### Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For th	e 2018 calen	dar year, or tax year beginning $7/01$ , 2018, and ending $6/3$	0	,	2019
В	Check if	f applicable:	С	D Employ	er identif	ication number
	Add	dress change	California Court Appointed Special	68-0	01630	10
	Nar	me change		E Telepho		
	$\vdash$	tial return	3525 Del Mar Heights Rd. #243	(51)	1) 38	30-8569
	$\vdash$	al return/terminated	San Diego, CA 92130-2122	(31)	<i>)</i>	0000
	$\vdash$	nended return		<b>G</b> Gross re	المستمد و	. 1 /02 02/
	$\vdash$		F Name and address of principal officer: Tanana Tlabban H(a) Is this a			
	App	plication pending	Lames Harrer			
	т		Same As C Above    H(b) Are all s   f "No," a   f "No,	attach a list.	(see ins	tructions)
<del>!</del>		exempt status:	X   501(c)(3)   501(c) ( ) ◀ (insert no.)   4947(a)(1) or   527			
<u>J</u>			w.californiacasa.org			
K		of organization:	X Corporation Trust Association Other LY Year of formation: 1987	M s	tate of le	gal domicile: CA
Pa		Summar				
	1	Briefly descri	be the organization's mission or most significant activities:California Court	: Appo:	inted	l Special
မ္ပ		Advocate	(CASA) Association's mission is to ensure that child	<u>dren i</u>	<u>n th</u>	<u>e foster care</u>
aŭ		<u>system</u> h	ave both a voice and the services that they need for	<u>a sta</u>	b <u>⊺e</u>	<u>future.</u>
Activities & Governance						
δ		Check this bo			- 1	
å			oting members of the governing body (Part VI, line 1a)dependent voting members of the governing body (Part VI, line 1b)		3 4	17
es			of individuals employed in calendar year 2018 (Part V, line 2a)	L	5	17 11
Σij			of volunteers (estimate if necessary)		6	11 17
ļc.			ed business revenue from Part VIII, column (C), line 12		7a	0.
1			I business taxable income from Form 990-T, line 38		7b	0.
				ior Year		Current Year
	8	Contributions	and grants (Part VIII, line 1h).	777,9	89.	1,476,776.
Revenue			rice revenue (Part VIII, line 2g)	,5	-	1,1,0,1,0,
ver		-	ncome (Part VIII, column (A), lines 3, 4, and 7d)	7	71.	7,058.
Re			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			.,,
	12	Total revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	778,7	60.	1,483,834.
	13	Grants and s	imilar amounts paid (Part IX, column (A), lines 1-3)	•		22,400.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)			,
	15	Salaries, other	er compensation, employee benefits (Part IX, column (A), lines 5-10)	442,4	65.	821,253.
ses	16a		fundraising fees (Part IX, column (A), line 11e)	36,0		
Expenses				30,0	03.	
Ϋ́	_ D		sing expenses (Part IX, column (D), line 25) \( \) \(			
	17		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	298,2		285,254.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)	776,7		1,128,907.
		Revenue less	s expenses. Subtract line 18 from line 12	2,0		354,927.
s or	l			of Curren		End of Year
Net Assets of Fund Balance	20		(Part X, line 16)	394,2		1,151,212.
id B	21	lotal liabilitie	s (Part X, line 26)	270,9	98.	673,063.
ŠΞ	22	Net assets or	fund balances. Subtract line 21 from line 20	123,2	22.	478,149.
Pa	rt II	Signatur	e Block			
Unde	er penalti	ies of perjury, I de	eclare that I have examined this return, including accompanying schedules and statements, and to the best of my	knowledge	and belie	f, it is true, correct, and
comp	piete. De	eciaration of prepa	rer (other than officer) is based on all information of which preparer has any knowledge.			
		<b></b>				
Sig He	gn	Signatu	re of office filed not more	٦il		
He	re	▶ Sha:	ron Lawrence CU DU CEO C	<b>ZII</b>		
		Type or	print name and title			
		Print/Type p	oreparer's name Preparer's signature Date (	Check	if F	PTIN
Pai	id	Hiep H	Pham Hiep Pham	self-employe	ed ]	201346204
	epare					
Us	e Onl	ly Firm's addre		Firm's EIN	20-	1398210
				Phone no.		457-1215

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

No

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		Х
t	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.	11 b		Х
C	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
C	I 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	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Χ
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)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Χ	
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	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 (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Χ
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	Χ	

# Form 990 (2018) California Court Appointed Special Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		Х
I	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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		Х
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):			
ä	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
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? <i>If 'Yes,' complete Schedule M</i>	30		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part l</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	© Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
3AA	TEEA0104L 08/03/18	Form	990	(2018)

