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# Form 990

**Return of Organization Exempt From Income Tax** 

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

2012

OMB No 1545-0047

benefit trust or private foundation) Open to Public Department of the Treasury The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service 09/01, 2012, and ending 08/31, 20 13 A For the 2012 calendar year, or tax year beginning D Employer identification number C Name of organization B Check if applicable 95-2081589 TORRANCE TEACHERS ASSOCIATION Doing Business As E Telephone number Room/suite Number and street (or P O box if mail is not delivered to street address) Name chang 1619 CRAVENS AVENUE (310) 320-8200 City, town or post office, state, and ZIP code Terminated 422,620. TORRANCE, CA 90501 G Gross receipts \$ H(a) Is this a group return for Yes X No Application pending F Name and address of principal officer H(b) Are all affiliates included? Tax-exempt status 501(c)(3) X | 501(c) ( 5 ) ◀ (insert no.) 4947(a)(1) or If "No." attach a list (see instructions) Website: ▶ N/A H(c) Group exemption number Corporation | X | Trust | X | Association M State of legal domicile Form of organization L Year of formation Part I Summary Briefly describe the organization's mission or most significant activities: TO PROVIDE A MEANS FOR COLLECTIVE ACTION FOR EMPLOYEES OF THE TORRANCE Governance UNIFIED SCHOOL DISTRICT. If the organization discontinued its operations or disposed of more than 2 2 Check this box ▶ 3 Number of voting members of the governing body (Part VI, line 1a) 3 රේ Activities <del>16</del>. 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 2. 5 Total number of individuals employed in calendar year 2012 (Parry, line 2a) 3 0 2014 6 6 Total number of volunteers (estimate if necessary) 120. 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 179,200 201,713. Contributions and grants (Part VIII, line 1h) 207,137. 207,369 Program service revenue (Part VIII, line 2g) 96 120. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d). . . . . . . 11,639 10,183. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 398,304 419,153. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12). . 11,000 11,000. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 14 192,405 204,267. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 97,823. 91,863 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 295,268 313,090. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 103,036 106,063. Revenue less expenses Subtract line 18 from line 12 . . . . . . **Beginning of Current Year** End of Year 519,800 623,960. 20 Total assets (Part X, line 16) 2,920 1,017. Total liabilities (Part X, line 26) 516,880. 622,943. 22 Net assets or fund balances Subtract line 21 from line 20, Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge **Ļ**§ign Signature of officer Chere Executive Direc 0122 Type or print name and title Print/Type preparer's name Date Preparer's signature Check Paid self-employed P00239429 Preparer ► CASTILLO & WEST ACCOUNTANCY 56-2433686 Firm's EIN Use Only 310 453-4965 Firm's address > 2444 WILSHIRE BLVD., #504 SANTA MONICA, CA 90403

Yes No Form 990 (2012)

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

For Paperwork Reduction Act Notice, see the separate instructions.

_	n 990 (2012)		·		Page 2
Pa		ent of Program Service A	Accomplishments esponse to any question in this Part III		
1		the organization's mission			
	•		ON REPRESENTING EMPLOYEES	OF TORRANCE	
	UNIFIED SCH	HOOL DISTRICT.			
2	Did the ergenia	ation undortake any signif	ficant program services during the ye	ar which were not listed on the	
_	prior Form 990				Yes X No
3	Did the organi	zation cease conducting	or make significant changes in h		Yes X No
	If "Yes," describe	e these changes on Sched	lule O.		
4	expenses Secti	ion 501(c)(3) and 501(c)	rvice accomplishments for each of it (4) organizations are required to reported reach program service reported		
4a	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	<del></del>				
			<del></del>		
					<del></del>
		<del> </del>			
4 b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
				· · · · · · · · · · · · · · · · · · ·	
4 c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
			·		
	·				
	· · · · · · · · · · · · · · · · · · ·				
		· · · · · · · · · · · · · · · · · · ·			
4d	Other program	services (Describe in Sche	dule O.)	······································	
	(Expenses \$	including gra	ants of \$ ) (Revenue		
40	Total program:	service expenses >			

