·		
	or loss from the sale of capital						
	assets (Explain in Part IV)	225,705.	11,456.	7,119.	23,016.	19,601.	286,897.
11	Total support. Add lines 7 through 10	•			,		59,748,345.
12	Gross receipts from related activities,	etc (see instruction	ons)			12 3	,465,092.
13	First five years. If the Form 990 is for	•	•	d, fourth, or fifth ta	ax year as a sectio		1 = 2 = 1
	organization, check this box and stor	here			•	,,,,	▶□
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
14	Public support percentage for 2012 (	line 6, column (f) di	ivided by line 11, c	column (f))		14	94.19 %
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	94.98 %
16a	33 1/3% support test - 2012. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	ļ			$\triangleright X$
b	33 1/3% support test - 2011. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	iere. Explain in Pai	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	d organization	-	▶□
b	10% -facts-and-circumstances tes	_	•		-	17a, and line 15 is	10% or
	more, and if the organization meets the	_					
	organization meets the "facts and-circ				*		
18	Private foundation. If the organization		•	•			s 🕨
			<b>,</b>			dule A (Form 990	
					55110		

232022 12-04-12

# Schedule A (Form 990 or 990-EZ) 2012 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
mushin under the teste hated below, places complete Doubli \

Section A. Public Support	iow, please com	piete Part II )			<del> </del>	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and				(-/	(4)	(1)
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 bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization'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)	<del></del>					-
Section B. Total Support	<u> </u>	<del></del>	1	1		
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6		(-)	19/25	(4) = 0.1	10/2012	(1) , 5 (4)
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</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, thi	d, fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	ation.
check this box and stop here	Ü	,		,		, ▶□
Section C. Computation of Publi	c Support Pe	ercentage	· ·			
15 Public support percentage for 2012 (lii			column (fl)		15	9
16 Public support percentage from 2011		•	(,,,		16	Ç
Section D. Computation of Inves			·	<del></del>	, 10 1	
17 Investment income percentage for 20		<del></del>			17	9
18 Investment income percentage from 2	•	• • • • • • • • • • • • • • • • • • • •	10, 001011111 (1))		18	
19a 33 1/3% support tests - 2012. If the			on line 1/L and line	e 15 je moro than		<del></del>
more than 33 1/3%, check this box ar	_				•	. 19 HOL ►
b 33 1/3% support tests - 2011. If the	organization did i	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec					=	<b>P</b> _
20 Private foundation. If the organization	<u>i did not check a</u>	box on line 14, 19	a, or 19b, check the	his box and see ir	structions	▶∟

### SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

See separate instructions.

2012

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III			
Nan	ne of organization			Empi	oyer identification number
	NATIONA	L CONGRESS OF PA	RENTS & TEA	CHERS	36-2169155
Pa	art I-A Complete if the or	ganization is exempt und	er section 501(c	) or is a section 527 o	rganization.
3	Volunteer hours	zation's direct and indirect politica	al campaign activities	_	
Pa	art I-B Complete if the or	ganization is exempt und	er section 501(c	)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955	▶\$	
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 495	5 ▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 t	or this year?		Yes No
48	a Was a correction made?				Yes No
	If "Yes," describe in Part IV				
P	art I-C Complete if the or	ganization is exempt und	er section 501(c	), except section 501(	c)(3).
1	Enter the amount directly expende	d by the filing organization for sec	tion 527 exempt fund	ction activities > \$	<u> </u>
2	Enter the amount of the filing organ	nization's funds contributed to oth	er organizations for s	section 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditure	s Add lines 1 and 2 Enter here a	nd on Form 1120-POI	L,	
	line 17b			▶ \$	Yes No
4	Did the filing organization file Form	•			Yes No
5	Enter the names, addresses and e				
	made payments For each organiza	•	~ ~		•
	contributions received that were produced that were produced to the contributions of the contributions are contributions.				ite segregated fund or a
_	political action committee (PAC) If	additional space is needed, prov	de information in Par	t IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
			<del> </del>		
		l.,	<u></u> <u></u>	<u> </u>	1

