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990-EZ

Department of the Treasury

Short Form
Return of Organization Exempt From Income Tax

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must fille Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

Ā	For th	e 2009 calenda	ar year,	or tax year beginning	7/01	, 2009,	and ending		6/30	, :	20 10
В	Check r	f applicable	Please	C Name of organization				D Emplo	yer ider	ntification nu	mber
	Addres	s change	use IRS	ALABAMA CASA NETWOR	K, INC.			ł	72-	1374587	
	Name	change	label or print or	Number and street (or P O box,	if mail is not delivered to	street address)	Room/suite	E Teleph	one nun	nber	
	Initial re		type.	2806 RUFFNER RROAD					205	-833-1135	
닏	Termin		See Specific	City or town, state or country, a	nd ZIP + 4		<u>. </u>	F Grou			
H		ed return	instruc- tions	IRONDALE, AL 35210		,			ber ►	ption	
므		ation pending					10.4	_		[7] O [1 4
	• Se	ection 501(c)(3)		rations and 4947(a)(1) nonex npleted Schedule A (Form 9		s must attach	Othe	r (specify)	<u> </u>	☑ Cash □	
. 1	Waha	site: ► www	alaham	acasa.org			1		-	ganization is iedule B (Fo	
				nly one) — 📝 501(c) (3) 🔻	(insert no.) 1 4947	(a)(1) or 5	 '	EZ, or 990		,, 6 0,000	000,
										a than \$0E O	100 A
	Check Form			zation is not a section 509(a)(3 turn is not required, but if the							
L	Add Iir	nes 5b, 6b, and 7	b, to line	9 to determine gross receipts,	if \$500,000 or more, file	Form 990 inste	ad of Form 99	0-EZ ►	\$		137,620
E	art I	Revenu	e, Exp	enses, and Changes in	n Net Assets or F	und Balanc	es (See th	e instruc	tions	for Part I.)	
_	1	Contributio	ns, aift	s, grants, and similar amo	unts received .				1		133,249
	2		_	evenue including governm		cts		. [2		
	3			and assessments					3		1,000
	4	Investment	•						4		75
	_			m sale of assets other that	n inventory	5a	Ι ΄ ΄ ΄	·			
	5					. 5b			ŀ		
				er basis and sales expense			Fa)		-		
Ð				n sale of assets other than				t	5c		
Revenue	6	•		ivities (complete applicable parts			ing, check her				
š	4	·		Findluding \$	of contribi	1 .	1				
æ		reported				<u> 6a</u>		2,810			
				nses other ให้ลู้ก fundraising			<u></u>		4m. 5		
		c ∬Net income	၃.ဝဌ(စွေ	ss)/ftom special events and	d activities (Subtract	line 6b from	line 6a)		6c		2,810
	7:	a Gross Sale	s of inv	entory, less returns and al	lowances	7a					
	1 1	b Less cost	of goo	ds.sold) T		. 7b			- 1		
	Ι,			ss from sales of inventory	(Subtract line 7b fro	m line 7a)			7c		
	8			scribe MISCELLANEO		•		, [8		486
	9	المستحصيا		dd lines 1, 2, 3, 4, 5c, 6c, 7					9		137,620
_	10			r amounts paid (attach sch					10		
	11			r for members .				`	11		
u	i	•		mpensation, and employed	 a hanafite		• • •	· · ·	12		73,628
Se	12	•		and other payments to inc		· ·	•	· ·	13		
Expenses	13			• •	•			F	14		11,100
×	14			utilities, and maintenance					15		3,498
	'	O		ons, postage, and shipping	•			}			
	16			describe ► SEE STATEM		 		—_' ⊦	16		53,679
	17			Add lines 10 through 16 .					17		141,905
3	18			for the year (Subtract line					18		(4,285)
Se	19			d balances at beginning	•		_				
Ä	:	•	-	e reported on prior year's r					19		
Net Assets	20	Other char	nges in	net assets or fund balance	es (attach explanatio	n)			20		
_	21			d balances at end of year			<u> </u>	▶ _	21	-	(4,285)
j	art	Balance	Shee	ets. If Total assets on line		1,250,000 or				of Form 9	90-EZ.
				(See the instructions for	Part II)		(A) B	eginning of	/ear	(B) End o	f year
2	2	Cash, savings	, and in	vestments				44	,365 2	2	40,080
2		Land and build							2	3	
2		Other assets (•				,		2	4	
2		Total assets					_;	44	,365 2		40,080
		Total liabilitie			•	•	,		2		
	7	Net assets or	fund b	palances (line 27 of colum	n (B) must agree wit	h line 21)		44	,365 2		40,080

