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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)

OMB No 1545-0047 Open to Public

Department of the Treasury

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

Inspection

A For the	2010 calendar year, or tax year beginning NOV 1, 2010 and ending	OCT 31, 2011
B Check if applicable	C Name of organization	D Employer identification number
Address	NATIONAL CHILDREN'S ALLIANCE	
Name change	Doing Business As	63-1044781
Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone number
Termin- ated	516 C STREET, NE	202-548-0090
Amende	City or town, state or country, and ZIP + 4	G Gross receipts \$ 14,275,113.
Applica tion pending	WABIIINGTON, DC 20002	H(a) is this a group return
penang	F Name and address of principal officer TERESA HULZAR	for affiliates? Yes X No
	SAME AS C ABOVE	H(b) Are all affiliates included? Yes No
<u> Tax-exe</u>	mpt status X 501(c)(3)	527 If "No," attach a list. (see instructions)
		H(c) Group exemption number ► Year of formation: 1992 M State of legal domicile: AL
	Summary	real of formation. 1992 M State of legal dofficile. AL
14 5	Bnefly describe the organization's mission or most significant activities. TO SUPPO	ORT THE DEVELOPMENT.
Activities & Governance	GROWTH AND CONTINUANCE OF FACILITIES WHERE C	HILD VICTIMS OF SEXUAL
E 2	Check this box If the organization discontinued its operations or disposed of r	
8 8	lumber of voting members of the governing body (Part VI, line 1a)	3 13
<u>ق</u> 4 ۱	Number of independent voting members of the governing body (Part VI, line 1b)	4 11
8 5 7	otal number of individuals employed in calendar year 2010 (Part V, line 2a)	5 13
₹ 6 1	otal number of volunteers (estimate if necessary)	6 13
7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12	7a 0.
b1	Net unrelated business taxable income from Form 990-T, line 34	7ь 0.
		Prior Year Current Year 11,104,440. 12,760,870.
9 8 G	Contributions and grants (Part VIII, line 1h)	1,437,475. 1,509,874.
9 1	Program service revenue (Part VIII, line 2g)	792. 723.
6 10 1 11 (nvestment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,525. 3,646.
	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,544,232. 14,275,113.
	Grants and similar amounts paid (Part IX, column (A), lines 1·3)	9,403,563. 10,869,501.
	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	838,020. 1,038,690.
≝ 16a F	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
.73	otal fundraising expenses (Part IX, column (D), line 25) 14,491.	
11/1	Othe Pexperises (Part IX, column (A), lines 11a-11d, 11f-24f)	2,011,746. 1,708,835.
18	otal expenses. Add lines 13-12 must equal Part IX, column (A), line 25)	12,253,329. 13,617,026.
19	Revenue less expenses Subtract line 18 from line 12	290,903. 658,087.
ts or	Total assets (Part X June-16)	Beginning of Current Year End of Year 2,779,457. 3,683,419.
	diamond and and	1,688,048. 1,933,923.
	otal labilities (Part X, line 26)	1,091,409. 1,749,496.
Part II	Signature Block	
<u> </u>	ties of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of my knowledge and belief, it is
•	, and complete. Declaration of preparer (other than officer) is based on all information of which prej	
		3-13-12
Sign	Signature of officer	Date
ਜere	TERESA HULZAR, EXECUTIVE DIRECTOR	
ක	Type or print name and title	Date Check PTIN
	Print/Type preparer's name Preparer's signature	
CPaid	ROBIN SKINNER, CPA Holin Skinner, CPI	
	Firm's name DIXON HUGHES GOODMAN LLP Firm's address 111 ROCKVILLE PIKE, 6TH FLOOR	Firm's EIN
Use Only	ROCKVILLE, MD 20850	Phone no. 240.403.3700
	S discuss this return with the preparer shown above? (see instructions)	X Yes No
032001 02-22		Form 990 (2010)

