

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2020

Department of the Treasury
Internal Revenue Service

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

A For the 2020 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION Doing business as		D Employer identification number 91-1255818
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 100 W HARRISON, NORTH TOWER, 500		E Telephone number (206) 270-0072
	City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 98119-4123		G Gross receipts \$ 13,069,446.
	F Name and address of principal officer: TARA PERRY SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶

J Website: **WWW.NATIONALCASAGAL.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1984** **M** State of legal domicile: **WA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE ASSOCIATION SUPPORTS STATE AND LOCAL CASA AND GAL PROGRAMS WHICH RECRUIT, TRAIN, DEPLOY AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	60
	6 Total number of volunteers (estimate if necessary)	6	17
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 12,760,896.	Current Year 12,425,898.
	9 Program service revenue (Part VIII, line 2g)	718,655.	594,294.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,880.	48,496.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,503,431.	13,068,688.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,769,321.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,521,462.	5,543,564.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 228,294.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,711,174.	2,276,845.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,001,957.	12,971,408.
19 Revenue less expenses. Subtract line 18 from line 12	501,474.	97,280.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 4,915,570.	End of Year 5,995,607.
	21 Total liabilities (Part X, line 26)	615,490.	1,520,421.
	22 Net assets or fund balances. Subtract line 21 from line 20	4,300,080.	4,475,186.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: <i>Charlie McNamara</i>		Date: 5/14/2021		
	Type or print name and title: CHARLIE MCNAMARA, INTERIM CFO				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	RAY HOLMDAHL	RAY HOLMDAHL	05/14/21		P00120599
Firm's name ▶ BDO USA, LLP			Firm's EIN ▶ 13-5381590		
Firm's address ▶ 601 UNION ST, STE 2300 SEATTLE, WA 98101-2345			Phone no. (206) 382-7777		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION, TOGETHER WITH ITS STATE AND LOCAL PROGRAMS, SUPPORTS AND PROMOTES COURT-APPOINTED VOLUNTEER ADVOCACY SO EVERY CHILD WHO HAS EXPERIENCED ABUSE OR NEGLECT CAN BE SAFE, HAVE A PERMANENT HOME AND THE

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 3,610,434. including grants of \$) (Revenue \$ 357,825.)
TRAINING AND CONFERENCE FEES RECEIVED FROM VOLUNTEERS ALLOWING THE ORGANIZATION TO TRAIN THE VOLUNTEERS IN PERFORMING COURT RELATED CASA DUTIES.

4b (Code:) (Expenses \$ 1,469,450. including grants of \$) (Revenue \$ 236,469.)
MEMBERSHIP DUES FROM VOLUNTEERS AND CASA PROGRAMS WHICH PERFORM COURT RELATED CASA DUTIES. THESE FUNDS ALLOW THE ORGANIZATION TO PROVIDE ADDITIONAL TRAINING AND INFORMATION TO THE MEMBERS TO ASSIST IN FURTHERING THEIR CASA ACTIVITES.

4c (Code:) (Expenses \$ 5,546,579. including grants of \$ 5,150,999.) (Revenue \$)
DEVELOPMENT AND EXPANSION OF CASA PROGRAMS UTILIZED FLOW THROUGH GRANTS. AN AVERAGE OF ONE NEW CASA PROGRAM IS STARTED EACH MONTH.

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **10,626,463.**

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
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 I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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>		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? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part 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
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 60		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a		X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ... 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966? 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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		X
If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16		X
If "Yes," complete Form 4720, Schedule O.			

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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 on 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

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

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS**
- 18** 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.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶** _____
CHARLIE MCNAMARA - (206) 774-7214
100 W HARRISON, NORTH TOWER, , NO. 500, SEATTLE, WA 98119-4123

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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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TARA PERRY CHIEF EXECUTIVE OFFICER	50.00			X			470,681.	0.	7,534.	
(2) SARAH ERNY DEPUTY CHIEF EXECUTIVE OFFICER	40.00				X		215,864.	0.	9,035.	
(3) RUSS JACOBS CHIEF LEGAL AFFAIRS OFFICER	40.00				X		172,188.	0.	9,142.	
(4) BRAD RAY SR. PERFORMANCE MEASUREMENT RESEARCH	40.00				X		169,526.	0.	7,887.	
(5) CHARLIE MCNAMARA INTERIM CHIEF FINANCAIL OFFICER	40.00			X			156,524.	0.	2,964.	
(6) PAIGE BEARD SR. STATE DEVELOPMENT OFFICER	40.00				X		146,508.	0.	1,841.	
(7) ELLA HAIRSTON QUALITY AND ACCOUNTABILITY OFFICER	40.00				X		131,004.	0.	9,538.	
(8) DR. WILLIAM BELL BOARD CHAIR	4.00	X		X			0.	0.	0.	
(9) BRITT BANKS SECRETARY	4.00	X		X			0.	0.	0.	
(10) ADAM LIFF TREASURER	4.00	X		X			0.	0.	0.	
(11) WILLIAM COLLINS BOARD IMMEDIATE PAST CHAIR	2.00	X		X			0.	0.	0.	
(12) DANIELLE MAURER INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(13) JAMES RISHWAIN INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(14) JOSEPH BANKOFF BOARD VICE CHAIR	2.00	X		X			0.	0.	0.	
(15) CHARLES BRUMBACK INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(16) DAVID TODD INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(17) LISA STUART INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LOUIS LUCIDO INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(19) MATT ISENHOWER INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(20) MARK WALKER INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(21) RITA SORONEN INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(22) SYLVIA DELLEY INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(23) DAN MICHAEL INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
(24) ERIC TOM INDIVIDUAL TRUSTEE	2.00	X					0.	0.	0.	
1b Subtotal							1,462,295.	0.	47,941.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,462,295.	0.	47,941.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **16**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MARTIN SELIG REAL ESTATE P.O. BOX 35143, SEATTLE, WA 98124	SEATTLE OFFICE SPACE RENT	234,829.
SLEVIN AND HART PC, 1625 MASSACHUSETTS AVE NW, STE. 450, WASHINGTON, DC 20036	WASHINGTON DC OFFICE SPACE RENT	129,349.
100 PEACH TREE PROPERTY LLC, 401 N MICHIGAN AVE, SUITE 1300, CHICAGO, IL	ATLANTA OFFICE SPACE RENT	100,471.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	10,652,484.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,773,414.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 10,230.				
	h Total. Add lines 1a-1f			12,425,898.			
Program Service Revenue	2 a CONFERENCE FEES	Business Code	900099	322,175.	322,175.		
	b MEMBERSHIP DUES		900099	236,469.	236,469.		
	c FLEX LEARNING FEES		611710	35,650.	35,650.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			594,294.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			15,098.		15,098.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	34,156.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	758.				
	c Gain or (loss)	7c	33,398.				
d Net gain or (loss)			33,398.		33,398.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			13,068,688.	594,294.	0.	48,496.	