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

Cat No 10642I

Form **990-EZ** (2009)

Par	Statement of Program Service Accom	plishments (See the instri	uctions for Part II	1.)	<u> </u>	Expenses
		·			(Bea	ired for section
vvnat	is the organization's primary exempt purpose? ribe what was achieved in carrying out the org	CHILD PROTECTIVE SERVI	ces la a clear a	nd concise)(3) and 501(c)(4)
					organ	izations and section
	ner, describe the services provided, the number of	or persons benefited, and t	otner relevant into	rmation for		a)(1) trusts, optional
	program title				for ot	hers)
28	SEE STATEMENT 2					
	(Grants \$) If this amount	includes foreign grants, ch	eck here	▶ □	28a	
29						
	/Create # \ If the amount	includes foreign grants, ch	ook boro		29a	
			eck liele	<u> </u>	250	
30						
		includes foreign grants, chi	eck here .	▶ ⊔	30a	
31	Other program services (attach schedule)			_		
		includes foreign grants, chi		. ▶ 🗆	31a	
32	Total program service expenses (add lines 28a t			▶	32	0.
Part	IV List of Officers, Directors, Trustees, and Key	Employees. List each one ev	ven if not compensa	ated. (See the	nstruc	tions for Part IV)
	TAN	(b) Title and average	(c) Compensation	(d) Contribution	ns to	(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper		account and other allowances
SEE	STATEMENT 3	,		·		
	STATEMENT 3					
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Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	`	· 🗸
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			,
39	Section 501(c)(7) organizations. Enter:		,	1
а	Initiation fees and capital contributions included on line 9			1
b	Gross receipts, included on line 9, for public use of club facilities		,	1
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶, section 4912 ▶, section 4955 ▶			1
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		√
Ċ	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	1	*	, .
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		,	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		· · · · · · · · · · · · · · · · · · ·
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ NANCY BUSH Telephone no ▶	205-83	3-113	5
	Located at ► 2806 RUFFNER ROAD ZIP + 4 ►	352	210	
b	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		Yes	No
	account)?	42b		\
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		1
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		٠, ا	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year \Delta 43			
		1	Yes	Nο
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		163	110
77	Form 990-EZ	44		1
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		J
			\ F7	

Part VI

Part VI	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	section 4947(a)(1) none 17(a)(1) nonexempt char ad 51.	xempt charitab table trusts mus	le trusts only. A t answer questio	ll sec ns 46	tion 5–49l	5
46 D	old the organization engage in direct or indirect	political campaign activiti	es on behalf of or	in opposition to		Yes	No
	andidates for public office? If "Yes," complete				46		1
47 D	old the organization engage in lobbying activities	s? If "Yes," complete Sche	dule C, Part II .		47		✓
48 Is	s the organization a school as described in section	n 170(b)(1)(A)(ıı)? If "Yes," c	omplete Schedule	E	48		V
	old the organization make any transfers to an ex		d organization?		49a		-
b If	"Yes," was the related organization a section 5 complete this table for the organization's five his	2/ organization?		official and a discontain of	49b	00.00	d kov
50 C	complete this table for the organization's five his mployees) who each received more than \$100,0	gnest compensated emplo	the organization.	officers, directors, i	ter "N	one."	u ney
		(b) Title and average	(c) Compensation	(d) Contributions to	(e)	Expen	ise
(;	a) Name and address of each employee paid more than \$100,000	hours per week devoted to position		employee benefit plans & deferred compensation		count a	
	than \$100,000	devoted to position				anome	
<u>-</u>							
		<u></u>					
			1				
	otal number of other employees paid over \$100	<u> </u>	<u> </u>				
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) Tyl	pe of service	(c) Cor	npensa	ation
d T	otal number of other independent contractors e		 00 . ►		***		
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including accompan of preparer (other than officer) is b	ying schedules and sta pased on all information	stements, and to the bes n of which preparer has	at of my	knowl	edge e
Sign Here	Signature of officer EXECUTIVE Direct Type or pnnt name and title	tor		Date 10/13,	110	<u> </u>	<u> </u>
Paid	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying num	nber (Se	e instruc	tions)
Preparer	FIIII S Hallie (OI		EII	N Þ	-		
Use Only	yours if self-employed), address, and ZIP + 4			none no 🕨			
May the	IRS discuss this return with the preparer shown	n above? See instructions		. ▶ [Yes m 99		No (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047
2009
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Open to Public Inspection

