EXTENSION GRANTED TO AUGUST 15, 2012

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning and ending

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

C Name of organization
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) 100 W HARRISON, NORTH TOWER

Room/suite 500

City or town, state or country, and ZIP + 4 SEATTLE, WA 98119-4123

F Name and address of principal officer: MICHAEL S. PIRAINO
SAME AS C ABOVE

D Employer identification number 91-1255818

E Telephone number (206)270-0072

G Gross receipts $ 15,024,763.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CASAFORCHILDREN.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1984 M State of legal domicile: WA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE ASSOCIATION SUPPORTS LOCAL CASA PROGRAMS WHICH ADVOCATE FOR ABUSED AND NEGLECTED CHILDREN.

2 Check this box ▶ ☐ 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	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	42
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	17,093,260.	14,608,314.
9	Program service revenue (Part VIII, line 2g)	344,927.	409,305.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	31,562.	7,144.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	42,336.	0.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,512,085.	15,024,763.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	11,769,958.	8,771,985.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,679,287.	3,456,951.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 305,398.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,352,427.	3,568,831.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,801,672.	15,797,767.
19	Revenue less expenses. Subtract line 18 from line 12	-1,289,587.	-773,004.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	2,813,122.	1,934,100.
21	Total liabilities (Part X, line 26)	336,755.	244,655.
22	Net assets or fund balances. Subtract line 21 from line 20	2,476,367.	1,689,445.

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 — Date 5/14/12

▶ THOMAS DUNN, CFO — Type or print name and title — 5/15/12

Paid Preparer Use Only

Print/Type preparer's name: RAYMON G. HOLMDAHL	Preparer's signature	Date: 05/10/12	Check ☐ if self-employed	PTIN: P00120599
Firm's name ▶ PETERSON SULLIVAN LLP, CPA'S			Firm's EIN ▶	91-0605875
Firm's address ▶ 601 UNION ST, STE 2300 SEATTLE, WA 98101-2345			Phone no.	2063827777

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE ASSOCIATION SUPPORTS THE DEVELOPMENT AND GROWTH OF LOCAL PROGRAMS WHICH RECRUIT AND TRAIN VOLUNTEERS TO ADVOCATE FOR ABUSED AND NEGLECTED CHILDREN.

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 ☒ 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 ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 $ 3,062,438. including grants of $) (Revenue $ 409,305.)
TRAINING AND CONFERENCE FEES RECEIVED FROM VOLUNTEERS ALLOWING THE ORGANIZATION TO TRAIN THE VOLUNTEERS IN PERFORMING COURT RELATED CASA DUTIES.

4b (Code:) (Expenses $ 2,007,714. including grants of $) (Revenue $)
MEMBERSHIP DUES FROM VOLUNTEERS AND CASA PROGRAMS WHICH PERFORM COURT RELATED CASA DUTIES. THESE FUNDS ALLOW THE ORGANIZATION TO PROVIDE ADDITIONAL TRAINING AND INFORMATION TO THE MEMBERS TO ASSIST IN FURTHERING THEIR CASA ACTIVITIES.

4c (Code:) (Expenses $ 9,037,706. including grants of $ 8,771,985.) (Revenue $)
DEVELOPMENT AND EXPANSION OF CASA PROGRAMS UTILIZING FLOW THROUGH GRANTS. AN AVERAGE OF ONE TO TWO NEW CASA PROGRAMS ARE STARTED EACH MONTH.

4d Other program services (Describe in Schedule O.)
(Expenses $ Including grants of $) (Revenue $)

4e Total program service expenses ▶ 14,107,858.

Part IV Checklist of Required Schedules

			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*?	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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		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		X
9	Did the organization report an amount in Part X, line 21; 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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	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, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, 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		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete 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		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	46		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	42		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

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

Check if Schedule O contains a response to any question in this Part VI ..... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	21		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	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 with a taxable entity during the year?	16a		X
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?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ WA, AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL

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.

[X] Own website [X] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 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: ▶

TOM DUNN - (206) 270-0072

100 W HARRISON, NORTH TOWER, STE 500, SEATTLE, WA 98119-4123

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) BRITT BANKS PRESIDENT	2.00	X		X				0.	0.	0.
(2) LORI DUARTE-ROBERTS PRESIDENT-ELECT	2.00	X		X				0.	0.	0.
(3) MONICA BURMEISTER TREASURER	2.00	X		X				0.	0.	0.
(4) BARBARA PARSKY INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(5) VEENA PANJABI INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(6) CLAIRE BABINEAUX-FONTENOT INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(7) DENISE CONWAY INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(8) PAUL BERGEVIN INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(9) BETH DESSEM SECRETARY	2.00	X		X				0.	0.	0.
(10) WILLIAM COLLINS INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(11) ELIZABETH RECTOR INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(12) GLORIA O'NEILL INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(13) TRACI MEARS INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(14) MARY COLLARD INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(15) SUSAN GREENBERG INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(16) LAURA MAINES INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(17) CONNIE STEPHENS INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(18) MARY STUTTS VICE PRESIDENT	2.00	X		X				0.	0.	0.
(19) KAREN BANES-DUNNING INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(20) DONALD GIMBEL INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(21) PATRICIA MARTIN INDIVIDUAL TRUSTEE	2.00	X						0.	0.	0.
(22) MICHAEL PIRAINO CHIEF EXECUTIVE OFFICER	40.00			X				220,814.	0.	3,225.
(23) CARMELA WELTE DEPUTY CHIEF EXECUTIVE OFF	40.00			X				156,643.	0.	0.
(24) TOM DUNN CHIEF FINANCIAL OFFICER	40.00			X				132,873.	0.	0.
(25) JAMES CLUNE CHIEF COMMUNICATIONS OFFIC	40.00			X				81,843.	0.	2,400.
(26) SALLY ERNY CHIEF PROGRAM OFFICER	40.00			X				100,460.	0.	3,225.
1b Sub-total ▶								692,633.	0.	8,850.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								692,633.	0.	8,850.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 4

		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*	3		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*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(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	1a				
	b Membership dues	1b	96,020.			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	13319439.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,192,855.			
	g Noncash contributions included in lines 1a-1f: $					
	h **Total.** Add lines 1a-1f		14608314.			
Program Service Revenue		Business Code				
	2a CONFERENCE FEES	900099	409,305.	409,305.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f		409,305.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		7,144.			7,144.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory					
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	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					
	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					
	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					
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d					
	12 **Total revenue.** See instructions.		15024763.	409,305.	0.	7,144.

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).

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

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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 United States. See Part IV, line 21	8,771,985.	8,771,985.		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	701,483.	549,509.	143,169.	8,805.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,431,351.	1,904,608.	496,226.	30,517.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	102,873.	80,586.	20,996.	1,291.
10	Payroll taxes	221,244.	173,312.	45,155.	2,777.
11	Fees for services (non-employees):				
a	Management				
b	Legal	53,909.		43,452.	10,457.
c	Accounting	30,767.		30,767.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	184,882.	93,062.	78,963.	12,857.
14	Information technology	74,293.	37,396.	31,730.	5,167.
15	Royalties				
16	Occupancy	168,272.	104,956.	33,324.	29,992.
17	Travel	867,193.	733,973.	113,361.	19,859.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,447.	9,585.	1,991.	871.
23	Insurance	12,282.	10,194.	2,088.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	CONTRACT SERVICES	1,933,697.	1,507,838.	275,008.	150,851.
b	PRINTING	135,612.	110,696.	1,923.	22,993.
c	PRGRM. PROMO. AND OTHER	95,477.	20,158.	66,358.	8,961.
d					
e	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24e	15,797,767.	14,107,858.	1,384,511.	305,398.
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 following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1,667,724.	1	1,245,016.
	2	Savings and temporary cash investments		37,123.	2	31,078.
	3	Pledges and grants receivable, net		642,341.	3	252,214.
	4	Accounts receivable, net		69,736.	4	89,450.
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		22,854.	8	5,851.
	9	Prepaid expenses and deferred charges		103,803.	9	64,630.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 227,137.			
	b	Less: accumulated depreciation	10b 196,492.	43,092.	10c	30,645.
	11	Investments - publicly traded securities		226,449.	11	215,216.
	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)		2,813,122.	16	1,934,100.
Liabilities	17	Accounts payable and accrued expenses		293,310.	17	244,355.
	18	Grants payable			18	
	19	Deferred revenue		43,445.	19	300.
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		336,755.	26	244,655.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,446,989.	27	1,298,919.
	28	Temporarily restricted net assets		1,029,378.	28	390,526.
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] 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		2,476,367.	33	1,689,445.
	34	Total liabilities and net assets/fund balances		2,813,122.	34	1,934,100.

Form 990 (2011)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,024,763.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,797,767.
3	Revenue less expenses. Subtract line 2 from line 1	3	-773,004.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,476,367.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-13,918.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,689,445.

Part XII Financial Statements and Reporting

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

			Yes	No
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?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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.	2c	X	
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 separate basis, consolidated 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?	3a	X	
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.	3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	91-1255818

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?

		Yes	No
(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?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the supported organization(s).