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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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	5,150,999.	5,150,999.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	637,703.	495,823.	135,231.	6,649.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,303,181.	3,345,780.	912,532.	44,869.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	23,319.	18,131.	4,945.	243.
9 Other employee benefits	204,175.	158,748.	43,298.	2,129.
10 Payroll taxes	375,186.	291,712.	79,562.	3,912.
11 Fees for services (nonemployees):				
a Management	22,943.		22,943.	
b Legal				
c Accounting				
d Lobbying	15,242.		15,242.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	11,917.		11,917.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	25,300.		25,300.	
12 Advertising and promotion				
13 Office expenses	216,724.	144,889.	67,518.	4,317.
14 Information technology	34,235.	22,887.	10,666.	682.
15 Royalties				
16 Occupancy	449,947.	373,499.	58,116.	18,332.
17 Travel	56,961.	27,563.	29,398.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	14,457.		14,457.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CONTRACT SERVICES	828,233.	434,291.	251,396.	142,546.
b PRGRM. PROMO. AND OTHER	519,130.	118,382.	396,133.	4,615.
c TELEPHONE	81,633.	43,759.	37,874.	
d PRINTING	123.		123.	
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	12,971,408.	10,626,463.	2,116,651.	228,294.
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)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,461,554.	1	4,443,235.
	2 Savings and temporary cash investments	57,657.	2	94,735.
	3 Pledges and grants receivable, net	366,744.	3	358,899.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	95,241.	9	86,918.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	913,088.	11	990,534.
	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	21,286.	15	21,286.
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,915,570.	16	5,995,607.	
Liabilities	17 Accounts payable and accrued expenses	445,219.	17	545,244.
	18 Grants payable		18	
	19 Deferred revenue	170,271.	19	59,850.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	915,327.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	615,490.	26	1,520,421.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,122,741.	27	2,063,388.
	28 Net assets with donor restrictions	2,177,339.	28	2,411,798.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,300,080.	32	4,475,186.
33 Total liabilities and net assets/fund balances	4,915,570.	33	5,995,607.	

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Part 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	13,068,688.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,971,408.
3	Revenue less expenses. Subtract line 2 from line 1	3	97,280.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,300,080.
5	Net unrealized gains (losses) on investments	5	77,826.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	4,475,186.

Part XII Financial Statements and Reporting

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

Form 990 (2020)

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

2020

Open to Public Inspection

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

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (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.)
- 9 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 university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8953255.	12824118.	11862665.	12760896.	12425898.	58826832.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	8953255.	12824118.	11862665.	12760896.	12425898.	58826832.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						501,840.
6 Public support. Subtract line 5 from line 4.						58324992.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	8953255.	12824118.	11862665.	12760896.	12425898.	58826832.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	10,593.	16,665.	21,220.	17,591.	15,098.	81,167.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						58907999.
12 Gross receipts from related activities, etc. (see instructions)					12	2,963,450.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	99.01 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	97.84 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>If "Yes," explain in Part VI 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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, 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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
c 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? <i>If "Yes," provide detail in Part VI.</i>		
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, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described in line 11a above?		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

NATIONAL COURT APPOINTED SPECIAL

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2020		
a	From 2015		
b	From 2016		
c	From 2017		
d	From 2018		
e	From 2019		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016		
b	Excess from 2017		
c	Excess from 2018		
d	Excess from 2019		
e	Excess from 2020		

Schedule A (Form 990 or 990-EZ) 2020

NATIONAL COURT APPOINTED SPECIAL

Part VI

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.)

Multiple horizontal lines for supplemental information.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

**NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION**

Employer identification number

91-1255818

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	Employer identification number 91-1255818
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 10,652,484.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	Employer identification number 91-1255818
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	Employer identification number 91-1255818
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ 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 (Proxy Tax) (See separate instructions), then

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

Name of organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	Employer identification number 91-1255818
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2020**

NATIONAL COURT APPOINTED SPECIAL

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

NATIONAL COURT APPOINTED SPECIAL

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		15,242.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			15,242.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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.

PART II-B

LOBBYING EFFORTS PRIMARILY CONSIST OF CREATING AWARENESS OF THE CIRCUMSTANCES OF CHILDREN IN THE FOSTER CARE AND FAMILY COURT SYSTEMS AND ADVOCATING FOR THESE CHILDRENS' BEST INTERESTS IN THE LEGAL SYSTEM.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" 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

2020

Open to Public Inspection

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

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	386,434.	249,939.	147,503.	65,000.	
b Contributions		114,023.	112,467.	70,000.	65,000.
c Net investment earnings, gains, and losses	49,927.	44,589.	-8,202.	12,503.	
d Grants or scholarships					
e Other expenditures for facilities and programs	2,500.	19,000.			
f Administrative expenses	6,490.	3,117.	1,829.		
g End of year balance	427,371.	386,434.	249,939.	147,503.	65,000.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 83.0700 %
 - c Term endowment 16.9300 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

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

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, 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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

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

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

NATIONAL COURT APPOINTED SPECIAL
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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	13,146,514.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	77,826.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	77,826.
3	Subtract line 2e from line 1	3	13,068,688.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	13,068,688.

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	12,971,408.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	12,971,408.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	12,971,408.

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 4; Part X, 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 V, LINE 4:

THE ENDOWMENT FUND IS RESTRICTED FOR THE PURPOSE OF FUNDING SCHOLARSHIPS
FOR FOSTER CHILDREN.

