



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

**Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052  
**2009**

For calendar year 2009, or tax year beginning 01-01-2009 , and ending 12-31-2009

G

Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return











☐ Amended return

☐ Address change

☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation Casey Family Programs		A Employer identification number 91-0793881	
	Number and street (or P O box number if mail is not delivered to street address) 1300 Dexter Ave North		Room/suite	B Telephone number (see page 10 of the instructions) (206) 282-7300
	City or town, state, and ZIP code Seattle, WA 98109		C If exemption application is pending, check here <input type="checkbox"/>	
			D 1. Foreign organizations, check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation				
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 1,935,207,121		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis.)		
E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>				
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>				

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	4,236,199			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	3 Interest on savings and temporary cash investments	187,498	187,498	187,498	
	4 Dividends and interest from securities. . . . .	35,319,396	41,634,673	41,634,673	
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-283,575,484			
	b Gross sales price for all assets on line 6a 2,409,409,715				
	7 Capital gain net income (from Part IV, line 2) . . . .				
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold . . . .				
Operating and Administrative Expenses	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	-3,762,897	165,410	225,992	
	12 Total. Add lines 1 through 11 . . . . .	-247,595,288	41,987,581	42,048,163	
	13 Compensation of officers, directors, trustees, etc	1,539,541	146,165	146,165	1,393,376
	14 Other employee salaries and wages . . . . .	38,293,752	1,619,128	1,619,128	36,649,418
	15 Pension plans, employee benefits . . . . .	11,991,094	272,061	272,061	11,632,200
	16a Legal fees (attach schedule) . . . . .	502,143	96,637	96,637	405,506
	b Accounting fees (attach schedule) . . . . .	180,807	21,302	21,302	159,505
	c Other professional fees (attach schedule) . . . .	6,861,570	4,405,811	4,405,811	2,455,759
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see page 14 of the instructions)	71,891	254,344	254,344	71,891
	19 Depreciation (attach schedule) and depletion . . .	2,195,728			
	20 Occupancy . . . . .	4,241,769			4,137,171
	21 Travel, conferences, and meetings . . . . .	2,838,368	26,204	26,204	2,812,164
	22 Printing and publications . . . . .	267,331			267,331
	23 Other expenses (attach schedule) . . . . .	56,157,147	6,867,874	6,927,609	59,822,034
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	125,141,141	13,709,526	13,769,261	119,806,355
	25 Contributions, gifts, grants paid . . . . .	608,170			678,170
	26 Total expenses and disbursements. Add lines 24 and 25	125,749,311	13,709,526	13,769,261	120,484,525
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-373,344,599			
	b Net investment income (if negative, enter -0-)		28,278,055		
	c Adjusted net income (if negative, enter -0-)			28,278,902	

Part II		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .		-1,013,423	165,028	165,028
	2	Savings and temporary cash investments . . . . .		46,225,577	79,143,304	79,316,278
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5	Grants receivable . . . . .				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .				
	7	Other notes and loans receivable (attach schedule) ▶ _____ 0 Less allowance for doubtful accounts ▶ _____		1,684	0	0
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .		1,233,650	783,210	783,210
	10a	Investments—U S and state government obligations (attach schedule)		180,246,377	 105,231,064	106,330,806
	b	Investments—corporate stock (attach schedule) . . . . .		1,759,507,357	 1,206,977,505	1,163,617,976
	c	Investments—corporate bonds (attach schedule) . . . . .		268,610,615	 305,629,214	316,422,990
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12	Investments—mortgage loans . . . . .				
	13	Investments—other (attach schedule) . . . . .		141,348,877	 323,805,764	244,127,286
	14	Land, buildings, and equipment basis ▶ _____ 40,048,369 Less accumulated depreciation (attach schedule) ▶ _____ 14,882,913		27,080,500	 25,165,456	21,225,102
15	Other assets (describe ▶ _____)		4,811,618	 3,218,445	 3,218,445	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		2,428,052,832	2,050,118,990	1,935,207,121	
Liabilities	17	Accounts payable and accrued expenses . . . . .		16,972,463	12,903,229	
	18	Grants payable . . . . .				
	19	Deferred revenue . . . . .				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule) . . . . .				
	22	Other liabilities (describe ▶ _____)		6,433,332	 5,913,323	
	23	Total liabilities (add lines 17 through 22) . . . . .		23,405,795	18,816,552	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .		2,404,647,037	2,031,302,438	
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
		Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .				
	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see page 17 of the instructions) . . . . .		2,404,647,037	2,031,302,438	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .		2,428,052,832	2,050,118,990	