Part	V Checklist of Required Schedules			
٠,			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			İ
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
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		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	}	Х
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		Х
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,	門。龍		
••	VII, 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,"	5.550.44	XXXXXXXX	
u	complete Schedule D, Part VI	11a	x	
h	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		х
c	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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	111		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	<u> </u>		
, ,	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			l
	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	1		
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<b>├</b>		
10	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?			<del></del>
13	If "Yes," complete Schedule G, Part III	19		х
20 ~	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	$\vdash \vdash$	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	$\vdash$	<del></del>
<u>u</u>	" 100 to me 200, did the digamization attach a copy of its addited midnicial statements to this fetch?	1200		

ÉST	Checklist of Required Schedules (continued)		Yes	No
24	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		, , ,	
21	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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	Х	
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		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		'	J.
	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	1		x
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Şişar oğ	
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)	28a	\$*\d 6*\d	X V
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20a		
D	Schedule L, Part IV	28b		х
_	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	100		
· ·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
00	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
• •	Part I	31		Х
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		Х
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	ļ <u>.</u>	Х
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	ļ	X
35 a	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		ł	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	
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
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	İ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			v
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	x	}
	19? Note. All Form 990 filers are required to complete Schedule O			/2012)

Form	990 (2012)		F	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance			<del></del> 1
<u>`                                    </u>	Check if Schedule O contains a response to any question in this Part V	<del></del>	• • •	للا
		بامن <sub>د</sub> معروع	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		in.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		التُقَاصَة	
	reportable gaming (gambling) winnings to prize winners?	1c	<u>प्रमुख</u>	* AM
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 2	2h	ائشت	444
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	STEPPIN.	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a	X	3 4 E F 6 E
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	"		
4 a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a		Х
h	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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		T Gir ark
7	Organizations that may receive deductible contributions under section 170(c).		84	
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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _ l		v
	required to file Form 8282?	7c	200	X
	If "Yes," indicate the number of Forms 8282 filed during the year	2000	A-439)	X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		year fi	<b>被</b>
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	M.C.ATZ	A COLUMN TO SERVICE
9	Sponsoring organizations maintaining donor advised funds.	111 72	534	
	Did the organization make any taxable distributions under section 4966?	9a		***************************************
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		_
10	Section 501(c)(7) organizations. Enter	题	等犯	沙碧
	Initiation fees and capital contributions included on Part VIII, line 12	藏		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		Ny activ	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders		۲ امر ۱۳۰۰ و ۱	
b	Gross income from other sources (Do not net amounts due or paid to other sources			50
	against amounts due or received from them )		<u>/</u>	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		·2·7·-3
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year L12b	1. 3. 2. 1. 2. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.		76 4
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	79%	٠. ٧	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		: "-	3 33
b	Enter the amount of reserves the organization is required to maintain by the states in which	]:		i cod
	the organization is licensed to issue qualified health plans	<del> </del>		
C	Enter the amount of reserves on hand	14a		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	1140		

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

Check if Schedule O contains a response to any question in this Part VI........ X Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year. 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. Enter the number of voting members included in line 1a, above, who are independent . . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . . Did the organization become aware during the year of a significant diversion of the organization's assets?.... Х 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х Are any governance decisions of the organization reserved to (or subject to approval by) members, Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a The governing body?... Each committee with authority to act on behalf of the governing body? . . . . . . . . Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No Х 10a 10a Did the organization have local chapters, branches, or affiliates? . . . . . . . . . b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . . . Х 13 13 Did the organization have a written whistleblower policy?........ 14 Did the organization have a written document retention and destruction policy?....... 14 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? 447 The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . 15a Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶\_CA, 17 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) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website | X | Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial 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 MARIO DILEVA 1619 CRAVENS AVE TORRANCE, CA 90501 JSA Form 990 (2012)

-orm 990 (20 i	2)		
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	Employees,	and
	Independent Contractors		

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

- 1a Complete this table for all persons required to be listed. 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
- 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.