**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

2020

**Open to Public
Inspection**

Name of the organization **NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION**

**Employer identification number
91-1255818**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
WASHINGTON CASA PROGRAM 704 228TH AVE NE #505 SAMMAMISH, WA 98074	84-3648148	501(C)(3)	144,022.	0.			PASS THROUGH
CASA CHILD ADVOCATES OF MONTGOMERY COUNTY - 412 W PHILLIPS ST STE 107 - CONROE, TX 77301-2664	76-0333595	501(C)(3)	109,100.	0.			PASS THROUGH
NEW MEXICO CASA ASSOCIATION 2340 ALAMO AVE SE #112 ALBUQUERQUE, NM 87106-3523	32-0574647	501(C)(3)	103,655.	0.			PASS THROUGH
CASA OF CHILDREN OF DC 220 I ST NE STE 285 WASHINGTON, DC 20002-4898	03-0472883	501(C)(3)	101,825.	0.			PASS THROUGH
NEW YORK CITY COURT APPOINTED SPECIAL ADVOCATES - 48 WALL STREET, SUITE 1100 - NEW YORK, NY 10005-2903	13-2612524	501(C)(3)	96,210.	0.			PASS THROUGH
CASA OF MARICOPA COUNTY 3131 W DURANGO ST PHOENIX, AZ 85009-6217	86-6000472	501(C)(3)	94,445.	0.			PASS THROUGH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 171.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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Schedule I (Form 990) 2020

NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION

Schedule I (Form 990)

91-1255818

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONNECTICUT CASA ASSOCIATION 100 PEARL ST FL 14 HARTFORD, CT 06103-4500	82-3686568	501(C)(3)	93,800.	0.			PASS THROUGH
CASA OF NORTHERN CONNECTICUT 1224 MILL ST., BLDG B EAST BERLIN, CT 06023-1159	82-3660654	501(C)(3)	86,609.	0.			PASS THROUGH
CASA OF NEW HAMPSHIRE, INC. 138 COOLIDGE AVENUE MANCHESTER, NH 03102-3208	02-0432242	501(C)(3)	84,000.	0.			PASS THROUGH
CASA OF SOUTHERN CONNECTICUT 157 CHURCH ST FL 19 NEW HAVEN, CT 065101	82-3707349	501(C)(3)	83,500.	0.			PASS THROUGH
THE CASA PROJECT 100 GROVE ST STE 403 WORCESTER, MA 01605-2630	04-2711865	501(C)(3)	69,223.	0.			PASS THROUGH
HEART OF MISSOURI CASA 105 EAST ASH ST, SUITE 102 COLUMBIA, MO 65203-4147	20-2408667	501(C)(3)	67,539.	0.			PASS THROUGH
NEVADA CASA ASSOCIATION 2850 W HORIZON RIDGE PKWY, SUITE 20 HENDERSON, NV 89052-4395	37-1904847	501(C)(3)	67,500.	0.			PASS THROUGH
MICHIGAN CASA INC. 660 CASCADE WEST PARKWAY STE #65 GRAND RAPIDS, MI 49546	26-4653381	501(C)(3)	67,128.	0.			PASS THROUGH
RICHLAND COUNTY CASA 1701 MAIN STREET, ROOM 407 COLUMBIA, SC 29201-2819	57-0776475	501(C)(3)	60,897.	0.			PASS THROUGH

Schedule I (Form 990)

NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLAR COUNTY CASA PROGRAM 3609 MAIN ST VANCOUVER, WA 98663-2225	91-0569882	501(C)(3)	59,266.	0.			PASS THROUGH
CASA OF LANE COUNTY 174 DEADMOND FERRY RD SPRINGFIELD, OR 97477-9405	93-1185120	501(C)(3)	57,300.	0.			PASS THROUGH
CASA OF LAKE COUNTY INC. 700 FOREST EDGE DR VERNON HILLS, IL 60061-3172	36-3916143	501(C)(3)	56,910.	0.			PASS THROUGH
CASA OF SOUTHWESTERN ILLINOIS 1801 N BELT W STE A BELLEVILLE, IL 62226-8201	37-1233728	501(C)(3)	56,561.	0.			PASS THROUGH
CASA OF MISSOULA 1018 BURLINGTON AVE STE 201 MISSOULA, MT 59801-7433	81-0482945	501(C)(3)	54,050.	0.			PASS THROUGH
CASA OF ADAMS AND BROOMFIELD COUNTIES - 11860 PECOS STREET, SUITE 2700 - WESTMINSTER, CO 80234-2740	31-1657019	501(C)(3)	53,409.	0.			PASS THROUGH
CASA OF SANTA BARBARA COUNTY 2125 SOUTH BROADWAY SUITE 106 SANTA MARIA, CA 93454-7835	33-0662734	501(C)(3)	53,100.	0.			PASS THROUGH
CHELAN/DOUGLAS COUNTY CASA/GAL PROGRAM - 431 DOUGLAS STREET - WENATCHEE, WA 98801	91-1643408	501(C)(3)	52,253.	0.			PASS THROUGH
CASA OF TULARE COUNTY 1146 N CHINOWTH ST VISALIA, CA 93291-4113	77-0105876	501(C)(3)	50,000.	0.			PASS THROUGH

Schedule I (Form 990)

NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION

Schedule I (Form 990)

91-1255818

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF CONTRA COSTA COUNTY 2151 SALVIO ST STE 295 CONCORD, CA 94520-2451	94-2897531	501(C)(3)	50,000.	0.			PASS THROUGH
BIG COUNTRY CASA 400 OAK ST STE 217 ABILENE, TX 79602-1520	47-4607273	501(C)(3)	50,000.	0.			PASS THROUGH
CASA OF CUYAHOGA COUNTY 12200 FAIRHILL ROAD, E193 CLEVELAND, OH 44120	81-1209903	501(C)(3)	50,000.	0.			PASS THROUGH
CASA KIDS PROGRAM 3888 NORTHSIDE DR STE B MACON, GA 31210-2417	58-2088199	501(C)(3)	49,500.	0.			PASS THROUGH
SUMMIT COUNTY CASA 650 DAN ST AKRON, OH 44310-3909		GOVT.	46,550.	0.			PASS THROUGH
ESSEX COUNTY CASA 430 N CANAL ST LAWRENCE, MA 01840-1246	04-2104054	501(C)(3)	44,200.	0.			PASS THROUGH
ARKANSAS STATE CASA ASSOCIATION 625 MARSHALL ST STE 2100 LITTLE ROCK, AR 72201-1061	71-0847443	501(C)(3)	42,850.	0.			PASS THROUGH
CASA FOR CHILDREN 1401 NE 68TH AVE PORTLAND, OR 97213-4957	93-0923866	501(C)(3)	42,770.	0.			PASS THROUGH
PULASKI COUNTY CASA 3001 W ROOSEVELT RD LITTLE ROCK, AR 72204-5658	71-0814325	501(C)(3)	41,900.	0.			PASS THROUGH