Part III		Analysis of Changes in Net Assets or Fund Balances	
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1	2,404,647,037
2	Enter amount from Part I, line 27a . . . . .	2	- 373,344,599
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	2,031,302,438
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	2,031,302,438

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-277,065,992
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	-37,939,322

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No

If “Yes,” the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

2	Total of line 1, column (d). . . . .	2	
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .	3	
4	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5. . . . .	4	
5	Multiply line 4 by line 3. . . . .	5	
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	
7	Add lines 5 and 6. . . . .	7	
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	








If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)		
1aExempt operating foundations described in section 4940(d)(2), check here <input checked="" type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter <u>1986-03-18</u> (attach copy of letter if necessary—see instructions)		
bDomestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1N/A
cAll other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2
3Add lines 1 and 2. . . . .		30
4Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4
5Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- . . . . .		50
6Credits/Payments		
a2009 estimated tax payments and 2008 overpayment credited to 2009	6a	
bExempt foreign organizations—tax withheld at source . . . . .	6b	
cTax paid with application for extension of time to file (Form 8868)	6c	
dBackup withholding erroneously withheld . . . . .	6d	
7Total credits and payments Add lines 6a through 6d. . . . .		70
8Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8
9Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		90
10Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10
11Enter the amount of line 10 to be Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		11

Part VII-AStatements Regarding Activities			
1aDuring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? <input checked="" type="checkbox"/> . . . . .			YesNo
bDid it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		1a	No
cDid the foundation file Form 1120-POL for this year?. . . . .		1b	No
dEnter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ (2) On foundation managers <input type="checkbox"/> \$		1c	No
eEnter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$			
2Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.		2	No
3Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes <input checked="" type="checkbox"/> . . . . .		3	No
4aDid the foundation have unrelated business gross income of \$1,000 or more during the year?. . . . .		4a	No
bIf "Yes," has it filed a tax return on Form 990-T for this year?. . . . .		4b	
5Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T. <input checked="" type="checkbox"/>		5	No
6Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .		6	Yes
7Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Yes
8aEnter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> See Additional Data Table			
bIf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8b	Yes
9Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV . . . . .		9	Yes
10Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	No
























Part VII-A

Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address  www.casey.org	13	Yes	
14	The books are in care of  CASEY FAMILY PROGRAMS Telephone no  (206) 282-7300 Located at  1300 DEXTER AVE N FLOOR 300 SEATTLE WA ZIP+4  981093542			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here  <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.		15	

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes  No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?.  Yes  No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes  No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes  No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?.  Yes  No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ).  Yes  No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?.  <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. 	1b		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?. 	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?.  Yes  No If "Yes," list the years  20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions ). 	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?.  Yes  No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.</i> ). 	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☒ Yes ☐ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?

Organizations relying on a current notice regarding disaster assistance check here.

☒

5b

No

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

7b

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOSEPH A BOATENG 1300 DEXTER AVE N FLOOR 300 SEATTLE, WA 98109	CHIEF INVESTMENT OFF 40 0	773,954	114,900	0
CAROL ANN DESANTIS 1300 DEXTER AVE N FLOOR 300 SEATTLE, WA 98109	EVP COMMUNICATIONS 40 0	414,927	31,500	0
DAVID B SANDERS 1300 DEXTER AVE N FLOOR 300 SEATTLE, WA 98109	EVP SYSTEMS IMPROVME 40 0	279,568	50,915	0
DAVID A DANIELSON 1300 DEXTER AVE N FLOOR 300 SEATTLE, WA 98109	EVP ADMIN & CFO 40 0	263,213	48,488	0
DAVID A BERNS 1300 DEXTER AVE N FLOOR 300 SEATTLE, WA 98109	EVP CHILD FAMILY SER 40 0	262,488	48,535	0
Total number of other employees paid over \$50,000.				373

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
BNY-MELLON	INVESTMENT CUSTODIAN	652,985
ONE WALL STREET 32 FLOOR NEW YORK, NY 10277		
ARBOR CAPITAL	INVESTMENT MANAGER	622,514
100 CORPORATE PARKWAY SUITE 136 AMHERST, NY 14226		
PIMCO	INVESTMENT MANAGER	574,952
PO BOX 512129 LOS ANGELES, CA 90051		
BAILLIE GIFFORD	INVESTMENT MANAGER	540,449
757 THIRD AVENUE 17TH FLOOR NEW YORK, NY 10017		
STOEL RIVES LLP	legal	454,256
600 UNIVERSITY ST SUITE 3600 SEATTLE, WA 98101		
Total number of others receiving over \$50,000 for professional services. . . . .		23

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1CASEY FAMILY PROGRAMS WORKS WITH FOSTER, KINSHIP, AND ADOPTIVE PARENTS TO PROVIDE SAFE AND LOVING HOMES FOR CHILDREN IN ITS DIRECT CARE THE FOUNDATION PROVIDES (CONT)	120,484,525
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3. . . . .	