(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? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
Total									

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6127991.	13659090.	16915019.	17093260.	14608314.	68403674.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	6127991.	13659090.	16915019.	17093260.	14608314.	68403674.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2458282.
6 **Public support.** Subtract line 5 from line 4.						65945392.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	6127991.	13659090.	16915019.	17093260.	14608314.	68403674.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	56,136.	36,481.	7,967.	31,562.	7,144.	139,290.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						68542964.

12 Gross receipts from related activities, etc. (see instructions) 12 2,488,239.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 96.21 %

15 Public support percentage from 2010 Schedule A, Part II, line 14 15 94.18 %

16a **33 1/3% support test - 2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2010** Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2011. 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 - 2010. 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 ▶ ☐

** PUBLIC DISCLOSURE COPY **

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Name of the organization
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Employer identification number
91-1255818

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. ..... ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Employer identification number
91-1255818

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 500,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2		$ 13,319,439.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	91-1255818

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Employer identification number
91-1255818

Part III *Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

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

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

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

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

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

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

Name of organization	Employer identification number
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	91-1255818

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 the filing organization made payments. 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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

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
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
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-		

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.

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? ☐ Yes ☐ 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)).**

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		37,756.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			37,756.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

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

1 Dues, assessments and similar amounts from members	1	
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	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
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?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

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; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B - LOBBYING EFFORTS PRIMARILY CONSIST OF CREATING AWARENESS OF THE CIRCUMSTANCES OF KIDS IN THE FOSTER CARE AND FAMILY COURT SYSTEMS AND FIGHTING FOR THESE CHILDRENS' BEST INTERESTS IN THE LEGAL SYSTEM.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization: NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Employer identification number: 91-1255818

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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 Tax 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, and not on a historic structure listed in the National Register	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 section 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 (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 XIV, the text of the footnote to its financial statements that describes these items.

b 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:

(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 (ASC 958) 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 the 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		208,673.	178,028.	30,645.
e Other		18,464.	18,464.	0.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				30,645.

Schedule D (Form 990) 2011

132052
01-23-12

Part VII Investments - Other Securities. See Form 990, Part X, line 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) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 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)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,024,763.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,797,767.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-773,004.
4	Net unrealized gains (losses) on investments	4	-13,918.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-13,918.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-786,922.

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

1	Total revenue, gains, and other support per audited financial statements			1	15,010,845.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	-13,918.		
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	-13,918.
3	Subtract line 2e from line 1			3	15,024,763.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
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	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	15,024,763.

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

1	Total expenses and losses per audited financial statements			1	15,797,767.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
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	0.
3	Subtract line 2e from line 1			3	15,797,767.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
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	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	15,797,767.

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.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Employer identification number 91-1255818

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient 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
FRIENDS OF ALASKA CASA P.O. BOX 242484 ANCHORAGE, AK 99524	92-0133200	501(C)(3)	17,840.	0.			PASS THROUGH
GWICHYAA ZHEE GWICH'IN TRIBAL CASA PO BOX 10 FORT YUKON, AK 99740	92-0065685	501(C)(3)	15,000.	0.			PASS THROUGH
KENAITZE INDIAN TRIBAL CASA PROGRAM - PO BOX 988 - KENAI, AK 99611-0988	92-0069243	501(C)(3)	31,800.	0.			PASS THROUGH
CASA OF JEFFERSON COUNTY 120 2ND COURT NORTH BIRMINGHAM, AL 35204	63-1201369	501(C)(3)	6,600.	0.			PASS THROUGH
CASA OF FLORENCE - LAUDERDALE COUNTY - PO BOX 1313 - FLORENCE, AL 35631-1313	63-1288598	501(C)(3)	5,800.	0.			PASS THROUGH
ALABAMA CASA NETWORK, INC. 2806 RUFFNER ROAD, SUITE 111 IRONDALE, AL 35210	72-1374587	501(C)(3)	57,200.	0.			PASS THROUGH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ 301.

3 Enter total number of other organizations listed in the line 1 table ..... ▶

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CASA OF COLBERT COUNTY ALABAMA, INC - 505 N. COLUMBIA AVE, SUITE 3-A - SHEFFIELD, AL 35660	26-3504426	501(C)(3)	38,950.	0.			PASS THROUGH
CASA OF THE TRI PEAKS AREA BOONEVILLE COURTHOUSE #21 366 NORTH BROADWAY - BOONEVILLE, AR 72927	86-1114641	501(C)(3)	26,100.	0.			PASS THROUGH
CASA OF THE 20TH JUDICIAL DISTRICT PO BOX 1202 CONWAY, AR 72033	71-0823919	501(C)(3)	8,000.	0.			PASS THROUGH
CASA OF THE 2ND JUDICIAL DISTRICT 511 E. UNION SUITE 327 JONESBORO, AR 72401	71-0776253	501(C)(3)	9,600.	0.			PASS THROUGH
PULASKI COUNTY CASA 3001 W. ROOSEVELT RD. LITTLE ROCK, AR 72204	71-0184325	501(C)(3)	9,000.	0.			PASS THROUGH
CASA OF LONOKE COUNTY, INC. 119 SW FRONT STREET LONOKE, AR 72086	31-1691610	501(C)(3)	14,000.	0.			PASS THROUGH
VOICES FOR CHILDREN/CASA 211 W 3RD, SUITE 110 PINE BLUFF, AR 71601	71-0830991	501(C)(3)	17,700.	0.			PASS THROUGH
CASA OF THE THIRD JUDICIAL DISTRICT - PO BOX 409 - POCAHONTAS, AR 72455	90-0592886	501(C)(3)	10,000.	0.			PASS THROUGH
CASA OF NORTHWEST ARKANSAS, INC. 5322 BLEAUX AVENUE STE A SPRINGDALE, AR 72762-0729	71-0708334	501(C)(3)	16,800.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CASA OF CRITTENDEN COUNTY 905 N 7TH STREET WEST MEMPHIS, AR 72301-2001	71-0810346	501(C)(3)	25,000.	0.			PASS THROUGH
CHILD ADVOCATES OF PLACER COUNTY 11641 BLOCKER DRIVE, SUITE 220 AUBURN, CA 95603	77-0620948	501(C)(3)	28,100.	0.			PASS THROUGH
CASA OF IMPERIAL COUNTY 690 BROADWAY STREET STE 6 EL CENTRO, CA 92243-5103	33-0632963	501(C)(3)	34,000.	0.			PASS THROUGH
CASA OF SOLANO COUNTY 600 UNION AVENUE STE 204 FAIRFIELD, CA 94533-6369	20-2551209	501(C)(3)	13,400.	0.			PASS THROUGH
CASA OF FRESNO AND MADERA COUNTIES 1252 FULTON MALL FRESNO, CA 93721-1916	77-0401361	501(C)(3)	6,400.	0.			PASS THROUGH
CASA OF KINGS COUNTY 700 N. IRWIN STREET HANFORD, CA 93230	77-0560598	501(C)(3)	22,800.	0.			PASS THROUGH
CASA FOR RIVERSIDE COUNTY, INC. PO BOX 3008 INDIO, CA 92202-3008	33-0596888	501(C)(3)	10,600.	0.			PASS THROUGH
CASA OF MARIPOSA COUNTY PO BOX 73 MARIPOSA, CA 95338	51-0519406	501(C)(3)	10,000.	0.			PASS THROUGH
CASA OF MERCED COUNTY PO BOX 2362 MERCED, CA 95344	27-2084694	501(C)(3)	31,500.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CHILD ADVOCATES OF SILICON VALLEY 509 VALLEY WAY BUILDING 2 MILPITAS, CA 95035-4105	77-0250773	501(C)(3)	17,400.	0.			PASS THROUGH
CASA OF STANISLAUS COUNTY POB 3488 MODESTO, CA 95353	91-2168629	501(C)(3)	16,500.	0.			PASS THROUGH
CASA OF LOS ANGELES 201 CENTRE PLAZA DRIVE STE 3 MONTEREY PARK, CA 91754-2142	95-3890446	501(C)(3)	54,200.	0.			PASS THROUGH
CALIFORNIA CASA ASSOCIATION 660 13TH ST #300 OAKLAND, CA 94612	68-0163010	501(C)(3)	52,600.	0.			PASS THROUGH
CASA OF EL DORADO COUNTY 347 MAIN STREET PLACERVILLE, CA 95667-5605	68-0299245	501(C)(3)	26,900.	0.			PASS THROUGH
PLUMAS CASA PO BOX 1890 QUINCY, CA 95971-1890	68-0062136	501(C)(3)	20,200.	0.			PASS THROUGH
CASA OF SAN BERNARDINO COUNTY PO BOX 519 RIALTO, CA 92377	33-0362613	501(C)(3)	10,800.	0.			PASS THROUGH
SACRAMENTO CASA PO BOX 278383 SACRAMENTO, CA 95827-8383	68-0257139	501(C)(3)	19,000.	0.			PASS THROUGH
VOICES FOR CHILDREN, INC. COURT APPOINTED SPECIAL ADVOCATES 2851 MEADOW LARK DRIVE - SAN DIEGO, CA 92	95-3786047	501(C)(3)	42,600.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
SAN FRANCISCO CASA PROGRAM 100 BUSH STREET #650 SAN FRANCISCO, CA 94104	94-3039028	501(C)(3)	84,900.	0.			PASS THROUGH
CASA OF ALAMEDA COUNTY 1000 SAN LEANDRO BOULEVARD STE 300 SAN LEANDRO, CA 94577-1675	94-3309728	501(C)(3)	53,000.	0.			PASS THROUGH
CASA OF SANTA BARBARA COUNTY 118 E FIGUEROA STREET SANTA BARBARA, CA 93101-2113	33-0662734	501(C)(3)	19,800.	0.			PASS THROUGH
LASSEN FAMILY SERVICES PO BOX 701 SUSANVILLE, CA 96130-0701	94-2691072	501(C)(3)	24,100.	0.			PASS THROUGH
CASA OF MENDOCINO AND LAKE COUNTIES - 327 N. STATE STREET, STE. 204 - UKIAH, CA 95482	68-0322512	501(C)(3)	17,400.	0.			PASS THROUGH
CASA OF SANTA CRUZ COUNTY 813 FREEDOM BLVD WATSONVILLE, CA 95076	77-0305354	501(C)(3)	34,800.	0.			PASS THROUGH
CASA OF SISKIYOU COUNTY PO BOX 1337 YREKA, CA 96097-1337	20-0714947	501(C)(3)	8,100.	0.			PASS THROUGH
ADVOCATES FOR CHILDREN - AURORA 10855 E BETHANY DRIVE STE 200 AURORA, CO 80014-2642	74-2414133	501(C)(3)	31,600.	0.			PASS THROUGH
CASA OF ADAMS AND BROOMFIELD COUNTIES - 1100 JUDICIAL CENTER DRIVE - BRIGHTON, CO 80601-8873	31-1657019	501(C)(3)	16,800.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CASA OF THE PIKES PEAK REGION, INC. - 701 S CASCADE AVENUE - COLORADO SPRINGS, CO 80903-3900	84-1115548	501(C)(3)	44,400.	0.			PASS THROUGH
CHILD ADVOCATES, DENVER CASA 225 E. 16TH AVE. SUITE B80 DENVER, CO 80203	84-1300565	501(C)(3)	36,400.	0.			PASS THROUGH
COLORADO CASA 1490 LAFAYETTE ST, SUITE 104 DENVER, CO 80218	84-1257398	501(C)(3)	139,800.	0.			PASS THROUGH
CASA OF THE CONTINENTAL DIVIDE PO BOX 2092 DILLON, CO 80435-2092	84-1471924	501(C)(3)	28,000.	0.			PASS THROUGH
CASA OF MESA COUNTY PO BOX 4133 GRAND JCT, CO 81502-4133	84-1409144	501(C)(3)	17,400.	0.			PASS THROUGH
A KID'S PLACE CASA PROGRAM 1610 29TH AVE PLACE, SUITE 201 GREELEY, CO 80634	84-1469488	501(C)(3)	16,400.	0.			PASS THROUGH
CASA OF THE 7TH JUDICIAL DISTRICT, INC. - PO BOX 1708 - MONTROSE, CO 81402-1708	84-1546403	501(C)(3)	6,000.	0.			PASS THROUGH
CASA OF PUEBLO 130 W ABRIENDO AVENUE PUEBLO, CO 81004-4224	04-3630442	501(C)(3)	15,300.	0.			PASS THROUGH
CIP / CASA 300 WHALLEY AVENUE NEW HAVEN, CT 06511-3142	06-1182114	501(C)(3)	60,300.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CASA PROGRAM/FAMILY COURT OF DELAWARE - 500 NORTH KING STREET, STE 3500 - WILMINGTON, DE 19702	51-6000279	501(C)(3)	52,600.	0.			PASS THROUGH
VOICES FOR CHILDREN FOUNDATION, INC. - 1500 NW 12TH AVENUE, SUITE #1117 - MIAMI, FL 33136	59-2746076	501(C)(3)	22,000.	0.			PASS THROUGH
FLORIDA GUARDIAN AD LITEM P.O. BOX 10688 TALLAHASSEE, FL 32302	45-0501348	501(C)(3)	39,600.	0.			PASS THROUGH
DOUGHERTY COUNTY CASA - LILY PAD CENTER - PO BOX 467 - ALBANY, GA 31702	20-5121248	501(C)(3)	22,400.	0.			PASS THROUGH
GEORGIA CASA 1776 PEACHTREE STREET NW, STE 219 ATLANTA, GA 30309-2307	58-1793382	501(C)(3)	75,000.	0.			PASS THROUGH
CASA FOR CHILDREN, INC. 100 NORTH STREET, STE G22 CANTON, GA 30114	58-2563473	501(C)(3)	13,500.	0.			PASS THROUGH
TWIN CEDARS YOUTH SERVICES 18 NINTH STREET SUITE 104 COLUMBUS, GA 31901	58-1413499	501(C)(3)	60,400.	0.			PASS THROUGH
CENTRAL GEORGIA CASA 640 PLUM STREET STE 205 MACON, GA 31201-2859	58-2553014	501(C)(3)	31,800.	0.			PASS THROUGH
FLOYD COUNTY CASA PROGRAM PO BOX 5143 ROME, GA 30162-5143	58-2208191	501(C)(3)	9,000.	0.			PASS THROUGH