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA CASA ASSOCIATION 501 ELIZABETH STREET CHARLESTON, WV 25311	55-0754943	501(C)(3)	41,600.	0.			PASS THROUGH
CASA OF NORTHWEST ARKANSAS 3825 CAWOOD LN SPRINGDALE, AR 72762-5237	71-0708334	501(C)(3)	41,547.	0.			PASS THROUGH
CASA OF BRADLEY AND POLK COUNTIES 85 S OCOEE ST CLEVELAND, TN 37311-5079	27-2961555	501(C)(3)	40,994.	0.			PASS THROUGH
MONTGOMERY COUNTY JUVENILE COURT CASA PROGRAM - JUVENILE JUSTICE CENTER 380 WEST SECOND ST. - DAYTON, OH 45422-0001		GOVT.	40,980.	0.			PASS THROUGH
CASA OF THE 5TH JUDICIAL DISTRICT 1388 RUMSEY AVE CODY, WY 82414-3743	27-2137118	501(C)(3)	40,726.	0.			PASS THROUGH
BOSTON CASA 85 MERRIMAC ST STE 401 BOSTON, MA 02114-4715	04-3110775	501(C)(3)	40,150.	0.			PASS THROUGH
JACKSON COUNTY CASA 2544 HOLMES ST. KANSAS CITY, MO 64108-2719	43-1401328	501(C)(3)	39,905.	0.			PASS THROUGH
CASA OF ATLANTIC AND CAPE MAY COUNTIES - 321 SHORE RD - SOMERS POINT, NJ 08244-2600	22-3348198	501(C)(3)	39,730.	0.			PASS THROUGH
CASA CORRIDOR OF EAST TENNESSEE 107 PARK ST ATHENS, TN 37303-4255	20-8726704	501(C)(3)	39,543.	0.			PASS THROUGH

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GUARDIAN AD LITEM - DISTRICT 4 JACKSONVILLE - 521 MILL ROAD - JACKSONVILLE, NC 28540-4732	56-0847358	501(C)(3)	39,000.	0.			PASS THROUGH
CASA YOUTH ADVOCATES INC. 26 EAST FOURTH ST., 2ND FLOOR MEDIA, PA 19063-0407	23-1901080	501(C)(3)	38,500.	0.			PASS THROUGH
CASA OF THE OHIO VALLEY 608 FREDERICA STREET SUITE 100A OWENSBORO, KY 42301	61-1303511	501(C)(3)	37,526.	0.			PASS THROUGH
UTAH OFFICE OF THE GUARDIAN AD LITEM & CASA - 800 W STATE ST - FARMINGTON, UT 84025-4427	87-6000545	501(C)(3)	36,953.	0.			PASS THROUGH
CASA FOR CHILDREN, INC. PO BOX 1274 MUSKOGEE, OK 74402-1274	73-1497371	501(C)(3)	36,545.	0.			PASS THROUGH
CALIFORNIA CASA ASSOCIATION 3525 DEL MAR HEIGHTS RD. #243 SAN DIEGO, CA 92130-2122	68-0163010	501(C)(3)	36,200.	0.			PASS THROUGH
CASA OF PHILADELPHIA COUNTY 1501 CHERRY ST PHILADELPHIA, PA 19102-1403	20-0744446	501(C)(3)	35,731.	0.			PASS THROUGH
VANDERBURGH COUNTY CASA 600 SE 6TH STREET EVANSVILLE, IN 47713-1222	35-1601081	501(C)(3)	35,300.	0.			PASS THROUGH
CASA OF LARIMER COUNTY 3105 E. HARMONY ROAD FORT COLLINS, CO 80528-9545	84-1048149	501(C)(3)	35,000.	0.			PASS THROUGH

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CHILD ADVOCATES SAN ANTONIO, INC. 1956 S WW WHITE RD. SAN ANTONIO, TX 78222-1117	74-2494625	501(C)(3)	35,000.	0.			PASS THROUGH
NEW MEXICO KIDS MATTER, INC. 2340 ALAMO AVE SE STE 112 ALBUQUERQUE, NM 87106-3523	85-0424064	501(C)(3)	35,000.	0.			PASS THROUGH
CASA OF SOLA 215 E. PINHOOK RD. LAFAYETTE, LA 70501	26-3696342	501(C)(3)	34,800.	0.			PASS THROUGH
WESTERN REGIONAL CASA 1002 3RD AVENUE HUNTINGTON, WV 25717-1653	55-0663886	501(C)(3)	34,284.	0.			PASS THROUGH
CASA OF SOUTHWEST MISSOURI 1911 S. NATIONAL AVE. SUITE 404 SPRINGFIELD, MO 65804-4853	43-1524185	501(C)(3)	33,600.	0.			PASS THROUGH
CASA OF THE EASTERN PANHANDLE 336 S QUEEN ST MARTINSBURG, WV 25401-3382	32-0063080	501(C)(3)	32,800.	0.			PASS THROUGH
VOICES FOR CHILDREN, INC. 2851 MEADOW LARK DR SAN DIEGO, CA 92123-2709	95-3786047	501(C)(3)	32,418.	0.			PASS THROUGH
COLORADO CASA 1660 S ALBION ST STE 328 DENVER, CO 80222-4041	84-1257398	501(C)(3)	32,120.	0.			PASS THROUGH
SAVANNAH CHATHAM COUNTY CASA 761 WHEATON STREET SAVANNAH, GA 31401-4962	58-2058358	501(C)(3)	31,909.	0.			PASS THROUGH