C  Name and Title	Check this box if neither the organization nor	any related	orga	nıza			npen	sate	ed any current offic	er, director, or trus	itee.	_
EXECUTIVE DIRECTOR		Average hours per week (list any hours for related organizations below dotted	box,	unles er and	Pos neck ss pe d a d	mon rson irect	is both or/trust	an ee)	Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation from the organization and related	
VICE   PRESIDENT	EXECUTIVE DIRECTOR		4				х		111,785.	0		0
PRESIDENT       X       4,680.       0         (4) HOLLY EVANS       5.00       X       0       0         (5)       X       0       0         (6)       (7)       (8)       (9)       (10)       (11)       (12)       (13)       (13)       (13)       (13)       (14)       (15)       (16)       (17)       (18)       (18)       (19)       (19)       (11)       (12)       (13)       (14)       (15)       (16)       (17)       (17)       (18)       (19)	(2) GLORIA MATOBA VICE PRESIDENT	5.00			х				c	0		0
(4) HOLLY EVANS     5.00       TREASURER     X       (6)     0       (7)     (8)       (9)     (10)       (11)     (12)       (13)     (13)	(3) JULIE SHANKLE PRESIDENT	5.00			х				4,680.	0		0
(6)         (7)         (8)         (9)         (10)         (11)         (12)         (13)	(4) HOLLY EVANS	5.00			х					0		_ o
(10) (11) (12) (13)	(5)											
(8)         (9)         (10)         (11)         (12)         (13)	(6)		-									_
(10) (11) (12) (13)	(7)											
(10)       (11)       (12)       (13)	_(8)											_
(11) (12) (13)	(9)											
(12) (13)	(10)											
(13)	(11)											_
	(12)				_							_
(14)	(13)		-									_
	(14)											_

Part VII	Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and l	lig	hest Compensat	ed Employees	Page 0 (continued)
•	(A) Name and title	(B)  Average hours per week (list any hours for	box,	unle: er and	Pos heck ss pe	erson Irrect	e than o	an lee)	(D) Reportable compensation from the	(E)  Reportable compensation fro related organizations	other compensation
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS	c) from the organization and related organizations
									-		
					-						
				_				-			-
				-							
	tal	ection A .						<b>&gt; &gt; &gt;</b>	116,465. 0 116,465.	1	0 0 0 0 0 0 0 0
2 Total n	umber of individuals (including but not able compensation from the organization	limited to t	hose	iste 1	d a	bov	e) wh	o re			- <u> </u>
3 Did th	ne organization list any former offic yee on line 1a? If "Yes," complete Sched	er, directo	or, or	trı							3   X
organi	y individual listed on line 1a, is the station and related organizations ground in the state of	eater than	\$15	50,0	007	? //	"Yes	s, "	complete Schedu	le J for such	4 X
	y person listed on line 1a receive or vices rendered to the organization? If "You										
1 Compl	Independent Contractors ete this table for your five highest com	pensated i	ndep	ende	ent	con	tracto	ors 1	that received more	e than \$100,000	O of
year.	ensation from the organization. Report of	ompensau	on 10	rune	e ca	nen	ar ye	eare	ending with or with		
	(A) Name and business add	Iress							(B) Description of se	ervices	(C) Compensation
<u>•</u>								1			
				-				1			
	number of independent contractors (in han \$100,000 in compensation from the				nıte	d to	tho:	se I	listed above) who	received	

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (B) Related or (C) (D) (A) Unrelated Revenue Total revenue business excluded from tax exempt under sections revenue function 512, 513, or 514 revenue Grants Amounts 1a Federated campaigns . . 192,303 Membership dues . . 1c Fundraising events . . C 1d Related organizations . . . . . 1e Government grants (contributions) . . All other contributions, gifts, grants, and similar amounts not included above . ŏ Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f . . Service Revenue **Business Code** 169,487 CALIFORNIA TEACHERS REBATE 2a 35,850. NATIONAL TEACHERS REBATE 1,800 ADVERTISING MEMBER PUBLICATION Program All other program service revenue . Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 other similar amounts). ATTACHMENT 1 .... 120 120 Income from investment of tax-exempt bond proceeds 5 Royalties · · · · · · · (i) Real (II) Personal 9,820. 6a Gross rents . . . . . . . b Less rental expenses . . . 9,820. Rental income or (loss) . . c 9,820 þ Net rental income or (loss). (ii) Other (i) Securities Gross amount from sales of 7a assets other than inventory Less. cost or other basis and sales expenses . . c Gain or (loss) . . Net gain or (loss) . . . . . Other Revenue Gross income from fundraising events (not including \$ . of contributions reported on line 1c) 3,830. See Part IV, line 18 . . . . . . . 3,467 Net income or (loss) from fundraising events . Gross income from gaming activities. 9a Less direct expenses . . . . . . Net income or (loss) from gaming activities . 10a Gross sales of inventory, returns and allowances Less. cost of goods sold . . . . . . . . Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11a All other revenue . . . Total. Add lines 11a-11d . . 419,153 120. 9,820. Total revenue. See instructions