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	1,711,714,266
b	Average of monthly cash balances. . . . .	1b	41,361,158
c	Fair market value of all other assets (see page 24 of the instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	1,753,075,424
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	1,753,075,424
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	4	26,296,131
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,726,779,293
6	Minimum investment return. Enter 5% of line 5. . . . .	6	86,338,965

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	
2a	Tax on investment income for 2009 from Part VI, line 5. . . . .	2a	
b	Income tax for 2009 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	
6	Deduction from distributable amount (see page 25 of the instructions). . . . .	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	

Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	120,484,525
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	538,925
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	0
b	Cash distribution test (attach the required schedule). . . . .	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	121,023,450
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions). . . . .	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	121,023,450
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI, line 7			
2	Undistributed income, if any, as of the end of 2008			
a	Enter amount for 2008 only. . . . .			
b	Total for prior years 2007 , 2006 , 2005			
3	Excess distributions carryover, if any, to 2009			
a	From 2004. . . . .			
b	From 2005. . . . .			
c	From 2006. . . . .			
d	From 2007. . . . .			
e	From 2008. . . . .			
f	Total of lines 3a through e. . . . .			
4	Qualifying distributions for 2009 from Part XII, line 4 ➤ \$ _____			
a	Applied to 2008, but not more than line 2a 0			
b	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			
c	Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .			
d	Applied to 2009 distributable amount. . . . .			
e	Remaining amount distributed out of corpus 0			
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5 0			
b	Prior years' undistributed income Subtract line 4b from line 2b. . . . .			
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .			
d	Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions . . .			
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions . . . . . 0			
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 . . . . . 0			
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions). . . . .			
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions). . . . .			
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a . . . . . 0			
10	Analysis of line 9			
a	Excess from 2005. . . . .			
b	Excess from 2006. . . . .			
c	Excess from 2007. . . . .			
d	Excess from 2008. . . . .			
e	Excess from 2009. . . . . 0			

Part XIVPrivate Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling.

1972-05-25

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☒ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2009	(b) 2008	(c) 2007	(d) 2006	
		28,278,902	67,412,550	101,168,828	115,115,307	311,975,587
b	85% of line 2a . . . . .	24,037,067	57,300,668	85,993,504	97,848,011	265,179,250
c	Qualifying distributions from Part XII, line 4 for each year listed . . . . .	121,023,450	133,680,141	117,292,008	96,083,611	468,079,210
d	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .	678,170	2,304,282	2,971,742	7,792,662	13,746,856
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	120,345,280	131,375,859	114,320,266	88,290,949	454,332,354
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets . . . . .					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .	57,559,310	73,830,745	84,087,207	76,743,538	292,220,800
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

NONE

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	678,170
b Approved for future payment Coalition on Human Needs 1776 Massachusetts Ave NE Washington, DC 20036	N/A	509(a)(1)	To support general expenses of organization	2,500
California Youth Connection 604 Mission Street San Francisco, CA 94105	n/a	509(a)(1)	To support training of young people in care and former foster youth to effectively advocate for improved services and outcomes	7,500
Total . . . . .			3b	10,000

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2009)

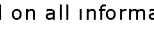





<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of			
	<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
	<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b>	Other transactions			
	<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
	<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
	<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
	<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
	<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
	<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge				
 Signature of officer or trustee		2010-11-10 Date	 Title	
<b>Paid Preparer's Use Only</b>	Preparer's Signature 	Date	Check if self-employed 	Preparer's identifying number (see <b>Signature</b> on page 30 of the instructions)
	Firm's name (or yours if self-employed), address, and ZIP code 	ERNST & YOUNG LLP US 111 MONUMENT CIRCLE SUITE 2600 INDIANAPOLIS, IN 46204		EIN 
				Phone no (317) 681-7445

Schedule B

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

Department of the Treasury  
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

<b>Name of organization</b> Casey Family Programs	<b>Employer identification number</b> 91-0793881
--	---