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

Schedule C (Form 990 or 990-EZ) 2012

232041

Schedule C (Form 990 or 990-EZ) 2012 I Part II-A   Complete if the org	NATIONAL CO	ONGRESS OF P	ARENTS & TE	ACHERS 36-2	169155 Page 2
(election under sec		inpi under section		led Form 5700	
		filiated group (and list in	Part IV each affiliated	l aroun member's nam	a address FIN
expenses, and share		-	T all IV cach annated	r group member 3 nam	e, address, Lift,
	, ,	and "limited control" pro	ovisions apply		
			· · · · · · · · · · · · · · · · · · ·	(a) Filing	(b) Affiliated group
	s on Lobbying Expe litures" means amo	enditures ounts paid or incurred.)	)	organization's totals	totals
1a Total lobbying expenditures to influ	ence public opinion	(grass roots lobbying)	, <u>-</u> ,	7,533.	
b Total lobbying expenditures to influ	ience a legislative bo	ody (direct lobbying)		151,607.	
c Total lobbying expenditures (add lii	nes 1a and 1b)			159,140.	
d Other exempt purpose expenditure	es .			11,736,950.	
e Total exempt purpose expenditures	s (add lines 1c and 1	d)		11,896,090.	
f Lobbying nontaxable amount Ente	r the amount from the	ne following table in bot	h columns	744,805.	
If the amount on line 1e, column (a) o	r(b) is: The lo	bbying nontaxable am	ount is:	:	
Not over \$500,000	20% o	f the amount on line 1e			
Over \$500,000 but not over \$1,000	,000 \$100,0	000 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,0	000 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000	),000	T		
g Grassroots nontaxable amount (en	ter 25% of line 1f)			186,201.	
h Subtract line 1g from line 1a If zero	o or less, enter -0-			0.	
<ul> <li>Subtract line 1f from line 1c If zero</li> </ul>	or less, enter -0-			0.	
J If there is an amount other than zer	o on either line 1h o	r line 1i, did the organiza	ation file Form 4720	_	
reporting section 4911 tax for this	<del></del>	<del></del>			Yes No
		veraging Period Under	• •		
<del>-</del>		section 501(h) election		•	
		he instructions for line		age 4.)	
	Lobbying Exp	enditures During 4-Yea	ar Averaging Period	T	
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	787,566	915,726.	709,603.	744,805.	3,157,700.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					4,736,550.
c Total lobbying expenditures	688,226	552,189.	236,125.	159,140.	1,635,680.
ļ	404.45-				
d Grassroots nontaxable amount	196,892	. 228,932.	177,401.	186,201.	789,426.
e Grassroots ceiling amount					
(150% of line 2d, column (e))					1,184,139.

Schedule C (Form 990 or 990-EZ) 2012

107,154.

10,530.

15,871.

# Schedule C (Form 990 or 990-EZ) 2012 NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2169155 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

f the	r each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description				(b)	
	e lobbying activity	Yes	No	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	•	······································				
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	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 Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	tion 501(a)	(5) or oo	otion		
aı	501(c)(6).	1011 50 1(0)	(5), 01 56	Clion		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		3			
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members	a "No," Oi		. III-A, III	ie 3,	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	tical	1			
_	expenses for which the section 527(f) tax was paid).	licai				
а	Current year		2a			
	Carryover from last year		2b			
c			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4		xcess				
	expenditure next year?		4			
5	·					
	***************************************		<del></del>			
Par						
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5,	Part II-A (affili	ated group	list), Part II	-A, line	
<b>4</b> <b>5</b>	Taxable amount of lobbying and political expenditures (see instructions)		<u>4</u> 5			

Schedule C (Form 990 or 990-EZ) 2012

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

Employer identification number

Par		OF PARENTS & TEACHERS	36-2169155
Pai			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		(h) Funda and other accounts
	T	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	•	
_	are the organization's property, subject to the organization's		└─_  Yes
6	Did the organization inform all grantees, donors, and donor a		-
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	· — —
Par	impermissible private benefit?		Yes No
		· · · · · · · · · · · · · · · · · · ·	t IV, line /
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or o	· —	rically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conservation easement on the last
	day of the tax year		
_	Total wayshay of accessoration accessorate		Held at the End of the Tax Year
a	Total garage restricted by garage steps		2a
b	Total acreage restricted by conservation easements	nioturo included in (c)	2b
C	Number of conservation easements on a certified historic sti	• •	2c
ď	Number of conservation easements included in (c) acquired listed in the Network Pariette.	after 8/17/06, and not on a historic structure	
•	listed in the National Register  Number of conservation easements modified, transferred, re	deeped submissionlend or because to discuss to the	2d
3	year	eleased, extinguished, or terminated by the d	organization during the tax
4	Number of states where property subject to conservation ea	segment is located	
5	Does the organization have a written policy regarding the pe		
J	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and	_	
8	Does each conservation easement reported on line 2(d) abo	_	
•	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense s	
	include, if applicable, the text of the footnote to the organiza		
	conservation easements		3 -
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Oth	ner 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 (A	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtheranc	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of publi	c service, provide the following amounts
	relating to these items		-
	(i) Revenues included in Form 990, Part VIII, line 1		<b>\$</b>
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial g	gain, provide
	the following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