Form 990 (2018) California Court Appointed Special

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	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 11			
ŀ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ŀ	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b		
4 a	a 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)?	4 a		Х
ŀ	n If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
ŀ	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
á	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?	7 a		Х
	of If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
(	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
(	If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 11		
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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		
Ì	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	100		
ŀ	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			
	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ŀ	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
10		16		Х
10	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If 'Yes,' complete Form 4720, Schedule O.	10		^

Form 990 (2018) California Court Appointed Special 68-0163010 Page 6 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 or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . 17 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 ... 17 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 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Did the organization have members or stockholders?..... Χ 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 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 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.......... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* ... See .Schedule .Q ..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... Χ 15a 15 b 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?..... Χ 16 a **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?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A 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 Other (explain in Schedule O) See Sch. O Own website X Another's website X Upon request Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

San Diego CA 92130-2122 (510)

663-8440

#243

CASA 3525 Del Mar Heights Rd.

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

Check if Schedule O contains a response or note to any line in this Part VII.....

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

- 1 a 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.

		(C)								
(A) Name and Title	(B) Average hours per	thar	one both	box, an o	unles	eck more ss person r and a ee)		(D)  Reportable compensation from the organization	<b>(E)</b> Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) James Hatter	2									
Chairman	0	Χ		Χ				0.	0.	0.
(2) Shelley Brown	2									_
Vice Chair	0	Χ		Χ				0.	0.	0.
(3) Jan-Yu Wang	2									
Secretary	0	Χ		Χ				0.	0.	0.
(4) Kevin Gardner	2									
Treasurer	0	Χ		Χ				0.	0.	0.
(5) Katy Carlsen	2									
Board Member	0	Χ						0.	0.	0.
(6) Nancy Banning Doyle	2									
Board Member	0	Χ						0.	0.	0.
(7) Tracy Fauver	2									
Board Member	0	Χ						0.	0.	0.
(8) J. Michael Hughes	2									
Board Member	0	Χ						0.	0.	0.
(9) Marie Kennedy	2									
Board Member	0	Χ						0.	0.	0.
(10) Don Kleinfelder	2									
Board Member	0	Χ						0.	0.	0.
(11) Kim Moore	2									
Board Member	0	Χ						0.	0.	0.
(12) Elisa Mendel	2									
Board Member	0	Χ						0.	0.	0.
(13) Wendelyn Nichols-Julien	2									
Board Member	0	Χ	$\sqcup$					0.	0.	0.
(14) Sarah Delaney Rosendahl	2									_
Board Member	0	Χ						0.	0.	0.

Part VII   Section A. Officer	s, Directors, Tru		Key	Em	_		es,	and	d Highest Com	pensated Emp	loyee	<b>S</b> (conti	nued)
	(B) (C)												
(A) Name and title		Average hours per week (list any	box offi	, unle: cer an	ss pe nd a c	erson direct	than is both or/trus	h an tee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	amo	(F) Estimated ount of ot ount of ot on the	ther on
		hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1039-NIGC)	(W-2/1033-WI36)	or a	ganizatio nd relate ganization	on d
(15) Robert Smith Board Member		20	Х						0.	0.			0.
(16) Sharon Lawrence CEO		<u>40</u>	Х		Х				166,500.	0.			0.
(17) Anne Farrell CPO		<u> 40</u> _	Х		Х				65,852.	0.			0.
(18) Joan Reilly CFO		<u>40</u>	Х		Х				45,286.	0.			0.
(19) Karen Finan Program Director		<u> 40</u> _					Х		102,357.	0.			0.
(20) Adam Wallace Treasurer		2	-					Х	0.	0.			0.
(21) S. Keating Rhoads Board Member		2	-					Х	0.	0.			0.
(22)			-										
(23)			-										
(24)													
(25)													
1 b Sub-total								<b>&gt;</b>	379,995.	0.			0.
c Total from continuation shee								<b>&gt;</b>	0.	0.			0.
d Total (add lines 1b and 1c)  2 Total number of individuals (inc								vod.	379,995.	0.	oonsotis		0.
from the organization	2	to those i	isteu	abov	/e) v	WIIO	recei	veu	more man \$100,00	o of reportable com	Jensaud	T	
3 Did the organization list any on line 1a? If 'Yes,' complete	former officer, directed Schedule J for such	tor, or tru h <i>individu</i>	stee, al	key	em	ıplo <u>y</u>	/ee,	or h	nighest compensa	ted employee	. 3	Yes	No
<b>4</b> For any individual listed on li the organization and related such individual	ne 1a, is the sum of organizations greate	reportab er than \$1	le co 50,00	mpe 00?	nsa If 'Y	ition ∕ <i>es,</i>	and com	oth <i>ple</i>	er compensation te Schedule J for	from	4	Х	
5 Did any person listed on line for services rendered to the	1a receive or accrue	e compen	satio	n fro	om :	anv	unre	late	ed organization or	individual			Х
Section B. Independent Con	ntractors												
Complete this table for your compensation from the organiz	five highest compensation. Report compens	sated indessation for	epen the c	dent alend	cor dar <u>y</u>	ntra year	ctors endi	tha ng v	It received more the vith or within the or	nan \$100,000 of ganization's tax yea	r.		
(A) Name and business address						Description of	of services	Comp	( <b>C)</b> ensatio	n			
2 Total number of independent co \$100,000 of compensation fro	•		ited to	o tho	se I	isted	d abo	ve)	who received more	than			