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

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

General Rule—

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

Special Rules

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

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

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

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

<b>Name of organization</b> Casey Family Programs	<b>Employer identification number</b>  91-0793881
--	---

<b>Part I</b> Contributors (see instructions)			
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	See Additional Data Table <div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Aggregate contributions	<b>(d)</b> Type of contribution
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>



Name of organization Casey Family Programs	Employer identification number 91-0793881
---	--

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

Name of organization Casey Family Programs	Employer identification number 91-0793881
---	--

Part III

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

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

Additional Data

Software ID:

Software Version:

EIN: 91-0793881

Name: Casey Family Programs

Form 990 Schedule B, Part I - Contributors (See Specific Instructions):

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>1</div>	<div>Social Security Administration</div> <div>6401 Security Blvd</div> <div>Baltimore, MD 21235</div>	<div>\$46,256</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>2</div>	<div>Alameda County Social Services</div> <div>24100 Amador Street</div> <div>Hayward, CA 94544</div>	<div>\$192,375</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>3</div>	<div>Idaho State Controller</div> <div>PO Box 83720</div> <div>Boise, ID 83720</div>	<div>\$181,297</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>4</div>	<div>San Diego Health and Human Services</div> <div>1700 Pacific Highway</div> <div>San Diego, CA 92101</div>	<div>\$186,906</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>5</div>	<div>Texas Dept Family Protective SVC</div> <div>701 W 51st Street</div> <div>Austin, TX 78714</div>	<div>\$579,665</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<div>6</div>	<div>State of Arizona - Childs</div> <div>PO Box 6123</div> <div>Phoenix, AZ 85005</div>	<div>\$278,142</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>

Form 990 Schedule B, Part I - Contributors (See Specific Instructions):

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>7</u>	<div>WA Dept Social Health Services</div> <div>PO Box 45845</div> <div>Olympia, WA 98504</div>	\$ <u>314,520</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<u>8</u>	<div>Ellen Healy Unitrust</div> <div>C/O Kotter Co 56 Glendale PKWY</div> <div>Atlanta, GA 30328</div>	\$ <u>1,243,382</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>
<u>9</u>	<div>George Rae Unitrust</div> <div>C/O Kotter Co 56 Glendale PKWY</div> <div>Atlanta, GA 30328</div>	\$ <u>1,175,129</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution )</div>

Additional Data

Software ID: 09000054

Software Version: 09-8.5

EIN: 91-0793881

Name: Casey Family Programs

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
PUBLICLY TRADED SECURITIES - ST	P		
PUBLICLY TRADED SECURITIES - LT	P		
DEFERRED GAIN ON WESTLAKE PROPERTY	P		
AIG EURO II	P		
CHARTERHOUSE IX	P		
CVC EUROPEAN EQUITY	P		
AIG ASIA REAL ESTATE	P		
AIG EURO REAL ESTATE	P		
ASIAN INFRASTRUCTURE	P		
AXIOM ASIA	P		
CHARTERHOUSE IX	P		
GS VINTAGE IV	P		
GS VINTAGE V	P		
GS US SC VALUE EQ	P		
HORSLEY BRIDGE IX	P		
HORSLEY BRIDGE INTL	P		
INVESCO ASIA	P		
INVESCO REAL ESTATE II	P		
HORSLEY BRIDGE IX	P		
OAKTREE LOAN FUND	P		
JORDAN- RESOLUTE II	P		
LEGACY PARTNERS III	P		
OAKTREE LOAN FUND	P		
OCM OPPORTUNITIES VII	P		
OCM OPPORTUNITIES VIIIB	P		
PARISH CAPITAL II	P		
PRUDENTIAL PRISA I	P		
PRUDENTIAL PRISA II	P		
PRUDENTIAL PRISA III	P		
SIGULER GUFF BRIC II	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
1,945,542,011		1,984,906,583	-39,364,572
459,292,976		692,480,765	-233,187,789
596,870			596,870
		224	-224
		1,151	-1,151
64			64
		255,513	-255,513
		244,268	-244,268
288,647			288,647
		142,255	-142,255
		243,491	-243,491
		342,172	-342,172
		247,726	-247,726
		16,433	-16,433
312			312
19			19
		206,250	-206,250
		14,666	-14,666
3,939			3,939
44,626			44,626
		28,673	-28,673
2,325,321		1,270	2,324,051
		1,909,828	-1,909,828
		855,320	-855,320
7,434			7,434
		79,035	-79,035
1,787,144		2,916,908	-1,129,764
707,100		3,330,642	-2,623,542
710,763		1,797,240	-1,086,477
11,624			11,624

