

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2009

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization NATIONAL CONGRESS OF PARENTS & TEACHERS Doing Business As		D Employer identification number 36-2169155
		Number and street (or P O box if mail is not delivered to street address) Room/suite 541 N FAIRBANKS COURT 1300		E Telephone number (312) 670-6782
		City or town, state or country, and ZIP + 4 CHICAGO, IL 60611-3319		G Gross receipts \$ 12,139,598.
		F Name and address of principal officer. BYRON GARRETT 541 N FAIRBANKS CT, STE 1300 CHICAGO, IL 60611		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website WWW.PTA.ORG		H(c) Group exemption number
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 1897		M State of legal domicile IL

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities. SEE SCHEDULE O, ATTACHMENT 1		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	24
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5	Total number of employees (Part V, line 2a)	5	94
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	184,417.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	2,505,445.	2,042,881.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,821,290.	9,594,431.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	336,441.	248,125.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	656,920.	253,653.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13,320,096.	12,139,090.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	6,392,250.	5,824,803.
	16b	Total fundraising expenses, Part IX, column (D), line 25		0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	6,689,837.	6,926,513.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,082,087.	12,751,316.	
19	Revenue less expenses. Subtract line 18 from line 12	238,009.	-612,226.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year	End of Year
	21	Total liabilities (Part X, line 26)	17,435,398.	16,785,693.
	22	Net assets or fund balances. Subtract line 21 from line 20	2,225,310.	2,743,392.
			15,210,088.	14,042,301.

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.

Sign Here
 Signature of officer: *Byron V. Garrett* Date: 05/13/2010
 Type or print name and title: Byron V. Garrett CEO, Chief Executive Officer

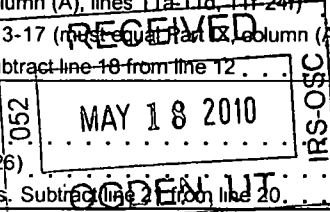
Paid Preparer's Use Only
 Preparer's signature: *Carole D. Bonlepe* Date: 7/2/10
 Preparer's identifying number (see instructions): P00022148
 Firm's name (or yours if self-employed), address, and ZIP + 4: CBIZ MHM, LLC ONE SOUTH WACKER DRIVE, SUITE 1800 CHICAGO, IL 60606
 EIN: 34-1853929
 Phone no: 312-602-6800

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.*

Form 990 (2009)

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
SEE SCHEDULE O, ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,088,741 including grants of \$) (Revenue \$)
SEE SCHEDULE O, ATTACHMENT 1

4b (Code:) (Expenses \$ 1,443,490 including grants of \$) (Revenue \$)

PROGRAMS: DEVELOPS AND IMPLEMENTS EFFECTIVE AND INFORMATIVE PROGRAMS DEVOTED TO THE PRIORITIES OF THE ORGANIZATION AS OUTLINED IN THE STRATEGIC PLAN. THIS CONTINUES TO BE ACCOMPLISHED THROUGH SUCH PROGRAMS AND INITIATIVES SUCH AS REFLECTIONS, HEARST AWARDS, HEALTHY LIFESTYLES, NATIONAL STANDARDS FOR FAMILY-SCHOOL PARTNERSHIPS, TAKE YOUR FAMILY TO SCHOOL WEEK, TEACHER APPRECIATION WEEK, THREE FOR ME AND PARENTAL CONTROL ON VIDEO GAME CONSOLES AND RISKS ASSOCIATED WITH ONLINE VIDEO GAME PLAY.

4c (Code:) (Expenses \$ 1,374,230 including grants of \$) (Revenue \$)

LEGISLATIVE/ADVOCACY: ADVOCATES FOR POLICIES THAT BENEFIT CHILDREN AND FAMILIES VIA THE DISSEMINATION OF INFORMATION, PARTICIPATION IN PROGRAMS AND TRAINING AND MONITORING OF LEGISLATION. DEVELOPS RESOURCES WHICH PROVIDE BACKGROUND ON PTA ISSUES; EMPHASIZES THE IMPORTANCE OF ADVOCATING; AND EXPLAINS THE ADVOCACY PROCESS. CONDUCTS THE PTA NATIONAL LEGISLATIVE CONFERENCE AND TRAINED PTA REPRESENTATIVES FROM EVERY STATE.