#### Form 990 (2018) California Court Appointed Special 68-0163010 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or (A) Total revenue (D) Unrelated Revenue business excluded from tax exempt under sections 512-514 function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns . . . . . . . . **b** Membership dues..... 1 b c Fundraising events..... 1 c d Related organizations . . . . . . . 1 d e Government grants (contributions) . . . . 179,825 **f** All other contributions, gifts, grants, and similar amounts not included above . . . 296,951 g Noncash contributions included in lines 1a-1f: \$ 3,736 h Total. Add lines 1a-1f..... 1,476,776 **Business Code** Program Service Revenue b **f** All other program service revenue. . . g Total. Add lines 2a-2f ..... Investment income (including dividends, interest and <u>7,</u>058 7,058 Income from investment of tax-exempt bond proceeds.. ▶ 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 7 a 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)..... 8 a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18..... **b** Less: direct expenses . . . . . **b** c Net income or (loss) from fundraising events . . . . . . . . 9 a Gross income from gaming activities. See Part IV, line 19..... 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** c **d** All other revenue ..... **Total revenue.** See instructions..... 7,058 0 1,483,834 TEEA0109L 08/03/18 Form 990 (2018)

#### 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).

Do i 6b,	not include amounts reported on lines 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 domestic organizations and domestic governments. See Part IV, line 21.	22,400.	22,400.	general expenses	олроново
2	Grants and other assistance to domestic individuals. See Part IV, line 22	==/ 1001	22, 1001		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	424,558.	274,005.	67,493.	83,060.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	259,184.	213,440.	588.	45,156.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	84,631.	60,334.	8,427.	15,870.
10	Payroll taxes	52,880.	37,699.	5,265.	9,916.
11	Fees for services (non-employees):				
	Management				
	Legal	21,565.	20,585.	920.	60.
	: Accounting	7,500.	5,347.	747.	1,406.
	Lobbying				
	e Professional fundraising services. See Part IV, line 17				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	56,656.	53,691.	645.	2,320.
13	Office expenses	26,731.	19,057.	2,661.	5,013.
14	Information technology	,	, , , , ,	,	
15	Royalties				
16	Occupancy	25,231.	17,987.	2,513.	4,731.
17	Travel	27,843.	27,843.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,598.	4,704.	657.	1,237.
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization				
23 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.).	4,483.	3,196.	446.	841.
a	Workshops and convenings	53,793.	53,793.		
	Other expenses	27,328.	19,484.	2,719.	5,125.
	Program expenses	19,747.	19,747.		
C	<u> Telephone</u>	7,779.	5,546.	774.	1,459.
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,128,907.	858,858.	93,855.	176,194.
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)				

		Check if Schedule O contains a response or note to any line in this Part X		<u></u> .	
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing.	122,975.	1	410,558.
	2	Savings and temporary cash investments.	175,144.	2	661,500.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	80,229.	4	63,157.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	15,872.	9	15,997.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	20,0.21		20,001.
		Less: accumulated depreciation		10 c	
	11	Investments – publicly traded securities.		11	
	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	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		16	1,151,212.
	17	Accounts payable and accrued expenses	34,793.	17	94,823.
	18	Grants payable		18	34,023.
	19	Deferred revenue		19	578,240.
	20	Tax-exempt bond liabilities		20	<u> </u>
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other 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 I		25	
	26	Total liabilities. Add lines 17 through 25.	270,998.	26	673,063.
ces		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets		27	478,149.
Bal	28	Temporarily restricted net assets.		28	
힏	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
et	33	Total net assets or fund balances		33	478,149.
Z	34	Total liabilities and net assets/fund balances		34	1,151,212.