Employer identification number

ALA	BA	MA CASA NI	ETWORK, INC.						72	1	374587	
Pai	t I	Reason	for Public Ch	arity Status (All or	ganizatıd	ons mus	t comple	ete this	part.) Se	e instruc	ctions.	
The	orga	anization is ne	ot a private foun	dation because it is	(For lines	1 throug	jh 11, ch	eck only	one box)		
1				rches, or association		-						
2		-		on 170(b)(1)(A)(ii). (At								
3				nospital service organ			ın sectio	n 170(b)	(1)(A)(iii).			
4	$\overline{\sqcap}$			tion operated in con)(A)(iii). Enter tl	he
-			ime, city, and st				•					
5		An organizat		the benefit of a colle						ernmental	unit described	ın
6				ernment or governme	ental unit	describe	d in sect	ion 170(l	o)(1)(A)(v)).		
7	7			receives a substanti							he general pub	olic
-	_	•		1)(A)(vi). (Complete F							,	
8				in section 170(b)(1)		omplete	Part II)					
9		An organizat	on that normally	receives (1) more that	an 33⅓ %	of its su	pport from	m contrib	utions, m	embershi	p fees, and gro	SS
		receipts from	n activities relate	ed to its exempt function	tions—su	bject to d	certain ex	ceptions	, and (2)	no more	than 331/3 % of	ıts
				ent income and unre						511 tax)	from business	es
		acquired by	the organization	after June 30, 1975	See sec	tion 509(a)(2). (Co	mplete F	Part III.)			
10		An organizat	tion organized at	nd operated exclusive	ely to test	t for publ	ic safety.	See sec	tion 509	(a)(4).		
11				and operated exclusiv								
				olicly supported organ								on
		509(a)(3). Ci	neck the box tha	it describes the type						s 11e thr	ough 11h	
		a 🗌 Type		, .		e III-Fun		•			Type III-Other	
е				tify that the organizat								
		•		n managers and othe	r than one	e or more	publicly	supporte	ed organiz	ations de	scribed in secti	on
		509(a)(1) or	section 509(a)(2)									
f		If the organi	zation received	a written determinati	on from	the IRS t	that it is	a Type I	l, Type II	, or Type	III supporting	_
			, check this box									
g		_		the organization acce	epted any	gift or c	ontributio	on from a	iny of the	!		
		following per									Yes N	_
				r indirectly controls, e				h persor	is describ	ped in (ii)	 	<u>-</u>
			-	ning body of the supp		ganizatio	n?,				11g(i) 11g(ii)	
			•	rson described in (i) a		 () = b==					11g(m)	—
				of a person described ation about the suppo							[119[11]]	
<u>h</u>	·	of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	(m) 1	s the	(vii) Amount of	
(1)		janization	(ii) Eliv	(described on lines 1-9	in col (i) lis	sted in your	the organ	ization in	organizat	ion in col	support	
			above or IRC section (see instructions))		governing document? col (i) of you support?							
				(See man denoms)	Yes	No '	Yes	No	Yes	No		
							144					_
		· · · · · · · · · · · · · · · · · · ·		-								_
		·········										_
								-	1		•	_
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		<u> </u>										_
Tota	ı.		I	I	l .	l l	i	l	1	I I		

Page 2 Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not 95,802 94,629 133,249 529,146 84.341 121,125 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 121.125 95.802 94,629 133,249 529,146 84,341 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2005 Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 95,802 94,629 133,249 529,146 84,341 121,125 Amounts from line 4 . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 0 161 2,183 725 75 3,144 sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets 10,624 6,882 1,638 4,296 29,994 (Explain in Part IV) 562,284 Total support. Add lines 7 through 10 . 11 24,696 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 94.1065 14 % Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))