4d Other program services. (Describe in Schedule O.) ATTACHMENT 2
(Expenses \$ 2,372,148 including grants of \$) (Revenue \$)

4e Total program service expenses 10,278,609.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20 covering various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		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? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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? <i>If "Yes," complete Schedule J.</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a 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? <i>If "Yes," complete Schedule L, Part I.</i>		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? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, and Yes/No boxes. Includes questions 1a-12a regarding Form 1096, Form W-2G, backup withholding, Form W-3, foreign accounts, prohibited tax shelter transactions, and sponsoring organizations.

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.

Section A. Governing Body and Management

Table with columns for question number, Yes, and No. Includes questions 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for question number, Yes, and No. Includes questions 10a, 10b, 11, 11A, 12a, 12b, 12c, 13, 14, 15, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed IL,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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 Use Schedule J-2 if additional space is needed

- 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 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.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES SAYLORS NATIONAL PRESIDENT	1.00	X					6,000			
BETSY LANDERS NATIONAL PRESIDENT - ELECT	1.00	X								
TERESA WILLIAMS SECRETARY/TREASURER	1.00	X								
GINA ARMOR BOARD MEMBER	1.00	X								
LAURA BAY BOARD MEMBER	1.00	X								
PHIL CLARK BOARD MEMBER	1.00	X								
STELLA EDWARDS BOARD MEMBER	1.00	X								
MELISSA JOHNSON BOARD MEMBER	1.00	X								
JEAN KRIEGER BOARD MEMBER	1.00	X								
TIBBY MILNE BOARD MEMBER	1.00	X								
AURELIO MONTEMAYOR BOARD MEMBER	1.00	X								
MARY JO NEIL BOARD MEMBER	1.00	X								
CARLA NINO BOARD MEMBER	1.00	X								
HELANE ROBSON BOARD MEMBER	1.00	X								
DAVID SQUIRES BOARD MEMBER	1.00	X								
AL TAMAGNI BOARD MEMBER	1.00	X								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
VITO BORELLO BOARD MEMBER	1.00	X								
ALBERTO CARVALHO BOARD MEMBER	1.00	X								
FRANK GALLAGHER BOARD MEMBER	1.00	X								
KAREN MCLEAN DADE BOARD MEMBER	1.00	X								
SONNY SAVOIE BOARD MEMBER	1.00	X								
GENERAL BENNIE WILLIAMS BOARD MEMBER	1.00	X								
DANI CARVER BOARD MEMBER	1.00	X								
NICHOLAUS NELSON-GOEDERT BOARD MEMBER	1.00	X								
BYRON V GARRETT CEO	37.50			X			210,859.		21,387.	
JEANICE AIKENS CFO	37.50			X			100,634.		21,762.	
EVELYN TAYLOR CHIEF OF STAFF	37.50				X		132,781.		7,328.	
LINDA WHITTINGTON DEPUTY EXECUTIVE DIRECTOR	37.50				X		129,981.		7,195.	
MISHAELA DURAN GOVERNMENT AFFAIRS DIRECTOR	37.50				X		111,284.		15,989.	
1b Total							691,539.		73,661.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **5**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **5**