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

Sched <b>Par</b>		L CONGRESS collections of Ar					-2169155 Assets(continu	
3	Using the organization's acquisition, accession							
_	(check all that apply)	<b>,</b>	.,					
а	Public exhibition	d	Loan or exc	change progra	ms			
b	Scholarly research	e		go progra				
c	Preservation for future generations	-						
_	Provide a description of the organization's co	ollections and explain	n how they further	the organizatio	nn's exemn	ot purpose ii	n Part XIII	
	During the year, did the organization solicit or	·	•	•	•			
	to be sold to raise funds rather than to be ma				,, o.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes	□ No
	t IV Escrow and Custodial Arran				Yes" to Fo	rm 990. Pai		
	reported an amount on Form 990, Par						, 0, 0.	
	Is the organization an agent, trustee, custodi	an or other intermed	lary for contributio	ns or other as:	sets not in	cluded		
	on Form 990, Part X?					5.000	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table					
_			g table				Amount	
С	Beginning balance					1c	runoant	
	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fo	orm 990. Part X. line	21?			L	Yes	□ No
	If "Yes," explain the arrangement in Part XIII	•		n provided in F	Part XIII			
Par								
		(a) Current year	(b) Prior year	(c) Two year		Three years	back (e) Four	years back
1a	Beginning of year balance	602,513.	584,793		5,562.	605.		595,989.
b	Contributions	3,929.	348	T	-	•		
С	Net investment earnings, gains, and losses	32,015.	18,642	1	363.	5	342.	17,005.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	33,058.	1,270	. 22	2.132.	4.	274.	7,500.
f	Administrative expenses							
g	End of year balance	605,399.	602,513	. 584	1,793.	606.	562.	605,494.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column	(a)) held as				
а	Board designated or quasi-endowment		%					
b	Permanent endowment ► 85.87	%	_					
¢	Temporarily restricted endowment ▶1	4.13 %						
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administe	red for the	organizatio	n _	
	by						,	Yes No
	(i) unrelated organizations						3a(ı)	X
	(ii) related organizations						3a(iı)	<u>X</u>
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	on Schedule R?				3b	X
4	Describe in Part XIII the intended uses of the							
Par	t VI   Land, Buildings, and Equipm	nent. See Form 990	), Part X, line 10					
	Description of property	(a) Cost or o	', '	st or other		umulated	(d) Book	value
		basis (investr		s (other)	depre	eciation	<del></del>	
1a			<del></del>	22,366.				2,366.
b	Buildings			07,727.		96,333		.,394.
С	Leasehold improvements			56,481.		08,008		3,473.
	Equipment		1,3	54,661 <u>.</u>	68	39,857	. 664	1,804.
	Other						1	
<u>Total</u>	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c))			10,447	<u>7,037.</u>

art VII Investments - Other Securities. S  a) Description of security or category (including name of security			n. Cost or end-of-year market value
Financial derivatives	,,	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Closely-held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	•		
art VIII Investments - Program Related.	See Form 990, Part X,	line 13	
(a) Description of investment type	(b) Book value		n. Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	_		
(8)			
(9)			
10)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
art IX Other Assets. See Form 990, Part X, III			
	a) Description		(b) Book value
(1)	<del></del>		
(2)			
(3)			
(4)			
(5)			
(6)	<del>-</del>		
(7)	<del></del>		
(8)	<del> </del>		
(9)			
10)			
tal. (Column (b) must equal Form 990, Part X, col (B)	line 15 )		<u> </u>
art X Other Liabilities. See Form 990, Part	X, line 25	4) B-1	
(a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED LEASE LIABILITY		649,406.	
(3) DEPOSITS		26,739.	
(4) DUE TO THE ENDOWMENT FUN	ID	139.	
(5) CAPITAL LEASE LIABILITY	-	24,906.	
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
tal. (Column (b) must equal Form 990, Part X, col (B)		701,190.	