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-39,364,572
			-233,187,789
			596,870
			-224
			-1,151
			64
			-255,513
			-244,268
			288,647
			-142,255
			-243,491
			-342,172
			-247,726
			-16,433
			312
			19
			-206,250
			-14,666
			3,939
			44,626
			-28,673
			2,324,051
			-1,909,828
			-855,320
			7,434
			-79,035
			-1,129,764
			-2,623,542
			-1,086,477
			11,624

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
SIGULER GUFF BRIC II	P		
WAYZATA	P		
WAYZATA	P		
OCM OPPORTUNITUES VII	P		
OCM OPPORTUNITUES VIIB	P		
PARISH CAPITAL II	P		
SECTION 1256 G/L FROM K-1 - ST	P		
SECTION 1256 G/L FROM K-1 - LT	P		



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
2,293			2,293
748,975			748,975
4,277			4,277
109,922			109,922
334,565			334,565
13,344			13,344
168,878			168,878
253,317			253,317

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			2,293
			748,975
			4,277
			109,922
			334,565
			13,344
			168,878
			253,317


Form 990PF Part VII-A Line 8a

Enter the states to which the foundation reports or with which it is registered	AL, AK, AZ, CA, CO, DC, AK, FL, GA, HI, ID, IL, IN, KY, LA, ME, MD, MA, MI, MN, MO, NV, NJ, NY, NC, OH, OR, PA, SC, SD, TX, WA, WV, WY
---	--


**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation <b>(If not paid, enter -0-)</b>	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
Gary R Severson	Chairman 16 0	143,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
Joan B Poliak	Vice Chair 18 0	125,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
Sharon McDaniel-Lowe	Treasurer 21 0	125,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
Shiela Evans-Tranumn	Corp Secretary 17 0	104,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
Dennis Hightower	Trustee 20 0	102,431	0	0
1300 Dexter Ave North Seattle, WA 98109				
Dave Mills	Trustee 23 0	125,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
America Y Bracho	Trustee 13 0	125,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
Bob Watt	Trustee 18 0	125,000	0	0
1300 Dexter Ave North Seattle, WA 98109				
William C Bell	President and CEO 40 0	565,110	87,275	3,000
1300 Dexter Ave North Seattle, WA 98109				


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
California Youth Connection604 Mission Street San Francisco, CA 94105	N/A	509(a)(1)	To support training of young people in care and former foster youth to effectively advocate for improved services and outcomes	22,500
Child Welf League of AmericaPO Box 75171 Baltimore, MD 21275	N/A	509(a)(1)	To support grantee's leadership work in child welfare work and to facilitate its continued mission related work and success	300,000
Children Aid society181 West Valley Ave Suite 300 Birmingham, AL 35209	N/A	509(a)(1)	The Grant will fund resources and staffing to conduct youth summaries and family home visits to expedite adoption proceedings for Alabama youth awaiting foster parent adoption	35,000
City Year Seattle309 23rd Ave S Seattle, WA 98114	N/A	509(a)(1)	To support City Year, Inc in the planning and delivery of its 2009 Ripples of Hope Banquet	2,500
Congressional Coalition on Adoption Institute311 Massachusetts Ave NE Washington, DC 20002	N/A	509(a)(1)	Grant for 2010 Angels in Adoption Event	25,000
Congressional Coalition on Adoption Institute311 Massachusetts Ave NE Washington, DC 20002	N/A	509(a)(1)	Grant for CCAI's 2009 Foster Youth Internship Programs	25,000
Foundation for Early Learning615 - 2nd Ave Suite 525 SEATTLE, WA 98104	N/A	509(a)(1)	To support the FEL 2009 Leadership Luncheon	5,000
Grantmakers for Children Youth & FamiliesPO Box 30942 SEATTLE, WA 98103	N/A	509(a)(1)	To support grantee's 2009 Fall Forum conference	5,000
National Center on for Housing and Child Welfare6711 Queens Chapel Road University Park, MD 20782	N/A	509(a)(1)	To support the Housing-Child Welfare Partnership Forum in Seattle	5,000
Rehoboth Community Development Corp2315 N 35th Ave Phoenix, AZ 85009	N/A	509(a)(1)	To support the Passages Transition Coalition	72,000
Treehouse655 S Orcas St Suite 200 Seattle, WA 98108	N/A	509(a)(1)	To support and pay for expenses in connection with the June Leonard Memorial Golf tournament	5,000
Urban League of Metropolitan Seattle105 14th Ave Seattle, WA 98122	N/A	509(a)(1)	To support grantee's 10th Annual Breakfast	2,500
Yakima NationPO Box 151 Toppenish, WA 98948	N/A	Indian tribe	To support Tribal Kinship Navigator Program	60,000
Congressional Coalition on Adoption Institute311 Massachusetts Ave NE Washington, DC 20002	N/A	509(a)(1)	To sponsor Foster Youth Internship (FYI) Program that provides young people who have spent their formative years in foster care an opportunity to intern with a Member of Congress for a summer	65,000
Council on Foundations1828 L St NW suite 300 Washington, DC 20016	N/A	509(a)(1)	To help support the planning the Council on Foundations Annual Conference, which is to take place in Atlanta, Georgia, on May 4, 2009	10,000
<b>Total . . . . .</b>  <b>3a</b>				678,170