Part VIII Statement of Revenue

36-2169155

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns					
	1b	Membership dues					
	1c	Fundraising events					
	1d	Related organizations					
	1e	Government grants (contributions)					
	1f	All other contributions, gifts, grants, and similar amounts not included above	2,042,881				
	g	Noncash contributions included in lines 1a-1f \$	10,600.				
	h	Total. Add lines 1a-1f	2,042,881				
Program Service Revenue			Business Code				
	2a	MEMBERSHIP DUES		8,544,667	8,544,667		
	b	MEMBER BENEFITS		435,277	435,277		
	c	CONVENTION		400,385	400,385		
	d	SUBSCRIPTIONS		179,472	179,472		
	e	LEGISLATIVE CONFERENCES		18,200	18,200		
	f	All other program service revenue		16,430	16,430		
	g	Total. Add lines 2a-2f		9,594,431			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		248,633		248,633	
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		57,780		57,780	
	6a	Gross Rents	(i) Real				
			(ii) Personal				
			b Less: rental expenses				
			c Rental income or (loss)				
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			b Less: cost or other basis and sales expenses		508		
			c Gain or (loss)		-508		
	d	Net gain or (loss)		-508			
	8a	Gross income from fundraising events (not including \$ _____ 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		0			
	9a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
c	Net income or (loss) from gaming activities		0				
10a	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		0				
Miscellaneous Revenue		Business Code					
11a	ADVERTISING	541800	184,417		184,417		
b	MISCELLANEOUS		11,456		11,456		
c							
d	All other revenue						
e	Total. Add lines 11a-11d		195,873				
12	Total Revenue. See instructions		12,139,090	9,594,431	184,417	317,869	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	685,539.	552,597.	132,942.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages	4,043,956.	3,259,736.	784,220.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	109,242.	88,057.	21,185.	
9 Other employee benefits	649,251.	523,346.	125,905.	
10 Payroll taxes	336,815.	271,499.	65,316.	
11 Fees for services (non-employees):				
a Management	0.			
b Legal	34,700.	27,971.	6,729.	
c Accounting	30,398.	24,503.	5,895.	
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	817,722.	659,146.	158,576.	
12 Advertising and promotion	524,444.	422,742.	101,702.	
13 Office expenses	1,829,558.	1,474,763.	354,795.	
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	819,115.	660,269.	158,846.	
17 Travel	1,568,892.	1,264,646.	304,246.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	613,739.	494,720.	119,019.	
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	232,121.	187,107.	45,014.	
23 Insurance	23,572.	19,001.	4,571.	
24 Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a AWARDS -----	55,635.	44,846.	10,789.	
b MISCELLANEOUS -----	139,599.	112,604.	26,995.	
c RESEARCH & DEVELOPMENT -----	93,661.	75,498.	18,163.	
d RECRUITMENT -----	16,848.	13,581.	3,267.	
e UNEMPLOYMENT COMPENSATION -----	50,877.	41,011.	9,866.	
f All other expenses -----	75,632.	60,966.	14,666.	
25 Total functional expenses. Add lines 1 through 24f	12,751,316.	10,278,609.	2,472,707.	
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	649,416.	1	2,121,740.
	2 Savings and temporary cash investments	2,936,099.	2	4,169,345.
	3 Pledges and grants receivable, net	1,175,000.	3	0.
	4 Accounts receivable, net	1,457,217.	4	1,612,659.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	12,770.	8	5,840.
	9 Prepaid expenses and deferred charges	205,172.	9	471,422.
	10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a 2,620,580.		
	b Less: accumulated depreciation	10b 1,765,736.	977,190.	10c 854,844.
	11 Investments - publicly traded securities	10,022,534.	11	7,549,843.
	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		17,435,398.	16	16,785,693.
Liabilities	17 Accounts payable and accrued expenses	1,077,577.	17	721,649.
	18 Grants payable		18	
	19 Deferred revenue	19,393.	19	874,338.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	1,128,340.	25	1,147,405.
	26 Total liabilities. Add lines 17 through 25		2,225,310.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	13,328,797.	27	12,357,592.
	28 Temporarily restricted net assets	1,364,800.	28	1,168,218.
	29 Permanently restricted net assets	516,491.	29	516,491.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances		15,210,088.	33	14,042,301.
34 Total liabilities and net assets/fund balances		17,435,398.	34	16,785,693.

Part XI Financial Statements and Reporting

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c		X
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization NATIONAL CONGRESS OF PARENTS & TEACHERS	Employer identification number 36-2169155
---	--

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

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

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

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

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

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.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2009; 15 Public support percentage from 2008 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2009; 16b 33 1/3% support test - 2008; 17a 10%-facts-and-circumstances test - 2009; 17b 10%-facts-and-circumstances test - 2008; 18 Private foundation.