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,4	83,8	334.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		28,9			
3	Revenue less expenses. Subtract line 2 from line 1	3		54,9			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	23,2	222.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O).	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	10		<b></b>	4.0		
Da	rt XII Financial Statements and Reporting	10	4	78,1	49.		
Га	<u> </u>				_		
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	ed on a					
l	b Were the organization's financial statements audited by an independent accountant?		. 2b	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:    X   Separate basis	te					
•	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?		. 2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
	<b>a</b> 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?		. За		Х		
	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b				
BAA	TEEA0112L 08/03/18		Form	990	(2018)		

#### 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization Employer identification number California Court Appointed Special Advocate Association 68-0163010 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) 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 in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) 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.)

Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	809,230.	987,269.	930,658.	777,989.	1,476,776.	4,981,922.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	<b>Total.</b> Add lines 1 through 3 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)	809,230.	987,269.	930,658.	777,989.	1,476,776.	4,981,922.
6	<b>Public support.</b> Subtract line 5 from line 4						4,581,719.
Sec	tion B. Total Support						,
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
7	Amounts from line 4	809,230.	987,269.	930,658.	777,989.	1,476,776.	4,981,922.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	45.	33.	31.	771.	7,058.	7,938.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		33.	5-2		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
	Total support. Add lines 7 through 10						4,989,860.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.
	<b>First five years.</b> If the Form 990 is organization, check this box and	stop here		rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	▶
Sec	tion C. Computation of Pul	olic Support P	ercentage			1	
	Public support percentage for 20 Public support percentage from 2						91.82 % 99.29 %
	<b>33-1/3% support test—2018.</b> If the and <b>stop here.</b> The organization	ne organization di	d not check the b	ox on line 13. and	d line 14 is 33-1/3	3% or more, check	this box
b	<b>33-1/3% support test—2017.</b> If th and <b>stop here.</b> The organization	e organization did	I not check a box	on line 13 or 16a	, and line 15 is 3	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstances	s' test, check this	box and stop her	r <b>e.</b> Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and Private foundation. If the organization	meets the 'facts-a d-circumstances' t	ind-circumstances est. The organiza	s' test, check this tion qualifies as a	box and <b>stop her</b> a publicly support	re. Explain in Part ed organization.	t VI how the▶

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

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. ( 11.)			
Calend	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7
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						
	<b>Total.</b> Add lines 1 through 5 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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b.  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 VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·				
	tion C. Computation of Pul					, ,	
	Public support percentage for 20	•			•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					1 1	
17	Investment income percentage for	•	• • •	-			0,0
18	Investment income percentage fi						%
	<b>33-1/3% support tests—2018.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐
	<b>33-1/3% support tests—2017.</b> If t line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization	, check this box	and <b>stop here.</b> The	e organization qu	ialifies as a public	ly supported organ	nization ►

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
<b>4</b> a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		
С	: Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	1 <b>0</b> b		

Par	t IV	Supporting Organizations (continued)			
	11 4			Yes	No
		the organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the rning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
С	A 359	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	tion I	B. Type I Supporting Organizations			
				Yes	No
1	or ele <b>Part</b> If the  direct	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ext at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. The organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and the supported organization and what conditions or restrictions, if any, and the supported organizations are described to the supported organizations.	1		
•		ed to such powers during the tax year.			
2	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion (	C. Type II Supporting Organizations			
				Yes	No
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	orgar year,	he organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	orgar	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	orgar	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3					
3	voice all tin	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard.	3		
Sec		E. Type III Functionally Integrated Supporting Organizations			
-		E. Type III T directionally integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	· ∐ ⊤	The organization satisfied the Activities Test. Complete line 2 below.			
b	) <u> </u> T	he organization is the parent of each of its supported organizations. Complete line 3 below.			
c	: [] T	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ารtruc	tions).	
2	Activi	ities Test. Answer (a) and (b) below.	ľ	Yes	No
а	suppo orgai	substantially all of the organization's activities during the tax year directly further the exempt purposes of the ordanization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported inizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was provided at the proposed that these activities constituted			
		onsive to those supported organizations, and how the organization determined that these activities constituted tantially all of its activities.	2a		
b	the o	he activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
		nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
а	Did the each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

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Page 6

Pa	rt v   Type III Non-Functionally integrated 509(a)(5) Supporting Orga	annzau	UIIS			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	v. 20, 1970 (explain in t complete Sections A	n Part VI). <b>See</b> A through E.		
Sec	Section A — Adjusted Net Income (A) Prior Year					
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sec	ction B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):					
	Average monthly value of securities	1a				
	Average monthly cash balances	1b				
-	Fair market value of other non-exempt-use assets	1c				
	d Total (add lines 1a, 1b, and 1c)	1d				
•	Discount claimed for blockage or other factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sec	ction C — Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	egrated	Type III supporting or	ganization		