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		•				
		(Form 990) 2012 NATIONAL CONGRESS OF PARENT	S &	TEACHERS	36-	2169155 Page 4
Par		Reconciliation of Revenue per Audited Financial Statemen	ts W			
1	Total	revenue, gains, and other support per audited financial statements			1	13,202,267.
		ints included on line 1 but not on Form 990, Part VIII, line 12				
		nrealized gains on investments	2a	264,631.		
b		ted services and use of facilities	2b	70,697.		•
		veries of prior year grants	2c	7070270		
		(Describe in Part XIII )	2d	1,199,627.		
		ines 2a through 2d	Zu	1,100,021	20	1,534,955.
3		ract line 2e from line 1			2e_	11,667,312.
		ints included on Form 990, Part VIII, line 12, but not on line 1				11,001,312.
		tment expenses not included on Form 990, Part VIII, line 7b	ایما			
		·	4a			
		(Describe in Part XIII )	4b			•
		ines 4a and 4b			4c	0.
	t XII	revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  Reconciliation of Expenses per Audited Financial Stateme	nto V	lith Evnances nor	5 Dotu	11,667,312.
			IILS V	vitri Expenses per		
		expenses and losses per audited financial statements			1	13,166,414.
2		unts included on line 1 but not on Form 990, Part IX, line 25		50 605		
а		ted services and use of facilities	2a	70,697.		
b		year adjustments	2b			
С		losses	2c			
d	Other	(Describe in Part XIII)	2d	1,199,627.		
е		ines 2a through 2d			2e_	1,270,324.
3	Subtr	act line 2e from line 1			3	11,896,090.
4	Amou	ints included on Form 990, Part IX, line 25, but not on line 1				
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII)	4b			
С	Add I	ines 4a and 4b			4c	0.
		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	11,896,090.
Par	t XIII	Supplemental Information				
Comp	lete ti	nis part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1	a and 4, Part IV, lines 1t	and:	2b, Part V, line 4, Part
		rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p				
PAR	TV	7, LINE 4: THE NATIONAL PTA ENDOWMENTS C	ONS	IST OF INDIV	IDU.	AL
FUN	DS	ESTABLISHED FOR A VARIETY OF PURPOSES.	ITS	ENDOWMENT I	s c	OMPOSED OF
DON	OR-	RESTRICTED ENDOWMENT FUNDS.				
PAR	TX	I, LINE 2: IN JUNE 2006, THE FINANCIAL A	CCO	UNTING STAND	ARD	S BOARD
(FA	SB)	RELEASED FASB ASC 740-10, INCOME TAXES	. Т	HAT PROVIDES	GU	IDANCE FOR
			, <u> </u>			
REP	ORT	ING UNCERTAINTY IN INCOME TAXES. FOR TH	ΕY	EAR ENDED DE	CEM	BER 31
		The second secon	<u></u>		<u> </u>	
201	2,	THE NATIONAL PTA HAS DOCUMENTED ITS CON	SID	ERATION OF F.	ASB	ASC 740-10

Schedule D (Form 990) 2012 NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2 Part XIII Supplemental Information (continued)	2169155 Page 5
AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY	FOR EITHER
RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS.	THE
FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX	IS
SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALI	LY FOR
THREE YEARS AFTER IT IS FILED.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES REPORTED AS EXPENSE ON THE FINANCIAL	1,193,462.
STATEMENTS, BUT NETTED AGAINST RENTAL REVENUE ON THE	
FORM 990, PART VIII, LINE 6B.	
EXPENSE REIMBURSEMENT, SHOWN AS REVENUE ON THE	6,165.
FINANCIAL STATEMENTS, BUT NETTED AGAINST PROFESSIONAL	
FEES EXPENSE ON FORM 990, PART IX, LINE 11G.	
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,199,627.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES REPORTED AS EXPENSE ON THE FINANCIAL	1,193,462.
STATEMENTS, BUT NETTED AGAINST RENTAL REVENUE ON THE	
FORM 990, PART VIII, LINE 6B.	· · · · · · · · · · · · · · · · · · ·
EXPENSE REIMBURSEMENT, SHOWN AS REVENUE ON THE	6,165.
FINANCIAL STATEMENTS, BUT NETTED AGAINST PROFESSIONAL	
FEES EXPENSE ON FORM 990, PART IX, LINE 11G.	
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,199,627.