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SAVANNAH CHATHAM COUNTY CASA, INC. 428 BULL STREET STE 205 SAVANNAH, GA 31401-4962	58-2058358	501(C)(3)	7,500.	0.			PASS THROUGH
IV JUDICIAL DISTRICT CASA - FAMILY ADVOCATES - 3010 W STATE STREET STE 104 - BOISE, ID 83703-5949	82-0344205	501(C)(3)	32,000.	0.			PASS THROUGH
THIRD JUDICIAL DISTRICT CASA PROGRAM - PO BOX 877 - CALDWELL, ID 83606-0877	94-3110151	501(C)(3)	26,100.	0.			PASS THROUGH
COEUR D'ALENE TRIBAL COURT CASA PROGRAM - PO BOX 408 - PLUMMER, ID 83851-0408	82-0255476	501(C)(3)	9,000.	0.			PASS THROUGH
CASA KANKAKEE COUNTY 171 N WEST AVE., SUITE 1 BRADLEY, IL 60915	36-3946186	501(C)(3)	19,200.	0.			PASS THROUGH
CASA OF COOK COUNTY COOK COUNTY JUVENILE COURT 1100 S. HAMILTON, 8-WEST - CHICAGO, IL 60612	36-4461307	501(C)(3)	50,800.	0.			PASS THROUGH
CASA OF VERMILION COUNTY 101 W NORTH STREET DANVILLE, IL 61832-5730	61-1507295	501(C)(3)	19,700.	0.			PASS THROUGH
CASA OF EFFINGHAM COUNTY PO BOX 146 EFFINGHAM, IL 62401-0146	26-0211678	501(C)(3)	8,200.	0.			PASS THROUGH
CASA OF KNOX COUNTY PO BOX 866 GALESBURG, IL 61402-0866	36-4140299	501(C)(3)	5,200.	0.			PASS THROUGH

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CASA OF WILL COUNTY, INC. RIVER VALLEY JUSTICE CENTER 3200 W. MCDONOUGH STREET - JOLIET, IL 60431	36-3918447	501(C)(3)	12,600.	0.			PASS THROUGH
CASA OF WILLIAMSON COUNTY, INC. PO BOX 972 MARION, IL 62959	37-1324993	501(C)(3)	9,800.	0.			PASS THROUGH
CASA OF MCHENRY COUNTY 518 S. ROUTE 31, SUITE 205 MCHENRY, IL 60050	20-1387762	501(C)(3)	11,500.	0.			PASS THROUGH
CASA OF JEFFERSON COUNTY - MT. VERNON - 612 N. 12TH ST. - MT. VERNON, IL 62864	20-2951370	501(C)(3)	8,000.	0.			PASS THROUGH
LASALLE COUNTY CASA GOVERNMENT CENTER NORTH 707 E. ETNA ROAD, SUITE LL - OTTAWA, IL 61350	36-4377267	501(C)(3)	11,900.	0.			PASS THROUGH
CASA OF PEORIA COUNTY 324 MAIN STREET STE 215 PEORIA, IL 61602-2334	20-1534971	501(C)(3)	21,600.	0.			PASS THROUGH
ILLINOIS CASA 7501 N UNIVERSITY STREET STE 217B PEORIA, IL 61614-1252	36-3906070	501(C)(3)	35,400.	0.			PASS THROUGH
CASA LAKE COUNTY, INC. 700 FOREST EDGE DRIVE VERNON HILLS, IL 60061	36-3916143	501(C)(3)	63,500.	0.			PASS THROUGH
ELKHART COUNTY CASA PROGRAM PO BOX 773 ELKHART, IN 46515-0773	35-0888765	501(C)(3)	17,000.	0.			PASS THROUGH