Schedule A (Form 990 or 990-EZ) 2018

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
<b>b</b> Excess from 2015			
c Excess from 2016			
<b>d</b> Excess from 2017			
e Excess from 2018			
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Schedule A (Form 990 or 990-EZ) 2018

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

TEEA0408L 06/07/18

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

#### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on 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,' on 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,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

	xy Tax) (see separate instruct Section 501(c)(4), (5), or (6) o	tions), then rganizations: Complete Part III.	(300 Sopulate IIIsti de		. u. ( 1, i.i.) 555
	of organization Californ	ia Court Appointed Special Association		Employer identific 68-016301	
Pai	rt I-A Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organi	zation.
	Provide a description of the	organization's direct and indirect political on of 'political campaign activities')	· · ·		<u>Lutioni</u>
2	-	or pentited campaign detivities /		<b>▶</b> ċ	!
		campaign activities (see instructions)			
		rganization is exempt under section			
1	-	ise tax incurred by the organization under	, , , ,	▶\$	0.
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 8	Was a correction made?				Yes No
ı	If 'Yes,' describe in Part IV.				
Pai	rt I-C Complete if the or	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	ı
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities > \$	
2	Enter the amount of the filing 527 exempt function activities	g organization's funds contributed to other s	organizations for sec	tion ······►\$	
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	<b>►</b> \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the arms received that were promptly and directly del I action committee (PAC). If additional spanning	mount paid from the fivered to a separate po	filing organization's fun olitical organization, such	ds. Also enter the as a separate
	<b>(a)</b> 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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2018

Part II-A Complete if section 501(	the organization	n is exempt under se	ction 501(c)(3) and	l filed Form 5768 (el	ection under	
A Check ► ☐ if the filin address,	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).					
(The term	Limits on Lobb 'expenditures' me	ying Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals	
1 a Total lobbying expendite	ures to influence p	ublic opinion (grass roots lo	obbying)			
<b>b</b> Total lobbying expendition	ures to influence a	legislative body (direct lob)	bying)			
, , ,	•	and 1b)				
		nes 1c and 1d)				
		nount from the following ta				
If the amount on line 1e, col		The lobbying nontaxable				
Not over \$500,000		20% of the amount on line 1e.				
Over \$500,000 but not over \$1		\$100,000 plus 15% of the excess				
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess				
Over \$1,500,000 but not over \$ Over \$17,000,000	517,000,000	\$225,000 plus 5% of the excess \$1,000,000.	over \$1,500,000.			
	amount (enter 25%	of line 1f)				
•	•	ss, enter -0				
i Subtract line 1f from lin	e 1c. If zero or less	s, enter -0				
		r line 1h or line 1i, did the or			Yes No	
(Som		4-Year Averaging Period of the state of the state of the separate instance of the separate of the se	lection do not have to			
	Lob	bying Expenditures During	4-Year Averaging Per	iod		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> Total	
2 a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))						
<b>c</b> Total lobbying expenditures						
<b>d</b> Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
<b>f</b> Grassroots lobbying expenditures						
BAA				Schedule C (Forn	n 990 or 990-EZ) 2018	

## 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)).

	(a)		(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	A	Amount	
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,					
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?		Χ			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?		X			
<b>d</b> Mailings to members, legislators, or the public?		Χ			
e Publications, or published or broadcast statements?		Χ			
f Grants to other organizations for lobbying purposes?		Χ			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	Х			7,	679.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Χ			
i Other activities?		Χ			
j Total. Add lines 1c through 1i				7,	679.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Χ			
<b>b</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		Ī			
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)(6).	(c)(5)	, or			
Section 301(c)(o).				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			<del>-</del>		NO
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	
3 Did the organization make only infinituse lobbying expenditures of \$2,000 or less:				3	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	Part I	, or s III-A,	line 3,	is	)
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		2 a			
<b>b</b> Carryover from last year.		2b			
<b>c</b> Total.		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
A If walking your park and the assessed an line 20 assessed the assessed an line 2 substitute of the assessed					
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the treganization agree to carryover to the reasonable estimate of nondeductible lobbying and political					

#### Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

5 Taxable amount of lobbying and political expenditures (see instructions) ......

## SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

California Court Appointed Special Advocate Association

	Advocate Association		68-0163010
Par	Organizations Maintaining Donor Complete if the organization answ	<b>Advised Funds or Other Simi</b> vered 'Yes' on Form 990, Part I	ilar Funds or Accounts. V, line 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor are the organization's property, subject to the organization	or advisors in writing that the assets horganization's exclusive legal control?	neld in donor advised funds
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit impermissible private benefit?	of the donor or donor advisor, or for a	nv other purpose conferring
Day	impermissible private benefit?		
Par	Conservation Easements. Complete if the organization answ	vered 'Yes' on Form 990 Part I	IV line 7
1	Purpose(s) of conservation easements held by		
•	Preservation of land for public use (e.g., re		rvation of a historically important land area
	Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	ervation of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he last day of the tax year.	eld a qualified conservation contribution i	in the form of a conservation easement on the
	,		Held at the End of the Tax Year
á	Total number of conservation easements		2a
ŀ	Total acreage restricted by conservation easem	nents	2b
(	: Number of conservation easements on a certifi	ed historic structure included in (a)	2c
(	Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, and not or	n a historic 2 d
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished, or termin	ated by the organization during the
4	Number of states where property subject to conser	vation easement is located ►	
5	Does the organization have a written policy reg		
_	and enforcement of the conservation easement		
6	Staff and volunteer hours devoted to monitoring, in	ispecting, nandling of violations, and enf	orcing conservation easements during the year
7	Amount of expenses incurred in monitoring, inspec	cting, handling of violations, and enforcin	g conservation easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirement	nts of section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports		
	include, if applicable, the text of the footnote to conservation easements.	the organization's financial statemer	nts that describes the organization's accounting for
Par	Organizations Maintaining Collection Complete if the organization answ	ctions of Art, Historical Treasu vered 'Yes' on Form 990, Part I	i <b>res, or Other Similar Assets.</b> IV, line 8.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets hel in Part XIII, the text of the footnote to its finance	d for public exhibition, education, or rese	its revenue statement and balance sheet works of earch in furtherance of public service, provide, tems.
ŀ	following amounts relating to these items:	•	revenue statement and balance sheet works of art, in furtherance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, I		
	(ii) Assets included in Form 990, Part X		▶\$
	If the organization received or held works of art, hi amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
	Revenue included on Form 990, Part VIII, line		
	Assets included in Form 990, Part X		▶\$

Part III Organizations Mainta	illing Collec	tions of Art,	HISTORICA	ar rreasures, or v	Julier Sillillar ASS	ets (COITUI	iueu)
3 Using the organization's acquisition items (check all that apply):	, accession, and	other records,		· ·	a significant use of its of	collection	
a Public exhibition		d	Loan or ex	change programs			
<b>b</b> Scholarly research		e	Other				
c Preservation for future gener	ations		,				
4 Provide a description of the organiz Part XIII.							
5 During the year, did the organiza to be sold to raise funds rather the	nan to be maint	ained as part of	of the organ	ization's collection?.		Yes	No
Part IV Escrow and Custodia line 9, or reported an	<b>l Arrangeme</b> amount on F	e <b>nts.</b> Comple form 990, Pa	ete if the o art X, line	organization ansv 21.	wered 'Yes' on Foi	m 990, Pa	art IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian	or other interm	nediary for o	ontributions or other	assets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement							□
2 11, 1 , 1 , 1 1 1 1 3			3			Amount	
<b>c</b> Beginning balance							
<b>d</b> Additions during the year							
e Distributions during the year							
f Ending balance							
2a Did the organization include an a						Yes	No
<b>b</b> If 'Yes,' explain the arrangement					- L		H
<b>b</b> ii res, explain the arrangement	III Part XIII. Ci	ieck nere ii the	ехріапаціо	ii iias beeli provided	OII Part Alli		Ш
Bort V Fredering and Frederic				wad Waal an Faw	000 David IV/ Iiva	- 10	
Part V Endowment Funds. C		Y				1	
4 Denimaina of completence	(a) Current ye	ar (b)	Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars back
<b>1 a</b> Beginning of year balance							
<b>b</b> Contributions							
c Net investment earnings, gains, and losses							
<b>d</b> Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
<b>g</b> End of year balance							
2 Provide the estimated percentage	e of the current	year end bala	nce (line 1g	, column (a)) held as	s:		
a Board designated or quasi-endowm	ent ►	%					
<b>b</b> Permanent endowment ▶	%						
c Temporarily restricted endowmer	nt ►	%					
The percentages on lines 2a, 2b, ar	nd 2c should equ	ial 100%.					
3a Are there endowment funds not in toganization by:	he possession o	f the organization	n that are h	eld and administered f	or the	Yes	No
(i) unrelated organizations						3a(i)	
(ii) related organizations						3a(ii)	
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ited organizatio	ns listed as re	quired on S	chedule R?		3b	
4 Describe in Part XIII the intended	d uses of the or	ganization's er	ndowment fi	unds.			
Part VI Land, Buildings, and							
Complete if the organi		ered 'Yes' o	n Form 9	90, Part IV, line	11a. See Form 990	D, Part X,	line 10.
Description of property	(a	Cost or other		b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
<b>1 a</b> Land							
<b>b</b> Buildings							
c Leasehold improvements							
<b>d</b> Equipment							
<b>e</b> Other							
Total. Add lines 1a through 1e. (Column		al Form 990 F	Part X. colur	mn (B), line 10c )	<b></b>		0.
BAA	(3)431 394		,	(=),		ıle D (Form 9	