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047 2012

Open to Public Inspection

Name of the organization  NATIONAL CONGRESS		OF PARENTS	& TEACHERS	ι.			Employer identification number 36-2169155
Part I General Information on Grants and Assistance			ıı				
1 Does the organization maintain records to substantiate the amount of	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	oring the use of grant	funds in the United	d States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	e United States. C	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PINELLAS COUNTY PTA							TO DEVELOP AN EDUCATION AND ENGAGEMENT STRATEGY
0 10TH STREET NO		, n	0	c			TO INCREASE PARENT
SI, PEIERSBORG, FL 33/04	0/4701/-07	(6)/5)	***************************************				TO DEVELOP AN EDUCATION
15TH DISTRICT PTA				_			AND ENGAGEMENT STRATEGY
319 S. 15TH STREET							TO INCREASE PARENT
LOUISVILLE, KY 40203	61-1157139	501(C)(3)	6,200,	0			UNDERSTANDING OF THE
							TO DEVELOP AN EDUCATION
DELAWARE PTA							AND ENGAGEMENT STRATEGY
925 BEAR CORBITT RD, ROOM 101			1	Ć			TO INCREASE PARENT
BEAR, DE 19701	51-6001154	501(c)(3)	8,607,	0			UNDERSTANDING OF THE
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	ind government or, s listed in the line 1	ganizations listed in th I table	listed in the line 1 table				
٦	see the Instructi	ons for Form 990					Schedule I (Form 990) (2012)
	, see une moures.	TITMAN (H) DE	H DESCETEMTONS	ט			/ / / / / / / / / / / / / / / / /

SEE PART IV FOR COLUMN (H) DESCRIPTIONS 29

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed SUBMIT EXPENSE REIMBURSEMENT REPORTS AND RESPECTIVE RECEIPTS FOR ALL USES ENGAGEMENT STRATEGY TO INCREASE PARENT UNDERSTANDING OF THE COMMON CORE GRANTEES TO (H) PURPOSE OF GRANT OR ASSISTANCE: TO DEVELOP AN EDUCATION AND (d) Amount of non-cash assistance THE ORGANIZATION REQUIRES ALL NAME OF ORGANIZATION OR GOVERNMENT: PINELLAS COUNTY PTA 30 (c) Amount of cash grant (b) Number of recipients COLUMN (H): 2: (a) Type of grant or assistance LINE PART GRANT MONIES STATE STANDARDS LINE 1 H SCHEDULE PART II 232 102 12-18-12 Part IV OF

Page 2

36-2169155

NATIONAL CONGRESS OF PARENTS & TEACHERS

Schedule I (Form 990) (2012)

Part III

Schedule   (Form 990)   NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2169155 Page 2   Part IV   Supplemental Information
NAME OF ORGANIZATION OR GOVERNMENT: 15TH DISTRICT PTA
(H) PURPOSE OF GRANT OR ASSISTANCE: TO DEVELOP AN EDUCATION AND
ENGAGEMENT STRATEGY TO INCREASE PARENT UNDERSTANDING OF THE COMMON CORE
STATE STANDARDS.
NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE PTA
(H) PURPOSE OF GRANT OR ASSISTANCE: TO DEVELOP AN EDUCATION AND
ENGAGEMENT STRATEGY TO INCREASE PARENT UNDERSTANDING OF THE COMMON CORE
STATE STANDARDS.

### **SCHEDULE J** (Form 990)

### Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Part I

► Attach to Form 990. ► See separate instructions.

**Employer identification number** NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2169155

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4¢ If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? X 5a b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a Х b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 69 If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958 6(c)?

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

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	(R) Breakdown of W.2 and/or 1099.MISC compensation	S. compensation	(C) Bettrement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(b) Dicardomi oi	מומיסו וסיס ומוצ	oc compensation	other deferred		(EVI)-(D)	reported as deferred
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			in prior Form 990
(1) ERIC HARGIS	Ξ	247,224.	10,000.	0	12,500.	11,050.	280,774.	0
UTIVE DIRECTOR	Ξ	0	0	0				0
	Ξ	130,701.	8,000.	0	9 9	5,67	150,93	0
OF PROG. & OPS.	Ξ	0	0.	• 0			0	0
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Schedule J (Form 990) 2012

33

232112 12-12-12 PART I, LINE 7: BONUS COMPENSATION HAS BEEN REFLECTED ON PART II

COLUMN B(II).

### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

Schedule M (Form 990) (2012)

NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2169155 Types of Property Part I (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art 1 Art - Historical treasures 2 3 Art - Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 9 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate · Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 263,750. FMV ( MEMBER. CARDS ) Х 1 25 Other Х 1 15,000. 26 Other COMPUTER 27 Other Other 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 0 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1.28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Х 30a b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Х 32a b If "Yes," describe in Part II

232141 12-20-12

33

LHA

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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describe in Part II

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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.

2012
Open to Public Inspection

Name of the organization

Employer identification number

NATIONAL CONGRESS OF PARENTS & TEACHERS 36-2169155							
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:							
CONVENTION: FACILITATED THE COMING TOGETHER OF PTA LEADERSHIP AND							
MEMBERSHIP AT THE ANNUAL MEETING AND CONVENTION. IDEAS AND INFORMATION							
WERE SHARED FACE-TO-FACE WITH PTA MEMBERSHIP THROUGH WORKSHOPS, SKILL							
BUILDING SESSIONS AND NETWORKING. THIS EVENT AFFECTED ALL MEMBERS							
DIRECTLY AND IMMEDIATELY IMPACTED EVERY PARENT, TEACHER, STUDENT AND							
LEADER WHO TAKES PART IN THE EVENT.							
EXPENSES \$ 709,497. INCLUDING GRANTS OF \$ 0. REVENUE \$ 438,200.							
MEETINGS & GOVERNANCE: FACILITATED THE GATHERING OF PTA LEADERSHIP,							
INCLUDING ALL BOARD AND COMMITTEE MEETINGS IN SUPPORT OF THE BUSINESS,							
WORK AND MISSION OF THE ORGANIZATION. THE ACTIVITIES IN THIS CATEGORY							
AFFECTED ALL BOARD AND COMMITTEE MEMBERS AND INDIRECTLY AFFECTED ALL							
PTA MEMBERS.							
EXPENSES \$ 693,897. INCLUDING GRANTS OF \$ 1,000. REVENUE \$ 0.							
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY THE							
OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT AND THE FINANCE							
COMMITTEE. A FINAL COPY OF THE FORM 990 WAS PROVIDED TO THE FULL BOARD							
PRIOR TO FILING WITH THE IRS.							
FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS AND STAFF SIGN AN							
ANNUAL CONFLICT OF INTEREST STATEMENT AND ARE REQUIRED TO ABSTAIN FROM ANY							
CONSIDERATION OF TOPICS RELATED TO AREAS WHERE THEY ARE, OR MAY BE							
PERCEIVED TO BE, CONFLICTED. THE OFFICERS REVIEW ALL CONFLICT OF INTEREST							

FORMS AND REQUEST ADDITIONAL INFORMATION IF NECESSARY. OFFICERS ARE

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

232211 01-04-13 Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization  NATIONAL CONGRESS OF PARENTS & TEACHERS	Employer identification number 36-2169155
RESPONSIBLE FOR ENSURING BOARD MEMBER COMPLIANCE WITH THI	S. IF A CONFLICT
OF INTEREST ARISES, THE CONFLICTED MEMBER RECUSES HIMSELF	'/HERSELF FROM
DISCUSSION AND VOTING ON THE MATTER.	
FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD OF DIRE	
TRANSITION GUIDES, AN EXECUTIVE SEARCH FIRM, THAT UTILIZE	
MARKET DATA IN ADVISING THE BOARD OF DIRECTORS ON AN APPR	
RECRUITING RANGE FOR THE EXECUTIVE DIRECTOR. THE BOARD'S	
DECISION OF THE REVIEW WAS DOCUMENTED IN BOARD MINUTES. T	
THE EXECUTIVE DIRECTOR TOOK PLACE IN JUNE 2012. THE EXECU	TIVE DIRECTOR
REVIEWS COMPENSATION FOR ALL OTHER OFFICERS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO,	NH, NJ, NM, NY, NC, ND
OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINE	NCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST. THE DOCUMENTS ARE A	LSO AVAILABLE ON
THE ORGANIZATION'S WEBSITE.	