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,426,900.	10,939,620	11,545,685.	11,592,532	10,587,548.	56,092,285
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	510,989	851,081	679,698.	767,362	1,049,764	3,858,894.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.	11,937,889.	11,790,701	12,225,383.	12,359,894	11,637,312.	59,951,179.
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)						59,951,179.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6.	11,937,889	11,790,701	12,225,383.	12,359,894	11,637,312	59,951,179.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	321,143	475,407	557,655.	468,614	306,412	2,129,231
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	321,143	475,407	557,655	468,614	306,412.	2,129,231.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		216,518	294,119.	330,015	184,417	1,025,069.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	135,550	26,693	101,025.	328,543.	11,456	603,267.
13 Total support. (Add lines 9, 10c, 11, and 12)	12,394,582	12,509,319	13,178,182.	13,487,066	12,139,597	63,708,746.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)).	15	94.10%
16 Public support percentage from 2008 Schedule A, Part III, line 15.	16	94.25%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	3.34%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	3.31%

- 19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization ▶
- b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization ▶
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE A, PART III, SECTION B, LINE 12:

LOSS ON SALE OF ASSETS OF \$508 HAS NOT BEEN INCLUDED IN OTHER INCOME.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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

2009

▶ Complete if the organization is described below.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization NATIONAL CONGRESS OF PARENTS & TEACHERS	Employer identification number 36-2169155
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part 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-

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group.
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	73,220.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	615,006.													
c	Total lobbying expenditures (add lines 1a and 1b)	688,226.													
d	Other exempt purpose expenditures	12,063,090.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	12,751,316.													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	787,566.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	196,892.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total	
2 a	Lobbying non-taxable amount	558,645.	809,276.	804,104.	787,566.	2,959,591.
b	Lobbying ceiling amount (150% of line 2a, column (e))					4,439,387.
c	Total lobbying expenditures	343,992.	574,443.	581,393.	688,226.	2,188,054.
d	Grassroots nontaxable amount	139,661.	202,319.	201,026.	196,892.	739,898.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,109,847.
f	Grassroots lobbying expenditures		54,610.	8,257.	73,220.	136,087.

Schedule C (Form 990 or 990-EZ) 2009

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)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation... a Volunteers? b Paid staff or management... c Media advertisements? d Mailings to members... e Publications... f Grants to other organizations... g Direct contact with legislators... h Rallies, demonstrations... i Other activities? j Total. Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Series of horizontal dashed lines for providing supplemental information.

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

Name of the organization

NATIONAL CONGRESS OF PARENTS & TEACHERS

Employer identification number

36-2169155

Part I 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
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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 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 conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 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 Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items.

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	605,494	595,989.			
b Contributions					
c Net investment earnings, gains, and losses	5,342.	17,005.			
d Grants or scholarships					
e Other expenditures for facilities and programs	4,274.	7,500			
f Administrative expenses					
g End of year balance	606,562	605,494.			

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ 85.0000 %
 - c Term endowment ▶ 15.0000 %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by.
- | | Yes | No |
|---|--------------|----|
| (i) unrelated organizations | 3a(i) | X |
| (ii) related organizations | X | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | X |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	616,738		139,712	477,026.
c Leasehold improvements	2,003,842		1,626,024	377,818.
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				854,844.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

Table with 10 rows and 2 columns. Row 1: Total revenue (Form 990, Part VIII, column (A), line 12) ... 1. Row 2: Total expenses (Form 990, Part IX, column (A), line 25) ... 2. Row 3: Excess or (deficit) for the year Subtract line 2 from line 1 ... 3. Row 4: Net unrealized gains (losses) on investments ... 4. Row 5: Donated services and use of facilities ... 5. Row 6: Investment expenses ... 6. Row 7: Prior period adjustments ... 7. Row 8: Other (Describe in Part XIV.) ... 8. Row 9: Total adjustments (net) Add lines 4 through 8 ... 9. Row 10: Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 ... 10.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Table with 5 main rows and sub-rows. Row 1: Total revenue, gains, and other support per audited financial statements ... 1. Row 2: Amounts included on line 1 but not on Form 990, Part VIII, line 12. Sub-rows: a Net unrealized gains on investments (2a), b Donated services and use of facilities (2b), c Recoveries of prior year grants (2c), d Other (Describe in Part XIV.) (2d), e Add lines 2a through 2d (2e). Row 3: Subtract line 2e from line 1 ... 3. Row 4: Amounts included on Form 990, Part VIII, line 12, but not on line 1: Sub-rows: a Investment expenses not included on Form 990, Part VIII, line 7b (4a), b Other (Describe in Part XIV.) (4b), c Add lines 4a and 4b (4c). Row 5: Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) ... 5.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows and sub-rows. Row 1: Total expenses and losses per audited financial statements ... 1. Row 2: Amounts included on line 1 but not on Form 990, Part IX, line 25: Sub-rows: a Donated services and use of facilities (2a), b Prior year adjustments (2b), c Other losses (2c), d Other (Describe in Part XIV.) (2d), e Add lines 2a through 2d (2e). Row 3: Subtract line 2e from line 1 ... 3. Row 4: Amounts included on Form 990, Part IX, line 25, but not on line 1: Sub-rows: a Investment expenses not included on Form 990, Part VIII, line 7b (4a), b Other (Describe in Part XIV.) (4b), c Add lines 4a and 4b (4c). Row 5: Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) ... 5.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV Supplemental Information *(continued)*