16a	331/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box
	and stop here. The organization qualifies as a publicly supported organization
b	331/4 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/4 % or more, check this
	box and stop here . The organization qualifies as a publicly supported organization
17a	10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

Public support percentage from 2008 Schedule A, Part II, line 14

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 🕨 🗌

93.6977

%

15

	rt III Support Schedule for Orga (Complete only if you checke				1)(2)		Page
Sec	tion A. Public Support	od the box o		,			
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")					,,,	
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 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b			, , ,			
	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 1	Add lines 10a and 10b						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)		-1-1-1	1 11 11 11		<u>. </u>	504/3/23
14	First five years. If the Form 990 is for organization, check this box and stop tion C. Computation of Public Su	here	<u></u>	nd, third, fourth			
							
15	Public support percentage for 2009 (lin			ne 13, column	(1))	15	<u>%</u>

13	and 12)			ı
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax yorganization, check this box and stop here	ear a	s a sectio	n 501(c)(3)
Sec	tion C. Computation of Public Support Percentage			
15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15		%
16	Public support percentage from 2008 Schedule A, Part III, line 15	16		%
Sec	tion D. Computation of Investment Income Percentage			
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) .	17		%
18	Investment income percentage from 2008 Schedule A, Part III, line 17	18		%
19a	33½% support tests—2009. If the organization did not check the box on line 14, and line 15 is r 17 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly			· –
b	33½ % support tests – 2008. If the organization did not check a box on line 14 or line 19a, and line 1 line 18 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly			

Schedule A (F	Form 990 or 990-EZ) 2009			Page 4
Part IV		nis part to provide the 12. Provide any other a	explanations required additional information	by Part II, line 10; See instructions

ALABAMA CASA NETWORK, INC. 72-1374587 FORM 990 FOR THE TAX YEAR ENDED JUNE 30 2010

> STATEMENT 1 FORM 990 PG 1 LN 16 - OTHER EXPENSES

ACCOUNT	AMOUNT
PAYROLL EXPENSES	20202
SUPPLIES	1,424
MEMBERSHIP FEES/DUES	615
TELEPHONE & COMUNICATIONS	4,497
COMPUTER SOFTWARE/HARDWARE	6,445
EQUIPMENT RENTAL & MAINTENANCE	-
TRAVEL	6,022
CONFERENCE, CONVENTION MEETING	6,342
MEETING EXPENSES - FOOD	2,729
INSURANCE - NON EMPLOYEE	683
TAXES	94
OTHER EXPENSES	4,626-
	53,679

ALABAMA CASA NETWORK, INC. 72-1374587 FORM 990 FOR THE TAX YEAR ENDED JUNE 30 2010

> STATEMENT 2 FORM 990 PG 2 PART III LN 28

Alabama CASA Network, Inc. ID# 72-1374587

Statement of Program Service Accomplishments for Fiscal Year 2008--2009 (July 1, 2009 through June 30th, 2010)

- 1. Continued to publish annual newsletter with increased publication. Feature stories portray the diversity of our volunteers and reasons they choose CASA as a means to serve their community.
- 2. The Network hired its first Resource Development Director to focus on public awareness, communications, social networking, new donor development, and maintenance of a donor database. A newly created e-newsletter is also being distributed to the network via e-mail, starting in April, 2010.
- 3. The Director continued to prepare and deliver in-service training programs for local program chapters so they can meet required annual in-service continuing education for volunteers.
- 4. The Director continued to serve on the state's Court Improvement Project Committee at the Administrative Office of Courts and a Legislative Committee developed by the Alabama Dept of Child Abuse Prevention. Director also serves as a committee member of the Jefferson County Pilot Project to prevent shaken baby and traumatic head injury to children under three years old.
- 5. The board of directors met quarterly, with the Executive Committee meeting the month previous to each full board meeting. All board members actively participate in at least two of the five working committees established by the board and each member during 2009-2010 made a pledge of annual personal financial contribution to the organization.
- 6. Orientation continues to be provided to every new board member elected to the board of Alabama CASA Network, Inc. Several new members were inducted during 2009-2010. New director training is also provided to all new local program Executive Directors as they come into their positions. During 2009-2010, two new members have come on board.
- 7. The Network continues to sponsor an annual statewide conference that covers topics of value to child advocates, board members, and other service providers. This event is highly anticipated, not only by staff and board members, but especially by CASA volunteers who rarely have an opportunity to meet as a state-wide group.