Part IX Statement of Functional Expenses

Sec	ction 501(c)(3) and 501(c)(4) organizations m				
<u>.                                    </u>	Check if Schedule O contains a resp			· · · · · · · · · · · · · · · · · · ·	(D)
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21 .	1,350.			
2	Grants and other assistance to individuals in				
_	the United States See Part IV, line 22	9,650.			
3	Grants and other assistance to governments,				
_	organizations, and individuals outside the			Indian Car	
	United States See Part IV, lines 15 and 16	0		Hallman Fr. 18-18-18-18-18-18-18-18-18-18-18-18-18-1	
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
•	trustees, and key employees	116,465.			
6	Compensation not included above, to disqualified				
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	Ó			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section	39,331.			
_	401(k) and 403(b) employer contributions)	40 141			
9	Other employee benefits	8,330.			
10	Payroli taxes	0,330.			
11	Fees for services (non-employees):	45 020			
а	Management	45,938.		<del></del>	
b	Legal	5 272			
C	Accounting	5,273.			
d	Lobbying		W him to we have a man a green way you		
е	Professional fundraising services See Part IV, line 17	0	The state of the s		
1	Investment management fees	0			<del></del>
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	1,042.			
13	Office expenses	2,791.			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	13,561.			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	5,642.			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,865.			
23	Insurance	0			
24	Other expenses Itemize expenses not covered	Managara da	2011年 · 1960年 · 1961年	to the fact that the same of t	
	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 O)				
_	MEMBERSHIP EXPENSE	2,785.	to at an is the additionable to the	1 101 M 14 W 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and property and the first state of the same sta
-	EQUIPMENT EXPENSE	8,316.			
_	LEADERSHIP	1,600.	<del>                                     </del>		<del></del>
-	COMMUNICATION	884.	<del>-</del>		<del></del>
		7,126.			
	All other expenses			<del></del>	
25	Total functional expenses. Add lines 1 through 24e	313,090.	<del> </del>	<del> </del>	<del>                                     </del>
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and		]		
	fundraising solicitation Check here ► If	,	J	}	

JSA 2E1052 1 000 Form 990 (2012)

Form 990 (2012)

**Balance Sheet** Part X (A) End of year Beginning of year 397,557. 351,915. 81,296. 141,320. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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 6 organizations (see instructions). Complete Part II of Schedule L n Notes and loans receivable, net ō Inventories for sale or use 1,359. 10 a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D 86,589. 110,567. 10c 0 11 Investments - publicly traded securities 11 ō 12 12 Investments - other securities. See Part IV. line 11 ō Investments - program-related. See Part IV, line 11 13 13 ō 14 14 0 15 15 519.800. 623,960. Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . . . . 16 16 2,920. 17 1,017. 17 Accounts payable and accrued expenses 0 18 18 ō 19 19 0 Tax-exempt bond liabilities ................. 20 20 ō 21 Escrow or custodial account liability Complete Part IV of Schedule D iabilities Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and 0 22 0 23 Secured mortgages and notes payable to unrelated third parties 23 0 Unsecured notes and loans payable to unrelated third parties . . . . . . . 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D . 2,920. 1,017. Total liabilities. Add lines 17 through 25..... Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Balances 27 28 Temporarily restricted net assets 28 29 29 Fund Organizations that do not follow SFAS 117 (ASC 958), check here 5 complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Assets Paid-in or capital surplus, or land, building, or equipment fund 31 516,880. 622,943. 32 Retained earnings, endowment, accumulated income, or other funds 32 š 622,943. 516,880. 33 33 519,800. 623,960. 34 Total liabilities and net assets/fund balances..........

Form 990 (2012)

Form 99	90 (2012)				Pag	e 12
Part	XI Reconciliation of Net Assets				_	
•	Check if Schedule O contains a response to any question in this Part XI	<u></u>			<u>L.l.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			19,1	
2	Total expenses (must equal Part IX, column (A), line 25)	2			13,0	
3	Revenue less expenses Subtract line 2 from line 1	3			06,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5	16,8	80.
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		6	22,9	43.
Part						
	Check if Schedule O contains a response to any question in this Part XII	• • •	· · ·		Ш,	
					Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				, William	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	kplaın	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or	4.4		
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			ALC: 1	心論	alle in
b	Were the organization's financial statements audited by an independent accountant?			2b	X	F \ Fr ##1/424
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n a		3,44	
	separate basis, consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis			Marie.		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	ight		_		v
	of the audit, review, or compilation of its financial statements and selection of an independent accour	itant?	1	2c	25.45	X
	If the organization changed either its oversight process or selection process during the tax year, e	xplair	ı in			
	Schedule O			開於	Ar4	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ıın			
	the Single Audit Act and OMB Circular A-133?			3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	dits		3b		

Form **990** (2012)

### SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Inspection

Employer identification number Name of the organization TORRANCE TEACHERS ASSOCIATION 95-2081589 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 2 Aggregate contributions to (during year) . . . . 3 Aggregate grants from (during year) . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b h Number of conservation easements on a certified historic structure included in (a) . . . . . . . C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register................ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. 