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SOUTHEASTERN INDIANA VOICES FOR CHILDREN - PO BOX 351 - MADISON, IN 47250	27-5061904	501(C)(3)	13,900.	0.			PASS THROUGH
KANSAS CASA ASSOCIATION 103 E. 27TH UNIT C HAYS, KS 67601	48-1092742	501(C)(3)	48,000.	0.			PASS THROUGH
SUNFLOWER CASA PROJECT, INC. PO BOX 158 MANHATTAN, KS 66505-0158	48-1061447	501(C)(3)	25,400.	0.			PASS THROUGH
CASA OF JOHNSON AND WYANDOTTE COUNTIES - 6901 SHAWNEE MISSION PARKWAY STE 112 - OVERLAND PARK, KS 66202-4083	48-1088233	501(C)(3)	29,500.	0.			PASS THROUGH
CASA OF SOUTH CENTRAL KY PO BOX 867 BOWLING GREEN, KY 42102-0867	61-1334266	501(C)(3)	37,650.	0.			PASS THROUGH
CASA OF KENTON COUNTY, INC. 303 COURT STREET SUITE 707 COVINGTON, KY 41011	26-1158314	501(C)(3)	22,400.	0.			PASS THROUGH
CASA AT WOODLAWN 1153 PERRYVILLE ROAD DANVILLE, KY 40422-1306	26-1841458	501(C)(3)	18,600.	0.			PASS THROUGH
CASA OF THE HEARTLAND PO BOX 6065 ELIZABETHTOWN, KY 42701	26-0876943	501(C)(3)	35,500.	0.			PASS THROUGH
FRANKLIN COUNTY CASA, INC. - FRANKFORT - 649 CHARITY COURT, SUITE 4 - FRANKFORT, KY 40601-4224	61-1352752	501(C)(3)	32,900.	0.			PASS THROUGH

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CASA OF LEXINGTON 1155 RED MILE PLACE LEXINGTON, KY 40504	61-1339185	501(C)(3)	20,750.	0.			PASS THROUGH
KENTUCKY CASA, INC. 455 S. 4TH STREET, SUITE 506 LOUISVILLE, KY 40202	61-1330139	501(C)(3)	60,700.	0.			PASS THROUGH
CASA PROGRAM OF HOPKINS COUNTY PO BOX 444 MADISONVILLE, KY 42431-0008	61-1057747	501(C)(3)	8,500.	0.			PASS THROUGH
CASA OF CALLOWAY AND MARSHALL COUNTIES, INC. - 1003 POPLAR STREET - MURRAY, KY 42071	20-4033610	501(C)(3)	8,100.	0.			PASS THROUGH
CASA OF MADISON COUNTY 1219-B LEXINGTON ROAD RICHMOND, KY 40475	61-1314979	501(C)(3)	16,500.	0.			PASS THROUGH
CAPITAL AREA CASA ASSOCIATION 848 LOUISIANA AVE BATON ROUGE, LA 70802	72-1197395	501(C)(3)	10,600.	0.			PASS THROUGH
LOUISIANA CASA ASSOCIATION 9654 BROOKLINE AVE SUITE 210 BATON ROUGE, LA 70809	72-1265057	501(C)(3)	65,200.	0.			PASS THROUGH
NORTHERN ESSEX COUNTY CASA PROGRAM 430 N CANAL STREET LAWRENCE, MA 01840-1246	04-2104054	501(C)(3)	14,500.	0.			PASS THROUGH
FRANKLIN/HAMPSHIRE CASA PROGRAM FRIENDS OF CHILDREN, INC. 245 RUSSELL ST., STE. 22 - NORTHAMPTON, MA 01035	22-2952288	501(C)(3)	10,700.	0.			PASS THROUGH

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THE CASA PROJECT 100 GROVE STREET STE 403 WORCESTER, MA 01605-2630	04-2711865	501(C)(3)	20,300.	0.			PASS THROUGH
ANNE ARUNDEL COUNTY CASA, INC. 94 FRANKLIN STREET ANNAPOLIS, MD 21401-2738	52-1885500	501(C)(3)	16,900.	0.			PASS THROUGH
CASA OF BALTIMORE, INC. PO BOX 13004 BALTIMORE, MD 21203-3004	52-1905072	501(C)(3)	55,400.	0.			PASS THROUGH
CASA OF HARFORD COUNTY 101 S MAIN STREET STE 303 BEL AIR, MD 21014-3855	52-1936813	501(C)(3)	14,200.	0.			PASS THROUGH
LOWER SHORE CASA, INC. 124 N MAIN STREET STE C BERLIN, MD 21811-1062	52-1227987	501(C)(3)	11,200.	0.			PASS THROUGH
CASA OF QUEEN ANNE'S AND KENT COUNTIES - 105 N LIBERTY STREET STE 5 - CENTREVILLE, MD 21617-1046	30-0254793	501(C)(3)	27,100.	0.			PASS THROUGH
CASA OF TALBOT AND DORCHESTER COUNTIES - PO BOX 2409 - EASTON, MD 21601-8947	52-1568597	501(C)(3)	13,300.	0.			PASS THROUGH
CASA OF FREDERICK COUNTY 263 W PATRICK STREET FREDERICK, MD 21701-6916	52-0968521	501(C)(3)	17,082.	0.			PASS THROUGH
CASA OF BALTIMORE COUNTY, INC. 305 W CHESAPEAKE AVENUE STE 117 TOWSON, MD 21204-4435	52-2258847	501(C)(3)	37,800.	0.			PASS THROUGH

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MARYLAND CASA ASSOCIATION 402 W. PENNSYLVANIA AVENUE 3RD FLOO TOWSON, MD 21204	52-1946488	501(C)(3)	56,800.	0.			PASS THROUGH
VOICES FOR CHILDREN - CARROLL COUNTY - 255 CLIFTON BOULEVARD, SUITE 311 - WESTMINSTER, MD 21157	52-0968521	501(C)(3)	12,500.	0.			PASS THROUGH
CASA OF GRATIOT COUNTY 525 NORTH STATE ST., SUITE 6 ALMA, MI 48801-9703	14-1991721	501(C)(3)	14,000.	0.			PASS THROUGH
FRIENDS OF WASHTENAW COUNTY CASA 101 E. HURON STREET, SUITE 3109 ANN ARBOR, MI 48107	38-3481707	501(C)(3)	9,800.	0.			PASS THROUGH
MICHIGAN CASA, INC. 4624 PACKARD STREET ANN ARBOR, MI 48108	26-4653381	501(C)(3)	52,200.	0.			PASS THROUGH
CASA OF GENESEE COUNTY 515 EAST STREET FLINT, MI 48503	38-2966789	501(C)(3)	55,400.	0.			PASS THROUGH
CASA OF KENT COUNTY, INC. 180 OTTAWA AVENUE NW STE 3500 GRAND RAPIDS, MI 49503-2703	20-2112557	501(C)(3)	34,050.	0.			PASS THROUGH
CASA OF LIVINGSTON COUNTY 2895 W GRAND RIVER AVE HOWELL, MI 48843	38-2370824	501(C)(3)	40,950.	0.			PASS THROUGH
CASA OF MENOMINEE COUNTY PO BOX 456 MENOMINEE, MI 49858-0456	30-0457838	501(C)(3)	6,900.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
MUSKEGON COUNTY CASA 1781 PECK STREET MUSKEGON, MI 49441	38-2195091	501(C)(3)	20,350.	0.			PASS THROUGH
SAGINAW COUNTY CASA 1311 N MICHIGAN AVENUE SAGINAW, MI 48602-4733	38-2480726	501(C)(3)	45,800.	0.			PASS THROUGH
CASA MINNESOTA PO BOX 17358 MINNEAPOLIS, MN 55417-0358	41-1598698	501(C)(3)	61,800.	0.			PASS THROUGH
CASA OF SOUTHEAST MISSOURI, INC. 937 BROADWAY, SUITE 201 CAPE GIRARDEAU, MO 63701	43-1592399	501(C)(3)	11,500.	0.			PASS THROUGH
HEART OF MISSOURI CASA PO BOX 10028 COLUMBIA, MO 65205	20-2408667	501(C)(3)	12,500.	0.			PASS THROUGH
MISSOURI CASA ASSOCIATION 1000 WEST NIFONG BLVD BUILDING 1, S COLUMBIA, MO 65203	43-1718389	501(C)(3)	68,400.	0.			PASS THROUGH
DOUGLASS COMMUNITY SERVICES - CASA PROGRAM - 711 GRAND AVENUE - HANNIBAL, MO 63401-3179	43-0971877	501(C)(3)	25,658.	0.			PASS THROUGH
JACKSON COUNTY CASA - KANSAS CITY 625 E. 26TH ST. KANSAS CITY, MO 64108	43-1401328	501(C)(3)	29,000.	0.			PASS THROUGH
ADAIR COUNTY CASA - A VOICE FOR KIDS - 800 W JEFFERSON STREET - KIRKSVILLE, MO 63501-1443	43-6000012	501(C)(3)	21,900.	0.			PASS THROUGH

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15TH JUDICIAL CIRCUIT CASA 1029 FRANKLIN AVENUE LEXINGTON, MO 64067-1333	33-1005779	501(C)(3)	9,800.	0.			PASS THROUGH
NEW-MAC CASA 209 NORTH VALLEY ST. NEOSHO, MO 64850	27-0461999	501(C)(3)	42,600.	0.			PASS THROUGH
CASA OF THE 36TH JUDICIAL CIRCUIT 644 CHARLES STREET POPLAR BLUFF, MO 63901	43-1821718	501(C)(3)	11,900.	0.			PASS THROUGH
CASA OF SOUTH CENTRAL MISSOURI 200 N MAIN STREET STE 242 ROLLA, MO 65401-3061	20-2021790	501(C)(3)	17,400.	0.			PASS THROUGH
CASA OF ST. LOUIS COUNTY, INC. 121 S MERAMEC AVENUE FL 2ND SAINT LOUIS, MO 63105-1725	43-1727959	501(C)(3)	14,583.	0.			PASS THROUGH
CASA OF SOUTHWEST MISSOURI-31ST JUDICIAL CIRCUIT - PO BOX 14364 - SPRINGFIELD, MO 65814	43-1524185	501(C)(3)	27,500.	0.			PASS THROUGH
VOICES FOR CHILDREN - ST. LOUIS 121 S. MERAMEC AVE, 2ND FLOOR ST. LOUIS, MO 63105	43-1807059	501(C)(3)	48,517.	0.			PASS THROUGH
CASA OF HANCOCK COUNTY PO BOX 4112 BAY ST. LOUIS, MS 39521	27-0278390	501(C)(3)	39,300.	0.			PASS THROUGH
CASA MISSISSIPPI, INC. 11975 SEAWAY ROAD, STE A-320 GULFPORT, MS 39505	43-2002765	501(C)(3)	48,000.	0.			PASS THROUGH