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
California Youth Connection604 Mission Street San Francisco,CA 94105	N/A	509(a)(1)	To support training of young people in care and former foster youth to effectively advocate for improved services and outcomes The grant also covers report writing and dissemination	5,000
Partnerships for ChildrenPO Box 5602 Austin,TX 78763	N/A	509(a)(1)	To support Partnerships for Austin Children in Crisis with Project Suite Pea to take place in Austin on May 1, 2009	2,000
Washington State CASA603 Steward Street Suite 206 Seattle,WA 98101	N/A	509(a)(1)	To support the CASA statewide conference on October 17, 2009	1,800
San Diego Grantmakers4270 Executive Square Ste 200 La Jolla,CA 92037	N/A	509(a)(1)	To help sponsor the San Diego Grantmakers Annual Conference on October 29, 2009	1,000
Sargent Shriver Center on Poverty Law50 E Washington St Suite 500 Chicago,IL 60602	N/A	509(a)(1)	To sponsor a table at the 2009 Shriver Annual Awards dinner	2,000
The Aspen InstituteOne Dupont Circle NW Suite700 Washington,DC 20036	N/A	509(a)(1)	To help support The Aspen Institute Annual Fund and Aspen Institute current and future programs	1,000
Beyond Emancipation675 Hegenberger Rd Suite 100 Oakland,CA 94621	N/A	509(a)(1)	To support printing of "Resources for youth in Transition"	500
King County Bar Fund1200 fifth Ave suite 600 Seattle,WA 98101	N/A	509(a)(1)	To support Pro Bono programs and scholarships for minority law students	150
Now I lay me down to sleep7800 S Elati St 111 Littleton,CO 80120	N/A	509(a)(1)	To help organization with helping parents who experience an early infant loss	50
Friends of the ChildrenPO Box 22801 Seattle,WA 98122	N/A	509(a)(1)	Donation of property for organization use	2,400
Technology Access Foundation4436 Rainier Avenue South Seattle,WA 98118	N/A	509(a)(1)	Donation of property for organization use	8,000
Family Support Services401 Grand Avenue Suite 500 Oakland,CA 94610	N/A	509(a)(1)	Donation of property for organization use	489
Lifeworks3700 S 1st Street Austin,TX 78704	N/A	509(a)(1)	Donation of property for organization use	454
Beyond Emancipation675 Hegenberger Rd Suite 100 Oakland,CA 94621	N/A	509(a)(1)	Donation of property for organization use	3,705
Lutheran Social Services433 Minor Ave N Seattle,WA 98109	N/A	509(a)(1)	Donation of property for organization use	330
<b>Total . . . . .</b>  <b>3a</b>				678,170

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Catholic Charities1531 James M Wood Boulevard Los Angeles, CA 90015	N/A	509(a)(1)	Donation of property for organization use	705
Children's Shelter2939 W Woodlawn San Antonio, TX 78228	N/A	509(a)(1)	Donation of property for organization use	990
Arizona's Children Association141 E Palm Ln 105 Phoenix, AZ 85004	N/A	509(a)(1)	Donation of property for organization use	1,700
FIBCO Family Services Inc - THE HOPE CENTER1141 East Jefferson Street Phoenix, AZ 85034	N/A	509(a)(1)	Donation of property for organization use	2,310
San Antonio Metropolitan Ministry Inc 301 South Frio Suite 260 San Antonio, TX 78207	N/A	509(a)(1)	Donation of property for organization use	1,075
Foster Youth Life Investment Partners PO Box 7743 Corpus Christi, TX 78416	N/A	509(a)(1)	Donation of property for organization use	990
Restoration LIFE Church306 22nd Ave Seattle, WA 98112	N/A	509(a)(1)	Donation of property for organization use	230
Peoples Institutional Baptist Church 159 - 24th Ave Seattle, WA 98122	N/A	509(a)(1)	Donation of property for organization use	805
Lakota O yate Wakanyeya Owicakiyapi East Hwy 18 PO Box 604 Pine Ridge, SD 57770	N/A	Indian Tribe	Donation of property for organization use	165
Denver Indian Family Resource Center393 S Harlan St Suite 100 Lakewood, CO 80226	N/A	Indian tribe	Donation of property for organization use	280
Computers for Kids8540 W Elisa Boise, ID 83709	N/A	509(a)(1)	Donation of property for organization use	377
SER - Jobs for Progress122 W John Carpenter Fwy Suite 200 Irving, TX 75039	N/A	509(a)(1)	Donation of property for organization use	165
<b>Total . . . . .</b>  <b>3a</b>				678,170