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

NATIONAL CONGRESS OF PARENTS & TEACHERS

Employer identification number

36-2169155

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a is 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

2 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?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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.

5 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?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III

6 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?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 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 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2009

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

OMB No 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

NATIONAL CONGRESS OF PARENTS & TEACHERS

Employer identification number

36-2169155

ATTACHMENT 1

FROM 990, PART I, LINE 1:

TO PROMOTE THE WELFARE OF CHILDREN AND YOUTH IN THE HOME, SCHOOL,
COMMUNITY AND PLACE OF WORSHIP. TO RAISE THE STANDARD OF HOME LIFE. TO
SECURE ADEQUATE LAWS FOR THE CARE AND PROTECTION OF CHILDREN AND YOUTH.
TO FOSTER A CLOSER RELATIONSHIP BETWEEN HOME AND SCHOOL.

FROM 990, PART III, LINE 1:

TO PROMOTE THE WELFARE OF CHILDREN AND YOUTH IN THE HOME, SCHOOL,
COMMUNITY AND PLACE OF WORSHIP. TO RAISE THE STANDARD OF HOME LIFE. TO
SECURE ADEQUATE LAWS FOR THE CARE AND PROTECTION OF CHILDREN AND YOUTH.
TO FOSTER A CLOSER RELATIONSHIP BETWEEN HOME AND SCHOOL.

FROM 990, PART III, LINE 4A:

FIELD OPERATIONS/TRAINING/MEMBERSHIP: PROVIDES INFORMATION AND TRAINING
TO ASSIST PTA LEADERS AND POTENTIAL LEADERS IN DEVELOPING THE SKILLS AND
KNOWLEDGE NEEDED TO BE SUCCESSFUL IN THEIR COMMUNITIES. "PTA MORE" WAS
ESTABLISHED TO ENCOURAGE MORE MALE INVOLVEMENT AND ENGAGEMENT THROUGH
COLLABORATIONS WITH EXISTING FATHERHOOD AND FAMILY ORGANIZATIONS.
EXTENSION LIAISON POSITIONS EXPANDED TO BECOME NATIONAL SERVICE
REPRESENTATIVES WHICH WORK COLLABORATIVELY WITH STATE LEADERS IN ASSIGNED

Name of the organization

NATIONAL CONGRESS OF PARENTS & TEACHERS

Employer identification number

36-2169155

ATTACHMENT 1 (CONT'D)

SERVICE AREAS TO INCREASE THE STATES' RETENTION, SUSTAINABILITY AND DEVELOPMENT OF MEMBERSHIP, AS WELL AS AID IN THE VISIBILITY AND OVERALL ORGANIZATIONAL EFFECTIVENESS OF STATE AND LOCAL PTAS. THEY ALSO WORK CLOSELY WITH ALL NATIONAL PTA DEPARTMENTS TO SUPPORT THE SERVICES, PROJECTS AND PROGRAMS THAT ARE PRODUCED IN SUPPORT OF THOSE PTAS. DEVELOPS AND DELIVERS A CONSISTENT PTA IMAGE AND MESSAGE IN ALL PRINT AND ELECTRONIC COMMUNICATIONS TO POSITION THE ORGANIZATION AS THE NATION'S LEADING AUTHORITY ON PARENT INVOLVEMENT. THROUGH THE ONGOING PUBLICATION OF OUR CHILDREN, PTA PARENT, PARTNERS IN LEADERSHIP, LOCAL LEADERS NEWS AND OTHER COMMUNICATION VEHICLES (INCLUDING THE ESTABLISHMENT OF A PRESENCE IN SOCIAL MEDIA OUTLETS SUCH AS FACEBOOK, TWITTER, FOTKI, YOUTUBE, AND THE INTRODUCTION OF PTA RADIO), ALL PTA CONSITUENTS AND THE GENERAL PUBLIC REMAIN INFORMED ABOUT ALL ISSUES RELATING TO THE HEALTH, WELLNESS AND EDUCATION OF AMERICA'S YOUTH.