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CASA OF HARRISON COUNTY 47 MAPLES GULFPORT, MS 39506	26-3268141	501(C)(3)	39,300.	0.			PASS THROUGH
YELLOWSTONE CASA, INC. PO BOX 688 BILLINGS, MT 59103-0688	48-1301287	501(C)(3)	33,800.	0.			PASS THROUGH
FRONT RANGE CASA/GAL, INC. - 9TH JUDICIAL DISTRICT - PO BOX 954 - CONRAD, MT 59425	81-0543338	501(C)(3)	18,000.	0.			PASS THROUGH
CASA OF MONTANA 131 REEDER'S ALLEY HELENA, MT 59601	20-2324128	501(C)(3)	48,000.	0.			PASS THROUGH
CASA OF MISSOULA PO BOX 7433 MISSOULA, MT 59807-7433	81-0482945	501(C)(3)	27,000.	0.			PASS THROUGH
NORTH CAROLINA STATE GAL PROGRAM PO BOX 2448 RALEIGH, NC 27602-2448	56-0847358	501(C)(3)	179,800.	0.			PASS THROUGH
HEARTLAND CASA PROGRAM 410 W 2ND ST STE 7 GRAND ISLAND, NE 68801	47-0793337	501(C)(3)	6,000.	0.			PASS THROUGH
DAWSON/GOSPER COUNTY CASA 700 N WASHINGTON STREET ROOM P LEXINGTON, NE 68850-1940	47-6006451	501(C)(3)	16,900.	0.			PASS THROUGH
CASA FOR LANCASTER COUNTY 210 N 14TH STREET STE 3 LINCOLN, NE 68508-1664	47-0833799	501(C)(3)	14,700.	0.			PASS THROUGH

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NEBRASKA CASA ASSOCIATION 1618 L STREET LINCOLN, NE 68508-2509	47-0812726	501(C)(3)	48,000.	0.			PASS THROUGH
CASA OF NEW HAMPSHIRE, INC. PO BOX 1327 MANCHESTER, NH 03105-1327	02-0432242	501(C)(3)	94,200.	0.			PASS THROUGH
CASA OF CUMBERLAND, GLOUCESTER & SALEM COUNTIES - PO BOX 240 - BRIDGETON, NJ 08302-0182	34-2033022	501(C)(3)	10,500.	0.			PASS THROUGH
CASA OF SOMERSET, HUNTERDON, AND WARREN COUNTIES - 120 FINDERNE AVENUE STE 250B - BRIDGEWATER, NJ 08807-3670	20-2625203	501(C)(3)	8,800.	0.			PASS THROUGH
CAPE MAY COUNTY - REMOTE 9 NORTH MAIN STREET CAPE MAY COURT HOUSE, NJ 08210	22-3348198	501(C)(3)	18,600.	0.			PASS THROUGH
CASA FOR CHILDREN, MONMOUTH COUNTY VICTORIA COMMONS 613 HOPE ROAD, BUILDING 4, 2ND FLOOR - EATONTOWN, NJ 07724	83-0410778	501(C)(3)	28,000.	0.			PASS THROUGH
CASA OF UNION COUNTY, INC. 1143-45 EAST JERSEY ST 2ND FLOOR ELIZABETH, NJ 07201	20-2603930	501(C)(3)	22,000.	0.			PASS THROUGH
CASA OF MERCER COUNTY, INC. 1450 PARKSIDE AVENUE, SUITE 22 EWING, NJ 08638	22-3770968	501(C)(3)	31,800.	0.			PASS THROUGH
BERGEN COUNTY CASA, INC. ONE BERGEN COUNTY PLAZA, SUITE 440 HACKENSACK, NJ 07601	90-0060769	501(C)(3)	17,200.	0.			PASS THROUGH

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HUDSON COUNTY CASA 442 HOBOKEN AVE JERSEY CITY, NJ 07306	30-0067910	501(C)(3)	35,300.	0.			PASS THROUGH
CASA OF MORRIS AND SUSSEX COUNTIES, INC. - 18 CATTANO AVENUE - MORRISTOWN, NJ 07960	22-3123157	501(C)(3)	9,800.	0.			PASS THROUGH
CASA OF BURLINGTON COUNTY 129 HIGH STREET, SUITE 2B MOUNT HOLLY, NJ 08060	22-3770968	501(C)(3)	15,200.	0.			PASS THROUGH
ESSEX COUNTY CASA, INC. 212 WASHINGTON STREET ROOM 912 NEWARK, NJ 07102-2904	22-2745450	501(C)(3)	49,900.	0.			PASS THROUGH
CASA OF ATLANTIC & CAPE MAY COUNTIES, INC. - 321 SHORE ROAD - SOMERS POINT, NJ 08244-2600	22-3348198	501(C)(3)	44,400.	0.			PASS THROUGH
CASA OF OCEAN COUNTY 34-38 MAIN STREET, SUITE B TOMS RIVER, NJ 08753	20-4350731	501(C)(3)	6,600.	0.			PASS THROUGH
CASA OF NEW JERSEY 945 WEST STATE ST, TRENTON, NJ 08618	22-3679194	501(C)(3)	52,600.	0.			PASS THROUGH
CASA OF SOMERSET, HUNTERDON AND WARREN COUNTIES - 150 BOULEVARD STE 4B - WASHINGTON, NJ 07882-1760	20-2625203	501(C)(3)	37,200.	0.			PASS THROUGH
PASSAIC COUNTY CASA 573 VALLEY ROAD STE 2 WAYNE, NJ 07470-3552	20-8456398	501(C)(3)	35,400.	0.			PASS THROUGH

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BERNALILLO COUNTY CASA 5100 2ND ST. NW ALBUQUERQUE, NM 87107	85-0424064	501(C)(3)	9,100.	0.			PASS THROUGH
NEW MEXICO CASA NETWORK 707 BROADWAY BOULEVARD NE STE 101 ALBUQUERQUE, NM 87102-2300	85-0385103	501(C)(3)	64,100.	0.			PASS THROUGH
SAN JUAN CASA 807 W APACHE STREET FARMINGTON, NM 87401-5527	85-0206752	501(C)(3)	14,200.	0.			PASS THROUGH
SANDOVAL COUNTY CASA PROGRAM PO BOX 44184 RIO RANCHO, NM 87174-4184	74-2846979	501(C)(3)	6,000.	0.			PASS THROUGH
CASA, FIRST JUDICIAL DISTRICT 466 WEST SAN FRANCISCO STREET SANTA FE, NM 87501	85-0432642	501(C)(3)	39,700.	0.			PASS THROUGH
NEVADA CASA ASSOCIATION, INC. PO BOX 17218 RENO, NV 89511	71-0990227	501(C)(3)	48,000.	0.			PASS THROUGH
CASA: ADVOCATES FOR CHILDREN OF NEW YORK STATE - 911 CENTRAL AVENUE # 117 - ALBANY, NY 12206	14-1782329	501(C)(3)	63,845.	0.			PASS THROUGH
GENESEE COUNTY CASA FOR CHILDREN GENESEE COUNTY COURTS FACILITY 1 WE BATAVIA, NY 14020	16-1571894	501(C)(3)	7,122.	0.			PASS THROUGH
VOICES FOR CHILDREN/CASA PROGRAM COLONIAL PLAZA 2ND FLOOR 30 W STATE STREET - BINGHAMTON, NY 13901	16-1182234	501(C)(3)	15,000.	0.			PASS THROUGH

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BROOKLYN FAMILY COURT - CASA NORTH 330 JAY STREET BROOKLYN, NY 11201	13-3172387	501(C)(3)	15,200.	0.			PASS THROUGH
CASA OF THE SOUTHERN TIER, INC. PO BOX 778 CORNING, NY 14830-4778	22-2984339	501(C)(3)	9,000.	0.			PASS THROUGH
CASA OF ULSTER COUNTY 209 CLINTON AVENUE KINGSTON, NY 12401-5030	14-1695128	501(C)(3)	15,550.	0.			PASS THROUGH
SULLIVAN COUNTY CASA, INC. 100 NORTH ST GOVERNMENT CENTER MONTICELLO, NY 12701	14-1776536	501(C)(3)	10,550.	0.			PASS THROUGH
NEW YORK CITY COURT APPOINTED SPECIAL ADVOCATES - 50 BROADWAY FL 31 - NEW YORK, NY 10004-1694	13-3172387	501(C)(3)	26,900.	0.			PASS THROUGH
CASA OF THE CAPITAL REGION THE CENTER FOR COMMUNITY JUSTICE, INC. 144 BARRETT ST - SCHENECTADY, NY 1230	23-7391116	501(C)(3)	22,800.	0.			PASS THROUGH
ONONDAGA CASA 115 E JEFFERSON STREET STE 300 SYRACUSE, NY 13202-2537	16-1395992	501(C)(3)	15,200.	0.			PASS THROUGH
CASA OF WESTCHESTER COUNTY MENTAL HEALTH ASSOCIATION OF WESTCHESTER, INC. 580 WHITE PLAINS ROAD - TARRY	13-1740002	501(C)(3)	36,900.	0.			PASS THROUGH
PROKIDS 2605 BURNET AVE CINCINNATI, OH 45219	31-1020021	501(C)(3)	22,200.	0.			PASS THROUGH