**TY 2009 Accounting Fees Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ERNST & YOUNG LLP	142,016	21,302	21,302	120,714
JACOBSON JARVIS & CO PLLC	11,755			11,755
JESSE THOMAS GRAYSTON, CPA	14,950			14,950
VOLDAL WARTELLE & CO P S	12,086			12,086



**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

**TY 2009 Depreciation Schedule**

**Name:** Casey Family Programs

**EIN:** 91-0793881

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2000-01-01	4,457,548		L					
BUILDING	2000-01-01	22,099,623	4,586,643	SL	27	721,176			
FURNITURE AND FIXT	2000-01-01	10,941,411	7,310,282	SL	7	1,038,459			
AUTOMOBILES	2000-01-01	578,967	380,503	SL	7	66,735			
LEASEHOLD IMPLOVEM	2000-01-01	1,970,820	409,757	SL	15	369,358			

**TY 2009 Investments Corporate  
Bonds Schedule**

**Name:** Casey Family Programs  
**EIN:** 91-0793881

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	305,629,214	316,422,990
SPECIFIC DETAIL TOO		
VOLUMINOUS TO ATTACH.		

**TY 2009 Investments Corporate  
Stock Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
COMMON AND PREFFERED STOCK	1,206,977,505	1,163,617,976
SPECIFIC DETAIL TOO		
VOLUMINOUS TO ATTACH.		

# **TY 2009 Investments Government Obligations Schedule**

**Name:** Casey Family Programs

**EIN:** 91-0793881

**US Government Securities - End of  
Year Book Value:**

105,231,064

**US Government Securities - End of  
Year Fair Market Value:**

106,330,806

**State & Local Government  
Securities - End of Year Book  
Value:**

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

TY 2009 Investments - Land Schedule

**Name:** Casey Family Programs

**EIN:** 91-0793881

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
----------------	------------------	-----------------------------	---------------	----------------------------------

# TY 2009 Investments - Other Schedule

**Name:** Casey Family Programs

**EIN:** 91-0793881

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS		323,805,764	244,127,286
SPECIFIC DETAIL TOO			
VOLUMINOUS TO ATTACH.			

**TY 2009 Land, Etc. Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	4,457,548		4,457,548	
BUILDING	22,099,623	5,307,819	16,791,804	
FURNITURE AND FIXT	10,941,411	8,348,741	2,592,670	
AUTOMOBILES	578,967	447,238	131,729	
LEASEHOLD IMPLOVEM	1,970,820	779,115	1,191,705	

## TY 2009 Legal Fees Schedule

**Name:** Casey Family Programs

**EIN:** 91-0793881

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADKINS PLANT ELVINS BLACK PLLC	17,045			17,045
DAVIS WRIGHT TREMAINE LLP	7,128			7,128
LITTLER MENDELSON FASTIFF	6,691			6,691
STOEL RIVES LLP	454,256	96,637	96,637	357,619
OTHER ATTORNEYS AND COSTS	17,023			17,023



**TY 2009 Other Assets Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
MISC RECEIVABLE	744,362	314,897	314,897
INTEREST AND DIVIDENDS RECEIVA	3,327,727	2,290,869	2,290,869
CONSTRUCTION IN PROGRESS	158,990	72,591	72,591
DEPOSITS	132,547	150,119	150,119
OTHER NON CURRENT ASSETS	447,992	389,969	389,969