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CASA OF GALVESTON COUNTY 10000 EMMETT F. LOWRY EXPRESSWAY, STE. 4000, 300B - TEXAS CITY, TX 77591-810	46-4525259	501(C)(3)	31,225.	0.			PASS THROUGH
CASA OF NOTHEAST TEXAS 1201 MAIN STREET TEXARKANA, TX 75501-1546	75-2352271	501(C)(3)	30,630.	0.			PASS THROUGH
CASA OF NATRONA COUNTY 535 W. YELLOWSTONE HWY; STE. 203 CASPER, WY 82601	83-0331392	501(C)(3)	30,000.	0.			PASS THROUGH
CASA OF THE TENTH JUDICIAL DISTRICT - 324 MAIN ST STE 215 - PEORIA, IL 61602-2334	20-1534971	501(C)(3)	29,200.	0.			PASS THROUGH
VOICES FOR CHILDREN, DBA CASA OF ST. LOUIS - 105 SOUTH CENTRAL AVE - CLAYTON, MO 63105-1772	43-1807059	501(C)(3)	28,865.	0.			PASS THROUGH
CASA OF LEXINGTON 3245 LOCH NESS DR. LEXINGTON, KY 40517-1240	61-1339185	501(C)(3)	28,400.	0.			PASS THROUGH
JACKSON COUNTY CASA 4903 TELEPHONE RD PASCAGOULA, MS 39567-1823	80-0231274	501(C)(3)	28,000.	0.			PASS THROUGH
CASA - PRINCE GEORGE'S COUNTY 6811 KENILWORTH AVE STE 402 RIVERDALE, MD 20737-1333	52-1772617	501(C)(3)	27,900.	0.			PASS THROUGH
EASTERN MONTANA CASA/GAL, INC. 2200 BOXELDER STREET SUITE 131 MILES CITY, MT 59301-1234	81-0490831	501(C)(3)	27,798.	0.			PASS THROUGH

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SEVENTH CIRCUIT CASA 1605 EVERGREEN DRIVE RAPID CITY, SD 57702	46-0402202	501(C)(3)	26,775.	0.			PASS THROUGH
DOUGLAS COUNTY CASA, INC. 1009 NEW HAMPSHIRE ST STE A&B LAWRENCE, KS 66044-3046	48-1104657	501(C)(3)	26,700.	0.			PASS THROUGH
CASA OF EL PASO 221 N KANSAS STE 1501 EL PASO, TX 79901-1400	74-1950407	501(C)(3)	26,666.	0.			PASS THROUGH
CASA OF WESTMORELAND, INC. 2 N MAIN ST GREENSBURG, PA 15601-2405	20-5046788	501(C)(3)	26,560.	0.			PASS THROUGH
CASA OF NASHVILLE/DAVIDSON COUNTY 340 21ST AVE N NASHVILLE, TN 37203	62-1203459	501(C)(3)	26,523.	0.			PASS THROUGH
IMPERIAL COUNTY & QUECHAN TRIBAL CASA - 229 S 8TH ST STE B - EL CENTRO, CA 92243-2902	33-0632963	501(C)(3)	25,700.	0.			PASS THROUGH
ESSEX COUNTY CASA, INC. 212 WASHINGTON ST RM 912 NEWARK, NJ 07102-2904	22-2745450	501(C)(3)	25,600.	0.			PASS THROUGH
UMCHS, INC. 110 NE 4TH ST HERMISTON, OR 97838-1861	93-0937286	501(C)(3)	25,337.	0.			PASS THROUGH
CASA OF HILL COUNTY, INC. 2229 5TH AVE STE 135 HAVRE, MT 59501-5217	81-0544576	501(C)(3)	25,000.	0.			PASS THROUGH

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CASS ELIAS MCCARTER GAL PROGRAM 1205 PENDLETON ST RM 446-A COLUMBIA, SC 29201-3756		GOVT.	24,185.	0.			PASS THROUGH
CASA OF BROWN COUNTY, INC. 414 E WALNUT ST STE 170 GREEN BAY, WI 54301-5017	20-0476117	501(C)(3)	23,968.	0.			PASS THROUGH
CASA OF THE 2ND JUDICIAL DISTRICT 101 SOUTH CHURCH STREET, SUITE 303 JONESBORO, AR 72401-2863	71-0776253	501(C)(3)	23,400.	0.			PASS THROUGH
FIRST JUDICIAL DISTRICT CASA PROGRAM - 1417 N 4TH ST - COEUR D'ALENE, ID 83814-3310	82-0458229	501(C)(3)	23,340.	0.			PASS THROUGH
CASA OF SOUTHERN MARYLAND 6100 RADIO STATION RD. LA PLATA, MD 20646-2984	52-1631026	501(C)(3)	23,268.	0.			PASS THROUGH
CASA OF SOUTH CENTRAL MISSOURI 406 N MAIN, SUITE A ROLLA, MO 65401	20-2021790	501(C)(3)	23,150.	0.			PASS THROUGH
CASA OF MCHENRY COUNTY 630 N. IL ROUTE 31 SUITE 101 CRYSTAL LAKE, IL 60012	20-1387762	501(C)(3)	23,100.	0.			PASS THROUGH
FIRST JUDICIAL DISTRICT CASA ASSOCIATION - 100 S 5TH ST - LEAVENWORTH, KS 66048-2605	48-1136125	501(C)(3)	23,000.	0.			PASS THROUGH
EDDY COUNTY CASA 118 W MERMOD ST CARLSBAD, NM 88220-6202	85-0380668	501(C)(3)	22,900.	0.			PASS THROUGH

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MESILLA VALLEY CASA, INC. 102 WYATT DRIVE LAS CRUCES, NM 88005-2927	85-0414608	501(C)(3)	22,600.	0.			PASS THROUGH
DALLAS CASA 2757 SWISS AVE DALLAS, TX 75204-5954	75-1866204	501(C)(3)	22,500.	0.			PASS THROUGH
CASA OF LAFAYETTE COUNTY 1107 JEFFERSON AVENUE SECOND FLOOR OXFORD, MS 38655-0802	82-2847040	501(C)(3)	22,300.	0.			PASS THROUGH
TENNESSEE CASA ASSOCIATION 745 S. CHURCH ST., STE 401 MURFREESBORO, TN 37130-4962	58-1913593	501(C)(3)	22,167.	0.			PASS THROUGH
HENRICO COUNTY CASA 3001 HUNGARY SPRING RD STE A RICHMOND, VA 23228-2428	54-1710746	501(C)(3)	21,600.	0.			PASS THROUGH
CASA OF MORRIS AND SUSSEX COUNTIES, INC. - 18 CATTANO AVE - MORRISTOWN, NJ 07960-6846	22-3123157	501(C)(3)	21,300.	0.			PASS THROUGH
CASA OF THE PIKES PEAK REGION, INC. - 418 S. WEBER STREET - COLORADO SPRINGS, CO 80903-2127	84-1115548	501(C)(3)	21,200.	0.			PASS THROUGH
VERMONT GUARDIAN ADLITEM PROGRAM 109 STATE STREET MONTPELIER, VT 05609-0002	62-1278520	501(C)(3)	20,805.	0.			PASS THROUGH
ORANGE COUNTY CASA 1 COURT STREET PAOLI, IN 47454-1399		GOVT.	20,300.	0.			PASS THROUGH