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CASA OF FRANKLIN COUNTY - COLUMBUS 373 S HIGH STREET FL 15TH COLUMBUS, OH 43215-6321	31-1322918	501(C)(3)	30,800.	0.			PASS THROUGH
OHIO CASA/GAL ASSOCIATION 150 E. MOUND, SUITE 210 COLUMBUS, OH 43215	31-1380388	501(C)(3)	56,800.	0.			PASS THROUGH
CASA OF ALLEN AND PUTNAM COUNTIES 330 NORTH ELIZABETH STREET, 2ND FLR LIMA, OH 45801	34-1437473	501(C)(3)	35,300.	0.			PASS THROUGH
RICHLAND COUNTY JUVENILE COURT CASA PROGRAM - 411 S DIAMOND STREET - MANSFIELD, OH 44902-7812	34-6002296	501(C)(3)	43,850.	0.			PASS THROUGH
LITTLE DIXIE COMMUNITY ACTION AGENCY CASA PROGRAM - 603 SW B STREET - ANTLERS, OK 74523-3830	73-0772321	501(C)(3)	19,500.	0.			PASS THROUGH
CASA OF SOUTHWEST OKLAHOMA INC. 315 SW 5TH STREET ROOM 307 LAWTON, OK 73501-4326	73-1301658	501(C)(3)	12,600.	0.			PASS THROUGH
CASA OF SOUTHEAST OKLAHOMA, INC. PO BOX 1356 MCALESTER, OK 74502-1356	73-1425172	501(C)(3)	11,000.	0.			PASS THROUGH
CASA OF OKLAHOMA COUNTY, INC. 7TH JUDICIAL DISTRICT 5905 N CLASSEN COURT - OKLAHOMA CITY, OK 73118	13-4364692	501(C)(3)	25,400.	0.			PASS THROUGH
OKLAHOMA CASA ASSOCIATION PO BOX 54946 OKLAHOMA CITY, OK 73154-1946	73-1333538	501(C)(3)	48,000.	0.			PASS THROUGH

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OKMULGEE COUNTY/CREEK NATION CASA PO BOX 73 OKMULGEE, OK 74447-0073	73-1332643	501(C)(3)	32,300.	0.			PASS THROUGH
PAWNEE CASA PROJECT 500 HARRISON STREET ROOM B2 PAWNEE, OK 74058-2599	73-0777705	501(C)(3)	29,700.	0.			PASS THROUGH
CASA OF CHEROKEE COUNTRY PO BOX 1788 TAHLEQUAH, OK 74465-1788	73-1478988	501(C)(3)	5,000.	0.			PASS THROUGH
NORTHWEST OKLAHOMA CASA PO BOX 488 WOODWARD, OK 73801	73-1325874	501(C)(3)	38,600.	0.			PASS THROUGH
CASA OF LINN COUNTY, INC. PO BOX 100 ALBANY, OR 97321-0031	93-0953615	501(C)(3)	15,200.	0.			PASS THROUGH
OREGON CASA NETWORK 1130 NW HARRIMAN STREET, SUITE 122 BEND, OR 97701	45-2657743	501(C)(3)	12,600.	0.			PASS THROUGH
CASA FOR CHILDREN OF KLAMATH COUNTY - 403 PINE STREET FL 3RD - KLAMATH FALLS, OR 97601-6020	25-1726827	501(C)(3)	8,400.	0.			PASS THROUGH
UNION COUNTY CASA PO BOX 3052 LA GRANDE, OR 97850	93-1165490	501(C)(3)	7,700.	0.			PASS THROUGH
YAMHILL COUNTY CASA 1945 NE BAKER ST. MCMINNVILLE, OR 97128	93-1178086	501(C)(3)	25,700.	0.			PASS THROUGH

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CASA OF JACKSON COUNTY, INC. 613 MARKET STREET MEDFORD, OR 97504-6125	94-3215621	501(C)(3)	6,600.	0.			PASS THROUGH
CASA OF LINCOLN COUNTY PO BOX 116 NEWPORT, OR 97365-0135	93-1097711	501(C)(3)	6,000.	0.			PASS THROUGH
MALHEUR COUNTY CASA PO BOX 1355 ONTARIO, OR 97914-1056	93-1173596	501(C)(3)	5,000.	0.			PASS THROUGH
CHILD ADVOCATES, INC. 1001 MOLALLA AVENUE STE 203 OREGON CITY, OR 97045-3768	93-1105205	501(C)(3)	15,100.	0.			PASS THROUGH
CASA FOR CHILDREN 1401 NE 68TH AVE. PORTLAND, OR 97213	93-0923866	501(C)(3)	44,200.	0.			PASS THROUGH
CASA OF MARION COUNTY, INC. PO BOX 12765 SALEM, OR 97309-0765	81-0583065	501(C)(3)	14,500.	0.			PASS THROUGH
CASA OF LANE COUNTY 174 DEADMOND FERRY ROAD SPRINGFIELD, OR 97477-9405	93-1185120	501(C)(3)	5,000.	0.			PASS THROUGH
CASA FOR KIDS, INC PO BOX 209 ST. HELENS, OR 97051	27-3440146	501(C)(3)	20,400.	0.			PASS THROUGH
CASA OF WESTMORELAND, INC. 2 NORTH MAIN STREET GREENSBURG, PA 15601	20-5046788	501(C)(3)	29,100.	0.			PASS THROUGH

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CAMBRIA AND SOMERSET COUNTY CASA 111 MARKET STREET JOHNSTOWN, PA 15901-1608	25-0984601	501(C)(3)	44,000.	0.			PASS THROUGH
CASA OF LANCASTER COUNTY 1905 OLD PHILADELPHIA PIKE LANCASTER, PA 17602	26-1826650	501(C)(3)	22,400.	0.			PASS THROUGH
CASA/YOUTH ADVOCATES, INC. PO BOX 407 MEDIA, PA 19063	23-1901080	501(C)(3)	42,700.	0.			PASS THROUGH
CASA OF PHILADELPHIA COUNTY 1940 BRANDYWINE ST PHILADELPHIA, PA 19130	20-0744446	501(C)(3)	34,100.	0.			PASS THROUGH
CASA OF ALLEGHENY COUNTY 564 FORBES AVENUE STE 902 PITTSBURGH, PA 15219-2903	25-1735360	501(C)(3)	43,000.	0.			PASS THROUGH
PENNSYLVANIA CASA ASSOCIATION PO BOX 77 SUMMERDALE, PA 17093-0077	23-2954302	501(C)(3)	49,200.	0.			PASS THROUGH
NORTHUMBERLAND COUNTY CASA 214 MARKET STREET SUNBURY, PA 17801	23-2954302	501(C)(3)	53,800.	0.			PASS THROUGH
CASA OF WARREN AND FOREST COUNTIES 207 2ND AVENUE WARREN, PA 16365-2405	25-0965640	501(C)(3)	9,500.	0.			PASS THROUGH
CASA FOR KIDS, INC. - WASHINGTON 30 E BEAU STREET STE 417 WASHINGTON, PA 15301-4713	47-0849282	501(C)(3)	16,900.	0.			PASS THROUGH

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OFFICE OF THE GOVERNOR - GUARDIAN AD LITEM PROGRAM - 1205 PENDLETON STREET, SUITE 447 - COLUMBIA, SC 29201	57-6000286	501(C)(3)	79,500.	0.			PASS THROUGH
RICHLAND COUNTY CASA PO BOX 192 COLUMBIA, SC 29202-0192	57-0776475	501(C)(3)	56,500.	0.			PASS THROUGH
EAST-CENTRAL CASA PROGRAM 1215 TRAIL RIDGE ROAD BROOKINGS, SD 57006-4130	33-0998847	501(C)(3)	9,000.	0.			PASS THROUGH
SOUTH DAKOTA CASA ASSOCIATION 2650 JACKSON BLVD. RAPID CITY, SD 57702	04-3598198	501(C)(3)	44,340.	0.			PASS THROUGH
NORTHERN HILLS AREA CASA PROGRAM 1940 NORTH AVENUE STE 6 SPEARFISH, SD 57783-2938	46-0399483	501(C)(3)	9,800.	0.			PASS THROUGH
SOUTHEAST CASA OF SOUTH DAKOTA PO BOX 7017 YANKTON, SD 57078	27-5055055	501(C)(3)	19,000.	0.			PASS THROUGH
CASA CORRIDOR OF EAST TENNESSEE 110 N JACKSON STREET ATHENS, TN 37303-3689	20-8726704	501(C)(3)	44,300.	0.			PASS THROUGH
CASA OF BRADLEY COUNTY CRAIGMILES HALL 170 N. OCOEE STREET CLEVELAND, TN 37311	27-2961555	501(C)(3)	22,800.	0.			PASS THROUGH
UCHRA CASA 3313 WILLIAMS ENTERPRISE DRIVE COOKEVILLE, TN 38506	62-0906260	501(C)(3)	18,350.	0.			PASS THROUGH