## TY 2009 Other Expenses Schedule

**Name:** Casey Family Programs

**EIN:** 91-0793881

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
YOUTH AND FAMILY SUPPORT SERVI	49,535,343			49,535,343
ADVERTISING AND PROMOTION	100,871			100,871
AUTOMOBILE EXPENSE	82,111			82,111
BANK FEES	36,361			36,361
DATA PROCESSING	46,517			46,517
SOFTWARE & FIXED ASSETS < \$500	1,007,744			1,007,744
EQUIPMENT RENTAL/LEASE	537,223			537,223
DUES AND MEMBERSHIPS	195,134			195,134
STAFF TRAINING AND DEVELOPMENT	391,196			391,196
OFFICE SUPPLIES, POSTAGE	650,017			650,017
REPAIRS & MAINTENANCE	560,084			560,084
TEMPORARY HELP	1,157,825			1,157,825
COMMUNICATIONS	828,171			828,171
MISCELLANEOUS	4,074			4,074
MOVING EXPENSE	33,152			33,152
RECRUITMENT EXPENSES	177,993			177,993
BOT DEFERRED GAINS	42,594			42,594
LIABILITY INSURANCE	770,737			770,737
EXP ALLOCATION TO INV INCOME		518,087	518,087	-518,087
MCF SERVICE INCOME EXPENSES			59,735	-59,735
ACCRUAL TO CASH ADJUSTMENT				4,242,709
INV EXPENSES FROM K-1S		6,349,787	6,349,787	

**TY 2009 Other Income Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

Description	Revenue And Expenses Per Books	Net Invest ment Income	Adjusted Net Income
SERVICES AGREEMENT MCF	59,735		59,735
REIMBURSED EXPENSES	23,207		
MISC INCOME	847		847
OTHER INCOME FROM K-1s		165,410	165,410
INCOME FROM PRIVATE EQUITY PARTNERSHIPS	-3,846,686		

**TY 2009 Other Liabilities Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

Description	Beginning of Year - Book Value	End of Year - Book Value
BOT DEFERRED INCOME AND INTEREST	1,138,507	1,080,813
DEFERRED RENT	650,006	754,604
DEFFERED GAIN AMORTIZATION	4,178,088	3,581,218
INSURANCE CLAIM RESERVE	458,680	492,000
UNCLAIMED PROPERTY	8,051	4,688

**Note:** To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2009 Other Notes/Loans**  
**Receivable Long Schedule**

**Name:** Casey Family Programs  
**EIN:** 91-0793881

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
SATTERLEE-MARTIN		30,000	0	1994-07	2009-07		800 %				

TY 2009 Other Professional Fees Schedule

Name: Casey Family Programs  
EIN: 91-0793881

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ALTHEIA	106,561	106,561	106,561	
ARBOR CAPITAL	622,514	622,514	622,514	
ARROWSTREET	316,329	316,329	316,329	
BLACKROCK	208,932	208,932	208,932	
BNY MELLON	652,985	652,985	652,985	
BAILLIE GIFFORD	540,449	540,449	540,449	
CLIFFWATER, LLC	171,799	171,799	171,799	
DELAWARE	205,021	205,021	205,021	
DODGE & COX	178,234	178,234	178,234	
ENNIS, KNUPP & ASSOC	281,335	281,335	281,335	
GLENROCK CAPITAL ADVISERS, LLC	166,667	166,667	166,667	
ORG PORTFOLIO MANAGEMENT, LLC	150,000	150,000	150,000	
OTHERS	990,250	80,519	80,519	909,731
PIMCO	574,952	574,952	574,952	
PZENA	77,264	77,264	77,264	
RISKMETRICS	72,250	72,250	72,250	
ARTHUR J GALLAGHER & CO OF WA	86,522			86,522
BULLETIN NEWS NETWORK, INC	80,856			80,856
CHILD TRENDS, INC	206,419			206,419
DENALI ADVANCED INTEGRATION	314,842			314,842
ENTERTAINMENT INDUSTRIE COUNCI	50,000			50,000
G A JONES & ASSOCIATES, INC	53,560			53,560
HAY GROUP, INC	244,841			244,841
HEATHER PODESTA PARTNERS	120,433			120,433
MERCURY PUBLIC AFFAIRS	80,000			80,000
TWO DEGREES, LLC	256,555			256,555
WATSON WYATT INV CONSULTING	52,000			52,000

**TY 2009 Taxes Schedule****Name:** Casey Family Programs**EIN:** 91-0793881

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LICENSING	8,379			8,379
PROPERTY TAXES	55,850			55,850
EXCISE AND B & O TAXES	7,567			7,567
SALES AND USE TAXES	95			95
FROM K-1S		254,344	254,344	