FROM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CONVENTION: FACILITATES THE COMING TOGETHER OF PTA LEADERSHIP AND MEMBERSHIP AT THE ANNUAL MEETING AND CONVENTION. IDEAS AND INFORMATION ARE SHARED FACE TO FACE WITH PTA MEMBERSHIP THROUGH WORKSHOPS, SKILL BUILDING SESSIONS AND NETWORKING. THIS EVENT AFFECTS ALL MEMBERS DIRECTLY AND IMMEDIATELY IMPACTS EVERY PARENT, TEACHER, STUDENT AND LEADER WHO TAKES PART IN THE EVENT.

OFFICERS/MEETINGS: FACILITATES THE GATHERING OF PTA LEADERSHIP, INCLUDING

Name of the organization

NATIONAL CONGRESS OF PARENTS & TEACHERS

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ATTACHMENT 1 (CONT'D)

ALL BOARD AND COMMITTEE MEETINGS IN SUPPORT OF THE BUSINESS, WORK AND MISSION OF THE ORGANIZATION. THE ACTIVITIES IN THIS CATEGORY AFFECT ALL BOARD AND COMMITTEE MEMBERS AND INDIRECTLY AFFECT ALL PTA MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11A:

THE FORM 990 IS REVIEWED BY THE BOARD AND QUESTIONS ARE ADDRESSED WITH THE PREPARER, CBIZ MHM, LLC, AS NEEDED.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY MAKING THEM AVAILABLE ON THE WEBSITE AND BY REQUISITION.

ATTACHMENT 2FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
CONVENTION:		1229749.	
OFFICERS/MEETINGS:		1142399.	
TOTALS		<u>2372148.</u>	

ATTACHMENT 3990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
HEALTH CARE SERVICES CORP P.O. BOX 1186 CHICAGO, IL 60690	HEALTHCARE PAYMENTS	652,626.
G/WDC 541 FAIRBANKS, LLC	RENT	623,087.

Name of the organization

NATIONAL CONGRESS OF PARENTS & TEACHERS

Employer identification number

36-2169155

ATTACHMENT 3 (CONT'D)990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
1037 PAYSHERE CIRCLE CHICAGO, IL 60674		
PALMER PRINTING 739 SOUTH CLARK STREET CHICAGO, IL 60605	PRINTING	290,407.
M-C. CAPITAL ASSOCIATE, LLC P.O. BOX 23229 NEWARK, NJ 07189	DC RENT	222,295.
HILTON FORT LAUDERDALE MARINA 1881 SE 17TH STREET FT. LAUDERDALE, FL 33316	MEETING EXPENSE	199,501.
	TOTAL COMPENSATION	<u>1,987,916.</u>

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

Note. Complete line 1 if any entry is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	X
b	Gift, grant, or capital contribution to other organization(s)	1b	X
c	Gift, grant, or capital contribution from other organization(s)	1c	X
d	Loans or loan guarantees to or for other organization(s)	1d	X
e	Loans or loan guarantees by other organization(s)	1e	X
f	Sale of assets to other organization(s)	1f	X
g	Purchase of assets from other organization(s)	1g	X
h	Exchange of assets	1h	X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n	Sharing of paid employees	1n	X
o	Reimbursement paid to other organization for expenses	1o	X
p	Reimbursement paid by other organization for expenses	1p	X
q	Other transfer of cash or property to other organization(s)	1q	X
r	Other transfer of cash or property from other organization(s)	1r	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)	THE ENDOWMENT FUND OF THE PTA	P	9,548.
(2)	THE ENDOWMENT FUND OF THE PTA	Q	36,653.
(3)			
(4)			
(5)			
(6)			