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MADISON COUNTY CASA, INC. C/O THE CENTER FOR COURT INVOLVED CHILDREN, INC. 110 IRBY STREET - JACKSON,	62-1643603	501(C)(3)	68,100.	0.			PASS THROUGH
CASA OF NORTHEAST TENNESSEE PO BOX 1021 JOHNSON CITY, TN 37605-1021	45-0515257	501(C)(3)	15,900.	0.			PASS THROUGH
CASA FOR KIDS, INC. 317 SHELBY STREET STE 206 KINGSPORT, TN 37660-3680	62-1464923	501(C)(3)	39,400.	0.			PASS THROUGH
CASA OF THE NINTH JUDICIAL DISTRICT - PO BOX 541 - KINGSTON, TN 37763	26-4363736	501(C)(3)	43,150.	0.			PASS THROUGH
CASA OF EAST TENNESSEE, INC. 2250 SUTHERLAND AVENUE, STE 101 KNOXVILLE, TN 37919	62-1278520	501(C)(3)	21,200.	0.			PASS THROUGH
WILSON AND SMITH COUNTY CASA, INC. PO BOX 594 LEBANON, TN 37088-0594	62-1354029	501(C)(3)	22,600.	0.			PASS THROUGH
CASA OF HENDERSON COUNTY, INC 911 E CHURCH STREET, STE H LEXINGTON, TN 38351	26-4217927	501(C)(3)	34,100.	0.			PASS THROUGH
CASA WORKS, INC. - BEDFORD & COFFEE COUNTIES - 224 WEST FORT STREET - MANCHESTER, TN 37355	27-0997395	501(C)(3)	45,900.	0.			PASS THROUGH
CASA OF MEMPHIS & SHELBY COUNTY, INC. - 616 ADAMS AVENUE - MEMPHIS, TN 38105	58-1831753	501(C)(3)	29,400.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
TENNESSEE CASA ASSOCIATION 412 GOLDEN BEAR COURT, SUITE B202 MURFREESBORO, TN 37128	58-1913593	501(C)(3)	66,600.	0.			PASS THROUGH
CASA, INC. OF NASHVILLE/DAVIDSON COUNTY - 601 WOODLAND STREET - NASHVILLE, TN 37206-4211	62-1203459	501(C)(3)	58,500.	0.			PASS THROUGH
CASA OF THE TENNESSEE HEARTLAND PO BOX 4426 OAK RIDGE, TN 37831-4426	62-1372126	501(C)(3)	12,000.	0.			PASS THROUGH
AMARILLO AREA CASA, INC. PO BOX 691 AMARILLO, TX 79105-0691	75-2560069	501(C)(3)	30,100.	0.			PASS THROUGH
CASA OF TRINITY VALLEY PO BOX 2259 ATHENS, TX 75751-7259	75-2564380	501(C)(3)	6,600.	0.			PASS THROUGH
CASA OF TRAVIS COUNTY, INC. 7701 N. LAMAR BLVD., SUITE 301 AUSTIN, TX 78752	74-2369123	501(C)(3)	43,900.	0.			PASS THROUGH
TEXAS CASA 1501 W ANDERSON LANE STE B-2 AUSTIN, TX 78757-1452	75-2252358	501(C)(3)	48,000.	0.			PASS THROUGH
CASA FOR KIDS OF SOUTH CENTRAL TEXAS - 220 E ALAMO ST - BRENHAM, TX 77833	20-5177957	501(C)(3)	24,200.	0.			PASS THROUGH
CASA OF EL PASO, INC. 500 E SAN ANTONIO AVENUE ROOM 312 EL PASO, TX 79901-2435	74-1950407	501(C)(3)	15,800.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CASA OF TARRANT COUNTY 101 SUMMIT AVENUE, SUITE 505 FORT WORTH, TX 76102	75-1895412	501(C)(3)	41,800.	0.			PASS THROUGH
CASA OF NORTH TEXAS, INC. PO BOX 615 GAINESVILLE, TX 76241-0615	75-2754086	501(C)(3)	9,800.	0.			PASS THROUGH
CASA OF WALKER & SAN JACINTO COUNTIES - PO BOX 275 - HUNTSVILLE, TX 77342-0275	75-3166877	501(C)(3)	36,900.	0.			PASS THROUGH
CASA OF DEEP EAST TEXAS 422 E MAIN STREET # 243 NACOGDOCHES, TX 75961-5261	20-5196671	501(C)(3)	8,100.	0.			PASS THROUGH
CASA OF CENTRAL TEXAS, INC. 1619 E COMMON STREET STE 301 NEW BRAUNFELS, TX 78130-3455	74-2403373	501(C)(3)	20,200.	0.			PASS THROUGH
CHILD ADVOCATES SAN ANTONIO, INC. 406 SAN PEDRO AVENUE SAN ANTONIO, TX 78212-5553	74-2494625	501(C)(3)	57,900.	0.			PASS THROUGH
CHILD ADVOCATES CASA OF ARCHER, CLAY, MONTAGUE & WICHITA COUNTIES - 808 AUSTIN STREET - WICHITA FALLS, TX 76301-3214	48-0984043	501(C)(3)	27,500.	0.			PASS THROUGH
UTAH OFFICE OF THE GUARDIAN AD LITEM AND CASA - PO BOX 140241 - SALT LAKE CITY, UT 84114-0241	87-6000545	501(C)(3)	40,000.	0.			PASS THROUGH
CASA OF THE NEW RIVER VALLEY 205 W MAIN STREET STE 4 CHRISTIANSBURG, VA 24073-2902	54-1773419	501(C)(3)	19,000.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
GOOCHLAND CASA PO BOX 910 GOOCHLAND, VA 23063-0910	20-2533136	501(C)(3)	21,050.	0.			PASS THROUGH
29TH JUDICIAL DISTRICT CASA PROGRAM, INC. - PO BOX 1977 - GRUNDY, VA 24614-1977	62-1583334	501(C)(3)	9,400.	0.			PASS THROUGH
GREAT RICHMOND SCAN - RICHMOND CASA - 103 E. GRACE ST - RICHMOND, VA 23219	54-1584969	501(C)(3)	23,500.	0.			PASS THROUGH
CASA FOR CHILDREN OF AUGUSTA COUNTY, STAUNTON & WAYNESBORO COUNTIES - 119 W. FREDERICK STREET - STAUNTON, VA 24401	54-1721227	501(C)(3)	28,800.	0.			PASS THROUGH
VIRGINIA BEACH CASA 2425 NIMMO PARKWAY VIRGINIA BEACH, VA 23456	54-1708340	501(C)(3)	45,000.	0.			PASS THROUGH
COLONIAL CASA, INC. 1311 JAMESTOWN RD. STE. 201 WILLIAMSBURG, VA 23185	54-1751706	501(C)(3)	6,600.	0.			PASS THROUGH
VERMONT GAL PROGRAM 109 STATE STREET MONTPELIER, VT 05609	03-6000264	501(C)(3)	63,400.	0.			PASS THROUGH
WASHINGTON STATE ASSOCIATION OF CASA/GAL PROGRAMS - 603 STEWART ST SUITE 206 - SEATTLE, WA 98101	91-1535083	501(C)(3)	57,167.	0.			PASS THROUGH
PIERCE COUNTY CASA/GAL PROGRAM 5501 6TH AVENUE TACOMA, WA 98406-2603	91-6001359	501(C)(3)	28,000.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
YAKAMA NATION CASA PROGRAM PO BOX 151 TOPPENISH, WA 98948-0151	91-0576806	501(C)(3)	14,500.	0.			PASS THROUGH
CLARK COUNTY CASA PROGRAM YWCA OF CLARK COUNTY 3609 MAIN ST VANCOUVER, WA 98663-2225	91-0569882	501(C)(3)	17,400.	0.			PASS THROUGH
SPOKANE TRIBAL CASA PROGRAM PO BOX 540 WELLPINIT, WA 99040-0225	91-0606339	501(C)(3)	15,567.	0.			PASS THROUGH
COLUMBIA-SAUK CASA PROGRAM 124 2ND STREET STE 32 BARABOO, WI 53913-2474	39-1928232	501(C)(3)	5,100.	0.			PASS THROUGH
CASA OF BROWN COUNTY, INC. 414 E WALNUT STREET STE 281 GREEN BAY, WI 54301-5017	20-0476117	501(C)(3)	40,500.	0.			PASS THROUGH
CASA OF ROCK COUNTY ROCK COUNTY COURTHOUSE 51 S. MAIN S JANESVILLE, WI 53545	39-0833966	501(C)(3)	14,500.	0.			PASS THROUGH
DANE COUNTY CASA PROGRAM 211 S CARROLL STREET STE 206 MADISON, WI 53703-4330	20-1717869	501(C)(3)	32,800.	0.			PASS THROUGH
WISCONSIN CASA ASSOCIATION 6441 ENTERPRISE LANE, SUITE 108 MADISON, WI 53719	39-1974356	501(C)(3)	61,000.	0.			PASS THROUGH
KIDS MATTER CASA 1850 N MARTIN LUTHER KING DRIVE STE MILWAUKEE, WI 53212-3672	39-1988488	501(C)(3)	23,500.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
KANAWHA COUNTY CASA, INC. PO BOX 1588 CHARLESTON, WV 25326-1588	02-0801374	501(C)(3)	8,000.	0.			PASS THROUGH
WEST VIRGINIA CASA ASSOCIATION 2442 KANAWHA BLVD., EAST CHARLESTON, WV 25311	55-0754943	501(C)(3)	56,800.	0.			PASS THROUGH
WESTERN REGIONAL CASA PO BOX 1653 HUNTINGTON, WV 25717-1653	55-0663886	501(C)(3)	17,400.	0.			PASS THROUGH
MINERAL COUNTY CASA PROGRAM ONE GRAND CENTRAL BUSINESS CENTER, KEYSER, WV 26726-2718	55-0767633	501(C)(3)	14,800.	0.			PASS THROUGH
CASA FOR CHILDREN INC. 258 JEFFERSON AVE. MOUNDSVILLE, WV 26041	27-0906338	501(C)(3)	27,800.	0.			PASS THROUGH
CASA OF THE FIFTH JUDICIAL CIRCUIT, INC. - P O BOX 107 - RIPLEY, WV 25271	20-5842862	501(C)(3)	20,000.	0.			PASS THROUGH
CASA OF HAMPSHIRE COUNTY, INC. 92 E MAIN STREET STE 102 ROMNEY, WV 26757-1840	20-5460737	501(C)(3)	26,600.	0.			PASS THROUGH
A CHILD'S PLACE CASA, LTD. 720 CHARLES STREET WELLSBURG, WV 26070-1664	31-1620703	501(C)(3)	8,800.	0.			PASS THROUGH
CASA OF LARAMIE COUNTY 211 W 18TH STREET CHEYENNE, WY 82001-4413	71-0878684	501(C)(3)	15,900.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CASA ASSOCIATION OF THE 5TH JUDICIAL DISTRICT - 1725 SHERIDAN AVE. STE. 138 - CODY, WY 82414	27-2137118	501(C)(3)	51,350.	0.			PASS THROUGH
CASA FOR THE SIXTH JUDICIAL DISTRICT - PO BOX 2557 - GILLETTE, WY 82717-2557	83-0322769	501(C)(3)	16,200.	0.			PASS THROUGH
ALASKA CASA PROGRAM 900 W 5TH AVE, SUITE 525 ANCHORAGE, AK 99501		GOVERNMENT	48,400.	0.			PASS THROUGH
ANCHORAGE CASA - COOK INLET TRIBAL COUNCIL - 3600 SAN JERONIMO COURT, SUITE 410 - ANCHORAGE, AK 99508		GOVERNMENT	50,000.	0.			PASS THROUGH
UKPEAGVIK CASA PO BOX 1124 BARROW, AK 99723		GOVERNMENT	15,000.	0.			PASS THROUGH
YUKON-KUSKOKWIM DELTA CASA PROGRAM PO BOX 2226 BETHEL, AK 99559		GOVERNMENT	37,070.	0.			PASS THROUGH
ARKANSAS STATE CASA ASSOCIATION 625 MARSHALL STREET, BOX 2100 LITTLE ROCK, AR 72201		GOVERNMENT	74,800.	0.			PASS THROUGH
CASA OF ARIZONA 1501 W. WASHINGTON, SUITE 119A PHOENIX, AZ 85007		GOVERNMENT	43,000.	0.			PASS THROUGH
CASA OF MARICOPA COUNTY JUVENILE COURT CENTER 3131 W. DURAN PHOENIX, AZ 85009		GOVERNMENT	6,960.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
GILA RIVER INDIAN COMMUNITY CASA PO BOX 368 SACATON, AZ 85147		GOVERNMENT	13,200.	0.			PASS THROUGH
GUARDIAN AD LITEM PROGRAM - 1ST JUDICIAL CIRCUIT - 1800 SAINT MARY AVENUE STE 3 - PENSACOLA, FL 32501-1045		GOVERNMENT	19,000.	0.			PASS THROUGH
JUVENILE COURT OF COBB COUNTY CASA PROGRAM - 1738 COUNTY SERVICES PARKWAY SW - MARIETTA, GA 30008-4000		GOVERNMENT	36,800.	0.			PASS THROUGH
IOWA CASA PROGRAM 4TH FL. LUCAS BLDG. 321 E. 12TH ST DES MOINES, IA 50319-0083		GOVERNMENT	52,600.	0.			PASS THROUGH
SOUTH CENTRAL IOWA CASA - DES MOINES - LUCAS BUILDING 321 E 12TH STREET, 4TH FLOOR - DES MOINES, IA 50319-0083		GOVERNMENT	16,500.	0.			PASS THROUGH
4TH JUDICIAL DISTRICT CASA 1014 EAST NISHNA ROAD SHENANDOAH, IA 51601		GOVERNMENT	7,500.	0.			PASS THROUGH
THE STATE GUARDIAN AD LITEM PROGRAM - PO BOX 83720 - BOISE, ID 83720-0101		GOVERNMENT	40,000.	0.			PASS THROUGH
INDIANA STATE OFFICE OF GAL/CASA 30 S MERIDIAN STREET STE 500 INDIANAPOLIS, IN 46204-3568		GOVERNMENT	86,600.	0.			PASS THROUGH
VIGO COUNTY CASA 141 OAK STREET TERRE HAUTE, IN 47807-3438		GOVERNMENT	20,550.	0.			PASS THROUGH