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SETHRA CASA 312 RESOURCE ROAD DUNLAP, TN 37327-3342	62-0926520	501(C)(3)	19,758.	0.			PASS THROUGH
CASA OF COOK COUNTY 1100 S. HAMILTON AVE, 8- WEST CHICAGO, IL 60612-4207	36-4461307	501(C)(3)	19,673.	0.			PASS THROUGH
CASA OF KERN COUNTY 1717 COLUMBUS ST BAKERSFIELD, CA 93305-2301	77-0344298	501(C)(3)	19,492.	0.			PASS THROUGH
CASA OF THE 36TH JUDICIAL CIRCUIT 644 CHARLES ST POPLAR BLUFF, MO 63901-5202	43-1821718	501(C)(3)	19,253.	0.			PASS THROUGH
CASA MONROE 301 COLLEGE STREET N MADISONVILLE, TN 37354-0929	32-0204451	501(C)(3)	18,900.	0.			PASS THROUGH
CASA OF JEFFERSON COUNTY 120 2ND CT. N. BIRMINGHAM, AL 35204-4718	63-1201369	501(C)(3)	18,000.	0.			PASS THROUGH
ONODAGA CASA 1603 COURT STREET SYRACUSE, NY 13208	15-0532247	501(C)(3)	17,821.	0.			PASS THROUGH
CASA GREAT LAKES BAY REGION 1311 N MICHIGAN AVE SAGINAW, MI 48602-4733	38-2480726	501(C)(3)	17,361.	0.			PASS THROUGH
CASA OF SAN JOAQUIN COUNTY 127 N. SUTTER STREET STOCKTON, CA 95202-2117	94-2497046	501(C)(3)	16,500.	0.			PASS THROUGH

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CASA ADVOCATES OF FORT BEND 5403 AVENUE N ROSENBERG, TX 77471-5644	76-0337426	501(C)(3)	16,500.	0.			PASS THROUGH
CASA DELAWARE 6 WEST MARKET STREET SUITE 1 GEORGETOWN, DE 19947-1484	51-6333279	501(C)(3)	15,440.	0.			PASS THROUGH
CASA OF TRAVIS COUNTY, INC. 7600 CHEVY CHASE DR, STE 200 AUSTIN, TX 78752-1554	74-2369123	501(C)(3)	14,740.	0.			PASS THROUGH
CASA OF THE RIVER REGION 982 EASTERN PKWY STE 9 LOUISVILLE, KY 40217-1566	61-1066568	501(C)(3)	14,700.	0.			PASS THROUGH
DUBUQUE/LANSING CASA 601 MAIN ST. LANSING, IA 52151-9685	42-6004508	501(C)(3)	14,700.	0.			PASS THROUGH
CASA OF THE 16TH JDC 121 W. PERSHING STREET, SUITE 226 NEW IBERIA, LA 70562-0721	26-3382183	501(C)(3)	14,500.	0.			PASS THROUGH
CASA OF THE 5TH JUDICIAL DISTRICT PO BOX 1213 RUSSELLVILLE, AR 72811-1213	94-3419253	501(C)(3)	14,400.	0.			PASS THROUGH
ALEXANDRIA/ARLINGTON COUNTY CASA PROGRAM - 205 S WHITING ST STE 205 - ALEXANDRIA, VA 22304-3632	54-1473693	501(C)(3)	14,400.	0.			PASS THROUGH
JUNEAU CASA P.O. BOX 110225 JUNEAU, AK 99811-0225		GOVT.	14,323.	0.			PASS THROUGH

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CASA OF THE SAMBINE NECHES REGION 2120 GLORIA DR ORANGE, TX 77630-4603	76-0414882	501(C)(3)	14,050.	0.			PASS THROUGH
OKMULGEE COUNTY/CREEK NATION CASA PO BOX 73 OKMULGEE, OK 74447-0073	73-1332643	501(C)(3)	14,000.	0.			PASS THROUGH
CASA OF SOUTHWEST OKLAHOMA INC. 601 SW C AVENUE, STE 101 LAWTON, OK 73501-4334	73-1301658	501(C)(3)	13,929.	0.			PASS THROUGH
CASA OF BALTIMORE 4 S. FREDERICK ST. BALTIMORE, MD 21203-3004	52-1905072	501(C)(3)	13,900.	0.			PASS THROUGH
CASA OF CLACKAMAS COUNTY 421 HIGH ST STE 108 OREGON CITY, OR 97045-2249	93-1105205	501(C)(3)	13,892.	0.			PASS THROUGH
OREGON CASA NETWORK 1663 NW FIELDS ST BEND, OR 97703	45-2657743	501(C)(3)	13,760.	0.			PASS THROUGH
NORFOLK CASA, INC. 150 ST. PAUL'S BLVD 5TH FLOOR NORFOLK, VA 23510-2747	45-3304326	501(C)(3)	13,674.	0.			PASS THROUGH
CASA OF CENTRAL TEXAS, INC. 1619 COMMON ST STE 301 NEW BRAUNFELS, TX 78130-3455	74-2403373	501(C)(3)	13,551.	0.			PASS THROUGH
CASA OF CENTRAL OREGON 1029 NW 14TH ST STE 100 BEND, OR 97703-2189	93-1062982	501(C)(3)	13,010.	0.			PASS THROUGH