SCHEDULE R (Form 990)

Parti

Related Organizations and Unrelated Partnerships

2012
Open to Public
Inspection

OMB No 1545-0047

Employer identification number 36 – 2169155

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) NATIONAL CONGRESS OF PARENTS & TEACHERS Name of the organization Department of the Treasury Internal Revenue Service

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
YTION.	NATIONAL PTA PROPERTIES, LLC - 27-2442385 1250 N, PITT STREET ALEXANDRIA VA 22314	MANAGEMENT OF RENTAL PROPERTIES	DELAWARE	1 012 642.	10,492,931,NPTA	NPTA
Part II	Identification of Related Tax-Exempt Organizations (Comple	ations (Complete if the organization ar	te if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	t IV, line 34 because	It had one or more r	elated tax-exempt

g)	controlled	entity?	No	
(g)	cont	ent	Yes	
<b>(£</b> )	Direct controlling	entity		
(e)	Public charity	status (if section	501(c)(3))	
(Q)	Exempt Code	section		
(0)	Legal domicile (state or	foreign country)	•	
(a)	Primary activity			
(a)	Name, address, and EIN	of related organization		

controlled entity?	Š			
91,00	Yes	×		
entity		ልኩሳን		,
section status (if section	501(c)(3))	TINE 11 & T NPM		
		501(0)(3)		
foreign country)		OLONITIE		
(10,10)		אחם ואטחדהאט פט שמסממוזי		
of related organization		THE ENDOWMENT FUND OF THE NAT'L CONGRESS OF PARENTS & TEACHERS - 36-6067371, 1250 N.		

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

36-2169155 Page 2

Schedule R (Form 990) 2012 NATIONAL CONGRESS OF PARENTS & TEACHERS

Identrication of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

General or Percentage on managing ownership Schedule R (Form 990) 2012 (I) Section 512(b)(13) controlled entity? Yes No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Percentage ownership Yes Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>6</u> ate allocations? Disproportion-Yes No Ξ Share of total income Ξ Share of end-of-year assets <u>(</u>6 Type of entity (C corp, S corp, or trust) **e** Share of total income (d)
(Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicile (state or foreign country) 39 (d) | Direct controlling | entity Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 232162 12-10-12 Part IV

Page 3

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

				$\vdash$
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	ns with one or more r	le transactions with one or more related organizations listed in Parts II-IV2	in Parts II-IV2	Yes Ng
		)		
				1b ×
				4
d Loans or loan guarantees to or for related organization(s)				
<ul> <li>Loans or loan guarantees by related organization(s)</li> </ul>				1e
f Dividends from related organization(s)				1f X
g Sale of assets to related organization(s)				1g X
h Purchase of assets from related organization(s)				th X
i Exchange of assets with related organization(s)				1i X
j Lease of facilities, equipment, or other assets to related organization(s)				11 X
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				* ×
I Performance of services or membership or fundraising solicitations for related organization(s)	janization(s)			
$oldsymbol{m}$ Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			1
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ition(s)			
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				10 X
p Reimbursement paid to related organization(s) for expenses			•	Tp X
q Reimbursement paid by related organization(s) for expenses				Tq X
r Other transfer of cash or property to related organization(s)				+ <del>1</del> ×
	who must complete t	his line, including covered	relationships and transaction thresholds	
	(q)	(5)	( <del>p</del> )	
Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	volved
(1) THE ENDOWMENT FUND OF THE PTA	ن ا	50,000	50,000.BY-LAWS	
(2) THE ENDOWMENT FUND OF THE PTA	ø	64,881.	INVOICES	
(3)				
(4)				
(5)				
(9)				
232163 12-10-12	40		Schedule	Schedule R (Form 990) 2012

Page 4,

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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

(k) rcentage nership					
ral or Per					
General or (I) General or (I) Description (I) Apartner? Yes No		 		-	
(h) (i) (j) (k) (k) (k) (k) (ii) (j) (k) (k) (k) (k) (k) (k) (k) (k) (k) (k				-	
(h) Disproportionate allocations? Yes No					
(g) Share of end-of-year assets					
(f) Share of total income					
(e) Are all partners sec 501(c)(3) 01gs 7 Ves No					
(d) Are all Predominant income partiers sec (related, unrelated, excluded from tax under section 512-514)   yes   No					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

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Schedule R	R (Form 990) 2012	NATIONAL	CONGRESS OF	' PARENTS	& T	<b>EACHERS</b>	<u>36-2169155</u>	Page 5
Part VII	R (Form 990) 2012  Supplemental Info	rmation	"					
	Complete this part to pro	ovide additional info	rmation for responses t	to allestions on S	Schedule	B (see instruc	tions)	
	Complete this part to pre	oriac additional line	mation for responses	io questions on c	ocincadio	, 11 (300 mando	1101137	
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