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
MAINE CASA PROGRAM FAMILY DIVISION, ADMIN OFFICE OF THE COURTS 171 STATE HOUSE STATION - AUGUST		GOVERNMENT	46,600.	0.			PASS THROUGH
PHELPS - HARLAN COUNTY CASA PO BOX 1005 HOLDREGE, NE 68949-4005		GOVERNMENT	8,000.	0.			PASS THROUGH
SUMMIT COUNTY CASA SUMMIT COUNTY JUVENILE COURT 650 DA AKRON, OH 44310-3909		GOVERNMENT	27,856.	0.			PASS THROUGH
OREGON COMMISSION ON CHILDREN & FAMILIES - 530 CENTER ST NE, SUITE 405 - SALEM, OR 97301		GOVERNMENT	27,400.	0.			PASS THROUGH
RHODE ISLAND CASA PROGRAM 1 DORRANCE PLAZA PROVIDENCE, RI 02903-3922		GOVERNMENT	84,100.	0.			PASS THROUGH
THIRD DISTRICT GUARDIAN AD LITEM AND CASA - PO BOX 140403 - SALT LAKE CTY, UT 84114-0403		GOVERNMENT	45,800.	0.			PASS THROUGH
DEPT OF CRIMINAL JUSTICE SERVICES 1100 BANK STREET, 12TH FLOOR RICHMOND, VA 23219		GOVERNMENT	43,800.	0.			PASS THROUGH
OTHERS UNDER $5K			40,478.	0.			PASS THROUGH

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

(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

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INCLUDE THE FOLLOWING: PROGRAM SITES VISITED BY STAFF FOR GRANT REVIEW, REVIEW OF SELECTED GRANT EXPENDITURES BY STAFF AT HOME OFFICE, AND TRACKING MONTHLY EXPENDITURE AMOUNTS FOR ALL GRANTEES REPORTED VIA WEBSITE.

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

2011

Open to Public Inspection

Name of the organization: NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

Employer identification number: 91-1255818

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**		
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? **2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.		
	☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ 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? **4a**		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**		X
c	Participate in, or receive payment from, an equity-based compensation arrangement? **4c**		X
	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? **5a**		X
b	Any related organization? **5b**		X
	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? **6a**		X
b	Any related organization? **6b**		X
	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 **7**		X
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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MICHAEL PIRAINO	(i)	220,814.	0.	0.	0.	3,225.	224,039.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 CARMELA WELTE	(i)	156,643.	0.	0.	0.	0.	156,643.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	91-1255818

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE REVIEWS THE FORM 990 BEFORE IT IS FILED. THE ORGANIZATION'S CFO AND CONTROLLER ALSO REVIEW THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C: ALL EMPLOYEES AND BOARD MEMBERS MUST SIGN A CONFLICT OF INTEREST POLICY ANNUALLY. POTENTIAL CONFLICTS ARE REVIEWED BY BOARD PRESIDENT AND CEO, THEN DISCLOSED TO BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD EXECUTIVE COMMITTEE APPROVES THE CEO'S COMPENSATION ANNUALLY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
WA,AL,AK,AZ,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,ME,MD,MI,MN,MS,NH,NJ,NM,NY,NC,ND
OH,OK,OR,PA,RI,SC,TN,UT,VA,WV,WI,MA

FORM 990, PART VI, SECTION C, LINE 19: THESE DOCUMENTS ARE NOT AVAILABLE FOR PUBLIC DISCLOSURE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:
NET UNREALIZED LOSSES ON INVESTMENTS: -13,918.

FORM 990, PART XII, LINE 2C
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.