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PARACHUTE: BUTLER COUNTY CASA 284 N FAIR AVE HAMILTON, OH 45011-4222	31-1230170	501(C)(3)	12,900.	0.			PASS THROUGH
VALLEY CASA 515 E DAHLIA AVE, SUITE 130 PALMER, AK 99645-6478		GOVT.	12,800.	0.			PASS THROUGH
MASSACHUSETTS CASA 867 BOYLSTON STREET, 5TH FLOOR BOSTON, MA 02116-2774	82-3536706	501(C)(3)	12,800.	0.			PASS THROUGH
FIRST CIRCUIT CASA PROGRAM 115 E 11TH AVE MITCHELL, SD 57301-2651	46-0462671	501(C)(3)	12,700.	0.			PASS THROUGH
ANNE ARUNDEL COUNTY CASA, INC. 8 CHURCH CIR STE H-103 ANNAPOLIS, MD 21401-1934	52-1885500	501(C)(3)	12,600.	0.			PASS THROUGH
CASA OF LINN COUNTY, INC. 2730 PACIFIC BLVD. SE, #201 ALBANY, OR 97321-0031	93-0953615	501(C)(3)	12,600.	0.			PASS THROUGH
CASA OF THE SOUTH PLAINS, INC. 1215 AVENUE J STE 301 LUBBOCK, TX 79401-4019	75-2482631	501(C)(3)	12,600.	0.			PASS THROUGH
CASA FO CHILDREN 1224 CHAPLINE STREET WHEELING, WV 26003-3339	27-0906338	501(C)(3)	12,600.	0.			PASS THROUGH
CHILD ADVOCATES OF SAN BERNADINO COUNTY - 1027 SANTO ANTONIO DRIVE, SUITE A - COLTON, CA 92324-3926	33-0362613	501(C)(3)	12,500.	0.			PASS THROUGH

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WISCONSIN CASA ASSOCIATION 2701 LARSEN ROAD SUITE BA230 GREEN BAY, WI 54307-1412	39-1974356	501(C)(3)	11,970.	0.			PASS THROUGH
CASA OF EAST WISCONSIN 814 WASHINGTON STREET, STUDIO 1 MANITOWOC, WI 54220	83-2387527	501(C)(3)	11,900.	0.			PASS THROUGH
CASA OF HANCOCK COUNTY 644 DUNBAR AVENUE BAY ST. LOUIS, MS 39520	27-0278390	501(C)(3)	11,690.	0.			PASS THROUGH
KING COUNTY DEPENDENCY CASA 1211 E ALDER STREET, STE. 4100 SEATTLE, WA 98122-5574		GOVT.	11,628.	0.			PASS THROUGH
FRANKLIN COUNTY CASA, INC. 301 E STATE ST UNION, MO 63084-1643	20-4075961	501(C)(3)	11,400.	0.			PASS THROUGH
PASSAIC COUNTY CASA 415 HAMBURG TPKE # D2 WAYNE, NJ 07470-2129	20-8456398	501(C)(3)	11,100.	0.			PASS THROUGH
NORTHERN HILLS AREA CASA PROGRAM 741 N 5TH ST SPEARFISH, SD 57783-2048	46-0399483	501(C)(3)	11,045.	0.			PASS THROUGH
FRANKLIN/HAMPSHIRE CASA PROGRAM 245 RUSSELL ST STE 14 HADLEY, MA 01035-9001	22-2952288	501(C)(3)	10,800.	0.			PASS THROUGH
PENNSYLVANIA CASA ASSOCIATION 2080 LINGLESTOWN ROAD HARRISBURG, PA 17110	23-2954302	501(C)(3)	10,250.	0.			PASS THROUGH

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF GREENE COUNTY 52 S CHURCH STREET WAYNESBURG, PA 15370-1832	35-2628402	501(C)(3)	10,100.	0.			PASS THROUGH
CASA OF SOUTHWEST MICHIGAN 38 W. WALL STREET BENTON HARBOR, MI 49022	83-3301571	501(C)(3)	10,061.	0.			PASS THROUGH
CAMBRIA AND SOMERSET COUNTY CASA 111 MARKET ST JOHNSTOWN, PA 15901-1608	25-0984601	501(C)(3)	10,000.	0.			PASS THROUGH
HARRISON COUNTY CASA PROGRAM 215 S. THIRD STREET, SUITE 1102 CLARKSBURG, WV 26301	55-0784578	501(C)(3)	10,000.	0.			PASS THROUGH
CASA OF UNION COUNTY 1143-45 EAST JERSEY ST 2ND FLOOR ELIZABETH, NJ 07201	20-2603930	501(C)(3)	9,900.	0.			PASS THROUGH
CASA FOR KIDS 382 WEST CHESTNUT STREET SUITE 108B WASHINGTON, PA 15301-4713	47-0849282	501(C)(3)	9,883.	0.			PASS THROUGH
OHIO CASA/GAL ASSOCIATION 150 E MOUND ST STE 210 COLUMBUS, OH 43215-5429	31-1380388	501(C)(3)	9,000.	0.			PASS THROUGH
CASA OF KINGS COUNTY 101 N IRWIN ST STE 110B HANFORD, CA 93230-4579	46-2896299	501(C)(3)	9,000.	0.			PASS THROUGH
LOUISIANA CASA ASSOCIATION 1120 GOVERNMENT ST BLDG I BATON ROUGE, LA 70802	72-1265057	501(C)(3)	8,703.	0.			PASS THROUGH

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF DOUGLAS COUNTY 1038 BUCKEYE ROAD MINDEN, NV 89423-0218		GOVT.	8,650.	0.			PASS THROUGH
CASA NEW ORLEANS 2725 SOUTH BROAD NEW ORLEANS, LA 70125-1939	72-1054889	501(C)(3)	8,400.	0.			PASS THROUGH
CASA OF MENOMINEE COUNTY 601 10TH AVE. MENOMINEE, MI 49858-0456	30-0457838	501(C)(3)	8,385.	0.			PASS THROUGH
CASA OF ST. LANDRY-EVANGELINE, INC. - 421 N MAIN ST - OPELOUSAS, LA 70570-6203	26-3084903	501(C)(3)	8,250.	0.			PASS THROUGH
SACRAMENTO CASA 301 BICENTENNIAL CIRCLE, SUITE 220 SACRAMENTO, CA 95827-8383	68-0257139	501(C)(3)	8,249.	0.			PASS THROUGH
LUCAS COUNTY JUVENILE COURT CASA/GAL PROGRAM - 1801 SPIELBUSCH AVE - TOLEDO, OH 43604-5333	34-1626339	501(C)(3)	7,725.	0.			PASS THROUGH
IOWA CASA PROGRAM 321 E 12TH ST FL 4 DES MOINES, IA 50319-1002	42-6004508	501(C)(3)	7,490.	0.			PASS THROUGH
CASA OF YELLOWSTONE COUNTY 1201 GRAND AVE, SUITE 5 BILLINGS, MT 59103-0688	48-1301287	501(C)(3)	7,350.	0.			PASS THROUGH
CASA OF THE FOX CITIES, INC. 1500 N CASALOMA DR STE 200 APPLETON, WI 54913-8219	46-0740362	501(C)(3)	7,200.	0.			PASS THROUGH