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

Schedule D (Form 990) 2012

b

	TORRANCE	TEACHER	s Asso	CIATION				95-208	31589		_
	ule D (Form 990) 2012	1		!-4!1 7	<u> </u>		U	10- 4	-1- /	Page	
Par	Organizations Maintaining Col	ections of	Art, H	istoricai	reasures	s, or O	ner Simi	iar Asse	ets (co	nunued	<u>'_</u>
3	Using the organization's acquisition, accessociated in the content of the content	ssion, and o	ther rec	ords, check	any of th	ne follow	ving that a	ire a sign	uficant i	use of I	ts
а	Public exhibition		d [	Loan o	r exchang	e progra	ms				
b	Scholarly research		е [	Other							_
C	Preservation for future generations										
4	Provide a description of the organization's	collections	and exp	lain how t	hey furthe	r the or	ganizatıon'	s exempt	purpos	se in Pa	ırt
	XIII.										
5	During the year, did the organization solicit										
	assets to be sold to raise funds rather than								Yes		10
Par	Escrow and Custodial Arrange line 9, or reported an amount on	ments. Co Form 990,	mplete Part X,	if the org line 21.	anization	answe	red "Yes"	to Form	1 990, ———	Part IV	/, 
- 1а	Is the organization an agent, trustee, custoo	lian or other	ınterme	diary for co	ntributions	or other	r assets no	t			
	included on Form 990, Part X?								Yes		lo
b	If "Yes," explain the arrangement in Part XIII	and comple	te the fo	llowing tab	le <sup>.</sup>						
							Α	mount			
C	Beginning balance				· · · · 1c						
	Additions during the year				· · · · · · · · · · · · · · · · · · ·						
	Distributions during the year										
	Ending balance										
	Did the organization include an amount on								Yes		10
	If "Yes," explain the arrangement in Part XIII								· · · · ·		_
Par									4.5 =		
1.		rrent year	(b) P	nor year	(c) Two ye	ars back	(d) Three y	ears back	(e) Four	years bac	* 
	Beginning of year balance Contributions					<del></del>	ļ				_
	Net investment earnings, gains,						<u> </u>				—
·	and losses										
Ч	Grants or scholarships										—
	Other expenditures for facilities										
Ī	and programs										
f	Administrative expenses										—
	End of year balance		·		<del></del>			_			
	Provide the estimated percentage of the cu	rrent year er	nd balan	ce (line 1g.	column (a	)) held as	i.				_
	Board designated or quasi-endowment	•	%	, •	•	•					
	Permanent endowment ► %		-								
C	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 10	00%.								
3a	Are there endowment funds not in the poss	session of th	e organi	zation that	are held a	nd admır	nistered for	the			
	organization by.									Yes N	0
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
þ	If "Yes" to 3a(ii), are the related organization		•					· · · · ·	3b		
4	Describe in Part XIII the intended uses of th										
Par	t VI Land, Buildings, and Equipment	. See Form	า 990, F	art X, line	10.		<del></del>				
	Description of property	(a) Cost or o	other basis	(b) Cost o	r other basis	(c) Acc	cumulated	(d	l) Book val	lue	

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		18,911.	<b>建工程器 排</b>	18,911.
b Buildings		26,089.	26,089	
c Leasehold improvements				
d Equipment		36,173.	36,173.	
e Other		113,117.	48,305.	64,812.
Total. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part	X, column (B), line 10	O(c) ) ▶	83,723.