- 8. The agency's employee handbook, strategic plan, communications plan, and resource development plans were revised and updated in April, 2010.
- 9. The director made site visits and/or attended board meetings with all local programs in the state during 2009-2010 and attended several special events with local county chapters.
- 11. The director attended local program in-service trainings, swearing-in ceremonies, and special events for several of the local chapters.
- 12. The Network participated in several public relations events, such as heritage festivals, bar association meetings, or public speaking engagements, to promote the CASA mission and message and attract new prospects to volunteer. The director was also featured on a long-standing talk show with a personal televised interview with Ann Varnum in Dothan, AL.
- 13. State network staff and many local staff members attended the annual National CASA Conference in Atlanta, Georgia in April, 2010. State director participated in annual state director's meeting with National CASA Association.
- 14. The State Network continued to provide public relations and educational literature to local programs and the general community, and had feature ads in several publications. Through a National-CASA capacity grant, new agency-brochures were developed and printed and other media campaigns are underway for 2010-2011.
- 15. Efforts continued to provide technical assistance and guidance to counties interested in establishing new CASA programs in their service areas. Two new programs (Autauga County and Colbert County) achieved either provisional or permanent membership during 2009-2010 with the National CASA Association and Alabama CASA Network.
- 16. Multiple new counties have expressed interest in establishing programs. Houston and Lee counties anticipate opening programs by early 2011.
- 17. Annual Program Directors Retreat was held in Aug 2010. All Executive Directors of Alabama CASA chapters were in attendance for this two day working and planning event held in Fairhope, AL.

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OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME, TITLE, & ADDRESS	AVERAGE HRS/WEEK	COMPENSATION	BENEFITS_	EXPENSES
Nancy Bush	40	41,378 50	0	0
Executive Director	,,,	, , , , , , ,	•	-
2806 Ruffner Road Ste 111, Irondale, AL 35210				
David Peat (full-time to part-time)	20	24,312 34	0	0
Operations Director				
2806 Ruffner Road Ste 111, Irondale, AL 35210				
Jessica Burrous (part-time)	20	5,572 50	0	0
Resource Development Specialist (partial year)				
2806 Ruffner Road Ste 111, Irondale, AL 35210				
Nichole Boomhover (part-time)	20	1,447 50	0	0
Resource Development Specialist (partial year)				
2806 Ruffner Road Ste 111, Irondale, AL 35210				
ana Alcorn Olson	0	0	0	0
President				
c/o Lightfoot, Franklin & White				
400 20th Street North, Birmingham, AL 35203				
Traci L Slaton	0	0	0	0
Board Member R. O. Boy 550129, Rymingham, Al. 35355				
P O Box 550129, Birmingham, AL 35255				
Dan Gels	0	0	0	0
Secretary				
2305 Bellvue Circle, Birmingham, aL 35226				
Joe Roth	0	0	0	0
Treasurer				
208 Braemer Place, Birmingham, AL 35242				
Eva Carter	0	0	0	0
Board Member				
2362 Freestone Ridge Cove				
Hoover, AL 35226				
David Doble	0	0	0	0
Board Member				
O Box 13263, Birmingham AL 35202				
James Earl Finley	0	0	0	0
Board Member				
1976 Gadsden Hwy, Ste 149, Trussville, AL 35173				
Ann Gilbert	0	0	0	0
Board Member				
701 Burwell Street				
Birmingham, AL 35221				
Jane Malloch	0	0	0	0
Board Member				
3016 Warrington Road				
Mountain Brook, AL 35223				
Andrea Mixson	0	0	0	0
Board Member				
2852 Regal Circle, Apt G, Hoover, AL 35216				
Bryan A Olson	0	0	0	0
Board Member				
1500 Greystone Parc Circle, Birmingham, AL 35242				
Lauren Phelps	0	0	0	0
Lauren Phelps Board Member	0	0	0	0