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF EAST TENNESSEE 5410 HOMBERG DRIVE SUITE 29A KNOXVILLE, TN 37919	62-1278520	501(C)(3)	7,187.	0.			PASS THROUGH
LACKAWANNA COUNTY CASA 825 JEFFERSON AVE SCRANTON, PA 18501	24-0829843	501(C)(3)	6,800.	0.			PASS THROUGH
CASA OF BERKS COUNTY 845 PARK ROAD, SUITE 307 WYOMISSING, PA 19610-1342	47-3440847	501(C)(3)	6,600.	0.			PASS THROUGH
CASA FOR CHILDREN OF KLAMATH COUNTY - 731 MAIN ST # 202 - KLAMATH FALLS, OR 97601-6009	93-1261640	501(C)(3)	6,400.	0.			PASS THROUGH
CASA OF PIMA COUNTY 2225 E AJO WAY TUCSON, AZ 85713-6201	86-6000543	501(C)(3)	6,150.	0.			PASS THROUGH
CASA OF SCOTT COUNTY, INC. 36 FOREST AVENUE SCOTTSBURG, IN 47170-1122	45-5183803	501(C)(3)	5,950.	0.			PASS THROUGH
MISSOURI CASA ASSOCIATION 1000 W NIFONG BLVD BLDG 4 STE 201D COLUMBIA, MO 65203-5615	43-1718389	501(C)(3)	5,892.	0.			PASS THROUGH
CENTRAL GEORGIA CASA 3888 NORTHSIDE DR STE B MACON, GA 31210-2417	58-2553014	501(C)(3)	5,810.	0.			PASS THROUGH
DANE COUNTY COURT APPOINTED SPECIAL ADVOCATES - 2445 DARWIN RD, STE 15 - MADISON, WI 53704-3116	51-0211908	501(C)(3)	5,810.	0.			PASS THROUGH

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF FRANKLIN & HAMILTON COUNTIES - 903 W. WASHINGTON STREET, SUITE 3 - BENTON, IL 62812-0924	37-1375131	501(C)(3)	5,533.	0.			PASS THROUGH
CASA OF DEEP EAST TEXAS 411 EAST HOSPITAL NACOGDOCHES, TX 75961	20-5196671	501(C)(3)	5,078.	0.			PASS THROUGH
CARSON CITY CASA, INC. 1539 E 5TH STREET CARSON CITY, NV 89701-5023	31-1624090	501(C)(3)	25,400.	0.			PASS THROUGH

NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INCLUDE THE FOLLOWING:

PROGRAM SITES VISITED BY STAFF FOR GRANT REVIEW, REVIEW OF SELECTED GRANT

EXPENDITURES BY STAFF AT HOME OFFICE, AND TRACKING MONTHLY EXPENDITURE

AMOUNTS FOR ALL GRANTEEES REPORTED VIA WEBSITE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

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

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? **2**

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- 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 pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- 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 organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

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

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

Schedule J (Form 990) 2020

NATIONAL COURT APPOINTED SPECIAL
ADVOCATE ASSOCIATION

91-1255818

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TARA PERRY CHIEF EXECUTIVE OFFICER	(i)	470,681.	0.	0.	0.	7,534.	478,215.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SARAH ERNY DEPUTY CHIEF EXECUTIVE OFFICER	(i)	215,864.	0.	0.	0.	9,035.	224,899.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RUSS JACOBS CHIEF LEGAL AFFAIRS OFFICER	(i)	172,188.	0.	0.	0.	9,142.	181,330.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BRAD RAY SR. PERFORMANCE MEASUREMENT RESEARCH	(i)	169,526.	0.	0.	0.	7,887.	177,413.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CHARLIE MCNAMARA INTERIM CHIEF FINANCAIL OFFICER	(i)	156,524.	0.	0.	0.	2,964.	159,488.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization	NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	Employer identification number 91-1255818
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SUPERVISE VOLUNTEERS TO ADVOCATE FOR ABUSED OR NEGLECTED CHILDREN.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OPPORTUNITY TO THRIVE.

FORM 990, PART VI, SECTION A, LINE 6:

THE ASSOCIATION HAS 950 PROGRAM MEMBERS.

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

THE ORGANIZATION'S CEO AND CFO PARTICIPATE IN PREPARING AND REVIEWING THE
990. IT IS THEN REVIEWED BY THE AUDIT & FINANCE COMMITTEE. IT IS REVIEWED
AND APPROVED BY THE BOARD OF TRUSTEES PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL EMPLOYEES AND BOARD MEMBERS SIGN A CONFLICT OF INTEREST POLICY.
POTENTIAL CONFLICTS ARE REVIEWED BY BOARD PRESIDENT AND CEO, THEN DISCLOSED
TO BOARD MEMBERS. THE BOARD DETERMINES THE APPROPRIATE ACTIONS FOR ANY
CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD EXECUTIVE COMMITTEE REVIEWS AND APPROVES THE CEO'S COMPENSATION
ANNUALLY.

ALL EMPLOYEE SALARIES ARE DETERMINED BY THE CEO AND HUMAN RESOURCES
DEPARTMENT. THE PROCESS INCLUDES THE JOB RESPONSIBILITIES, THE EMPLOYEE'S

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION	Employer identification number 91-1255818
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EDUCATION AND EXPERIENCE, AND A COMPARISON TO SIMILAR POSITIONS AT
 COMPARABLE ORGANIZATIONS. THE COMPENSATION FOR ALL OFFICERS AND KEY
 EMPLOYEES WAS REVIEWED IN 2020.

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

FORM 990, PART VI, SECTION C, LINE 19:
 MOST RECENT AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO DOWNLOAD FROM
 ORGANIZATION'S WEBSITE WITHOUT RESTRICTIONS. OTHER GOVERNING DOCUMENTS
 INCLUDING CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE PUBLIC.