Schedule D (Form 990) 2012

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Page	,

Part VII	Investments - Other Securities. See Fo	rm 990, Part X, Iin	e 12.
-	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al derivatives		
(2) Closely-	-held equity interests		
(C)		<u> </u>	
(D)	· <del>-</del>		
<u>(E)</u> (F)	·		
(G)			111
(H)			
(I)	·		
	n (b) must equal Form 990, Part X, col (B) line 12)		The control of the co
Part VIII	Investments - Program Related. See Fo	rm 990, Part X, Iir	ne 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> (7)			
(8)		·	
(9)			
(10)			
	n (b) must equal Form 990, Part X, col (B) line 13)		The state of the s
Part IX	Other Assets. See Form 990, Part X, lin	e 15.	
	(a) [	Description	(b) Book value
(1)			
(2)		·	
(3)			
(4)			
(5)		·	
<u>(6)</u> (7)			
(8)			
(9)		· · · · · · · · · · · · · · · · · · ·	
(10)			
	umn (b) must equal Form 990, Part X, col. (B) lir	ne 15)	
Part X	Other Liabilities. See Form 990, Part X,		
1.	(a) Description of liability	(b) Book valu	ue
(1) Feder	ral income taxes		
(2)			
_(3)			
_(4)			
_(5)			
_(6)			
		-	
(9)			
(10)			
(11)	(b) must sound Form 000, D=4 V ==1 (D) I == 0.5 \		
otal. (Colur	nn (b) must equal Form 990, Part X, col (B) line 25)	<b>•</b>	是是我们的一个人的时间,不是一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII.........

Schedule D (Form 990) 2012

Schedu	le D (Form 990) 2012		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur	n	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a	15.45	
b	Donated services and use of facilities	312	
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	拖雷	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	ırn	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
c	Other losses		
d	Other (Describe in Part XIII )  Add lines 3s through 3d		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	<del></del>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1,5545	· · · · · · · · · · · · · · · · · · ·
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part	XIII Supplemental Information	1	
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I, line 4; Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	V, line: vide a	s 1b and 2b, ny additional
	**************************************		

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

SCHEDULEI (Form 990) Department of the Treasury

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

OMB No 1545-0047

Employer identification number 95-2081589

Open to Public Inspection

Name of the organization

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

Part I General Information on Grants and Assistance TORRANCE TEACHERS ASSOCIATION Internal Revenue Service

	[	ê _	
	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	to award the grants or assistance?	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.
	oes the organization maintain records to s	the selection criteria used to award the grants or assistance	escribe in Part IV the organization's proce
3	1	₽	2 C

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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
<ul> <li>Enter total number of section 501(c)(3) and government or</li> <li>Enter total number of other organizations listed in the line</li> </ul>	overnment or	rganizations list	ganizations listed in the line 1 table 1 table				
ı							

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

Schedule I (Form 990) (2012)

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Page 2.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2012) Part III

	rait in carl be duplicated if additional space is needed	e is riceded.					,
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	1
1 HIGH	HIGH SCHOL SCHOLARSHIP	10.	9,000.				1
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<sub>6</sub>							<b>i</b> !
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Part IV	Part IV Supplemental Information. Complete this part to information.	s part to prov	vide the informat	ion required ın	Part I, line 2, Part III,	provide the information required in Part I, line 2, Part III, column (b), and any other additional	

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#### SCHEDULE O

(Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TORRANCE TEACHERS ASSOCIATION

Employer identification number 95-2081589

PART VI, SECTION B, QUESTION 11B

THE BOARD OF DIRECTORS REVIEWS THE FORM 990 AT THEIR BOARD MEETING.

PART VI, SECTION C, QUESTION 19

COPIES OF THE ORGANIZATIONS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS

ARE AVAILABLE UPON REQUEST AT THE ASSOCIATIONS OFFICE.

PART VI, SECTION B, QUESTION 15B

AT ITS BOARD MEETINGS, THE BOARD OF DIRECTORS DISCUSSES AND DETERMINES

COMPANY OF THE EVECUATURE DIRECTOR

THE COMPENSATION OF THE EXECUTIVE DIRE			ATTACHMENT 1				
FORM 990, PART VIII - INVESTMENT INCOME	<u>:</u>						
DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV	(D) EXCLUDED . REVENUE			
INTEREST INCOME	120	ο.	120.				
TOTALS	12	<u>0.</u>	120.				
FORM 990, PART VIII - FUNDRAISING EVENTS							
FORM 990, FART VIII - FONDRAISING EVENT							
DESCRIPTION	GROSS INCOME	DIREC EXPENS		NET INCOME			
FUNDRAISING	3,8	30.	3,467.	363.			

3,830.

3,467.

TOTALS

363.