Schedule D (Form 990) 2018

Part VII Investments – Other Securities.	N/ 1 E 00	N/A
		0, Part IV, line 11b. 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)		
(1)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶		37 / 3
Part VIII Investments — Program Related.	'Yes' on Form 99	N/A 0, Part IV, line 11c. See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	(b) Book Value	(S) metriod of valuation, cost of one of year market value
(1)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶		
Part IX Other Assets.	N/A	A
		0, Part IV, line 11d. See Form 990, Part X, line 15
	scription	(b) Book value
(1)		
<u>(2)</u> (3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (E	3) line 15.)	▶
Part X Other Liabilities.		
Complete if the organization answered 'Yes' on F		·
(a) Description of liability (1) Federal income taxes	(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, column (B) line 25.).	. ▶	
2 Lightith, for conservation for monitions. In Dank VIII magnitude the test of the fee		

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

-	2	1	1	Λ	Page
)	J	u		u	raye

<u>Part XI </u> Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,483,834.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1.	3	1,483,834.
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		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	1,483,834.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	1,128,907.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1.	3	1,128,907.
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		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1 128 907

Part XIII Supplemental Information.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part X - FIN 48 Footnote

The Organization adopted the recognition requirements for uncertain income tax positions as required by generally accepted accounting principles, with no cumulative effect adjustment required. Income tax benefits are recognized for income tax positions taken or expected to be taken in a tax return, only when it is determined that the income tax position will more-likely-than-not be sustained upon examination by taxing authorities. The Organization believes that income tax filing

positions will be sustained upon examination and does not anticipate any adjustments BAA

Schedule D (Form 990) 2018

Part XIII | Supplemental Information (continued)

#### Part X - FIN 48 Footnote (continued)

that would result in a material adverse effect on the Organization's financial condition, results of operations, or cash flows. Accordingly, the Organization has not recorded any reserves, or related accruals for interest and penalties for uncertain income tax positions at June 30, 2019. The Organization is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

#### 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' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization California Co	Employer identification number						
Advocate Asso	68-016301	0					
Part I General Information on G							
1 Does the organization maintain records the selection criteria used to award t	he grants or assistan	ce?					Yes X No
2 Describe in Part IV the organization's pr		·					
Form 990, Part IV, line 21							
1 (a) Name and address of organization or government	<b>(b)</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 noncash assistance	(h) Purpose of grant or assistance
(1) CASA of Ventura County PO Box 1135 Camarillo, CA 93011			5,200.	0.			
(2)			3,233.				
<u>(3)</u>							
<u>(4)</u>							
(5)							
<u>(6)</u>							
<u>(7)</u>							
<u>(8)</u>							
<ul><li>2 Enter total number of section 501(c)</li><li>3 Enter total number of other organiza</li></ul>	· · · · ·	-					1

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

BAA Schedule I (Form 990) (2018)

#### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** 

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

California Court Appointed Special

Emp

2012

Employer identification number

68-0163010

2010

OMB No. 1545-0047

Open to Public Inspection

Part I Questions Regarding Compensation

			ΙY	es	No
1:	${\bf a}$ Check the appropriate box(es) if the organization provided any of the following to VII, Section A, line 1a. Complete Part III to provide any relevant information	or for a person listed on Form 990, Part n regarding these items.			
	First-class or charter travel Housing a	allowance or residence for personal use			
	Travel for companions Payments	s for business use of personal residence			
	Tax indemnification and gross-up payments Health or	social club dues or initiation fees			
	Discretionary spending account Personal	services (such as maid, chauffeur, chef)			
		all and a second fine and a second and			
	<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written preimbursement or provision of all of the expenses described above? If 'No,		b		
2	? Did the organization require substantiation prior to reimbursing or allowing trustees, and officers, including the CEO/Executive Director, regarding the	expenses incurred by all directors, items checked on line 1a?			
3	Indicate which, if any, of the following the filing organization used to establish the CEO/Executive Director. Check all that apply. Do not check any boxes for restablish compensation of the CEO/Executive Director, but explain in Part	e compensation of the organization's nethods used by a related organization to III.			
	Compensation committee Written er	mployment contract			
	Independent compensation consultant X Compens	ation survey or study			
	X Form 990 of other organizations X Approval	by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, lin organization or a related organization:	e 1a, with respect to the filing			
	a Receive a severance payment or change-of-control payment?		а		y
	<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retire		_		X
	c Participate in, or receive payment from, an equity-based compensation arra	•			X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amount				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must compl	ete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization contingent on the revenues of:	pay or accrue any compensation			
	a The organization?	5	а		Χ
	<b>b</b> Any related organization?		_		X
	If 'Yes' on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization contingent on the net earnings of:	pay or accrue any compensation			
	a The organization?		а		Χ
	<b>b</b> Any related organization?		_		X
	If 'Yes' on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organi payments not described on lines 5 and 6? If 'Yes,' describe in Part III	zation provide any nonfixed			Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursua to the initial contract exception described in Regulations section 53.4958-4	nt to a contract that was subject (a)(3)?			
	If 'Yes,' describe in Part III		_		X
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption processing 52,4059,6(a)?	edure described in Regulations			

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

Schedule J (Form 990) 2018

### 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 on 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 aren't listed on Form 990, Part VII.

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

		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Detinent	<b>(D)</b> Novetovolska	(E) Takal at	(E) Common action
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	<b>(E)</b> Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Sharon Lawrence	(i)	166,500.	0.	0.	0.	0.	166,500.	0.
1 CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
2	(ii)							
	(i)		L		L		L	
3	(ii)							
	(i)				L		L	
4	(ii)							
	(i)							
5	(ii)							
	(i)				<u> </u>			
6	(ii)							
	(i)				<u> </u>			
7	(ii)							
	(i)							
8	(ii)							
	(i) _				<b> </b>		L	
9	(ii)							
	(i) _		<b> </b>		<b> </b>			
10	(ii)							
	(i) _				<b> </b>			
11	(ii)							
40	(i) _		<b> </b>		<b></b>		<b> </b>	
12	(ii)							
12	(i) _		<b> </b>		<b></b>			
13	(ii)							
14	(i) _		<b> </b>		<b></b>		<b></b>	
14	(ii)							
15	(i) (ii)		<del> </del>		<del> </del>		<del> </del>	
15	(ii)							
16	(i) (ii)		<del> </del>		<del> </del>		<del> </del>	
16	(ii)		TEE / / 1021 10/20	//19			Calcada	I (Form 000) 2019

BAA

TEEA4102L 10/29/18

Schedule J (Form 990) 2018

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

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

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

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

Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

California Court Appointed Special Advocate Association

Employer identification number 68-0163010

- ----

#### Form 990, Part III, Line 1 - Organization Mission

Founded in 1987, the mission of California Court Appointed Special Advocate (CASA) Association is to ensure that children in the foster care system have both a voice and the services that they need for a stable future. We achieve this goal by strengthening California's network of local CASA programs and advocating for child welfare policy and practice.

#### Form 990, Part III, Line 4a - Program Service Accomplishments

California CASA Association supports the development, growth and continuation of programs that recruit and train volunteers to advocate for abused and neglected children throughout California. CASA volunteers establish stable supportive relationships with children in the foster care system, getting to know their unique history and making informed recommendations to the courts. California CASA Association improves the scope, quality and impact of the CASA network by: a) Strengthening local CASA programs with technical assistance, quality training, and resources, b) working in partnership with California Judicial Council staff to ensure that local CASA programs are in compliance with State and National Standards, c) communicating the CASA perspective and advocating for child welfare policy, and d) identifying and pursuing valuable strategic alliances that leverage and/or expand our children's resources statewide. When California CASA Association was founded, only a handful of CASA programs existed. Today, with its support and leadership, nearly every county in the state is served by a CASA program. This translates to a network of 44 CASA programs and 8,790 volunteer advocates serving over 14,150 foster children in 51 counties throughout the state.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The governing body reviews and approves the tax return.

Name of the organization California Court Appointed Special	Employer identification number
Advocate Association	68-0163010

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Compliance with the conflict of interest policy is verbally discussed at Board of Director's meetings.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Executive Board Members determine the Chief Executive Officer's compensation and conduct annual performance evaluations and compensation reviews.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The Chief Executive Officer conducts performance reviews and determines the compensation for all officers and key employees. Total compensation for the organization is approved by the entire board upon the approval of the annual budget.

#### Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

The Organization makes the Form 990 available to the public through www.guidestar.org., it's own website and upon request.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Organization makes its governing documents, conflict of interest policy, and financial statements available upon request at the local office and on its website: www.californiacasa.org.