Form **990** (2010) SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2010) NATIONAL CHILDREN'S ALLIANCE	63-1044781	Page 2
	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Bnefly describe the organization's mission.	PACTITMTEC WI	שמשנ
	TO SUPPORT THE DEVELOPMENT, GROWTH AND CONTINUANCE OF CHILD VICTIMS OF SEXUAL AND/OR PHYSICAL ABUSE CAN GO F		
	AND COUNSELING.	OR INIDICATION	1011
2	Did the organization undertake any significant program services during the year which were not listed on		
	the pnor Form 990 or 990-EZ?	Yes	No XX
	If "Yes," describe these new services on Schedule O.		(TEF)
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s? LYes	s X No
	If "Yes," describe these changes on Schedule O.	ovpoppos	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount		
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	or granto and	
4a	(Code) (Expenses \$ 11870254 • including grants of \$ 10869501 •)		
	GRANTS ADMINISTRATION- THE CENTER ADMINISTERS GRANTS T		PPORT
	TO BOTH EXISTING AND DEVELOPING CHILDREN'S ADVOCACY CE	NTERS.	
			.
4b	(Code:) (Expenses \$ 859,087 • including grants of \$)	(Revenue \$	· · ·
40	TRAINING, TECHNICAL ASSISTANCE, AND NETWORKING- THE NE		ES
	SUPPORT TO EXISTING CHILDREN'S ADVOCACY CENTERS, ASSIS	TANCE TO	
	COMMUNITIES DEVELOPING CHILDREN'S CENTER PROGRAMS AND		TO
	COMMUNITIES NOT YET AWARE OF CHILDREN'S ADVOCACY CENTE	RS.	
		-	
		· · · · · · · · · · · · · · · · · · ·	
		<u></u>	
4c	(Code:) (Expenses \$ including grants of \$)	(Hevenue \$	
4d	, ,		
_	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 12,729,341.		·
<u>4e</u>	Total program service expenses ► 12,729,341.	Form	990 (2010)
03200 12-21		1 01111	(2010)

Part IV Checklist of Required Schedules

			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	140
1	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		х
4	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
E	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
c	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			-
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8	ľ	х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			-
5	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			 -
	If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
••	as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		1	
-	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ŀ	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	İ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			_
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	L	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		l	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16_	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	Í
	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	<u> </u>	X
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	L	X
þ	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	ĺ		
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	<u> </u>	
		Form	990 ((2010)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	1	.,	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	_X_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			7.7
_	Schedule K If "No", go to line 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04=		
	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24u		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			-
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			Х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			.
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_		Х
34	Was the organization related to any tax-exempt or taxable entity?	24		х
35	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34 35		X
∞ a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	 ~		 -
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			ļ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?]
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	9 90 (2010)

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 34			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming		ļ '	
	(gambling) winnings to prize winners?	1 1	1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		·		
	filed for the calendar year ending with or within the year covered by this return	2a 13		'	1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	s)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		_3a	 	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		├
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other			1	
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a_	├	X
b	If "Yes," enter the name of the foreign country:	<u> </u>			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.			Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		_5a	├──	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction for the form 1986 To	iction?	5b 5c		-
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	ne organization solicit	<u> 50</u>	\vdash	
Ųa	any contributions that were not tax deductible?	ne organization solicit	6a	1 '	x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions are statement than such contributions.	tions or aifts			
_	were not tax deductible?	g	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a	i '	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d		ł	l
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7e_	└	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7 f	├	X
9	If the organization received a contribution of qualified intellectual property, did the organization file F		7g	Ь—	_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, airplane		7h_	 	├
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D			}	j
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8	├─	├
9	Sponsoring organizations maintaining donor advised funds.		00	ŀ	}
a b	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?		9a 9b	 	\vdash
10	Section 501(c)(7) organizations. Enter:		30		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	l	l
11	Section 501(c)(12) organizations. Enter:		1		
а	Gross income from members or shareholders	11a	ļ		
b	Gross income from other sources (Do not net amounts due or paid to other sources against		[1	
	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a	<u> </u>	<u>] </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	└	↓
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1 1	1		İ
	organization is licensed to issue qualified health plans	13b	1	1	ľ
	Enter the amount of reserves on hand	13c	<u> </u>	 	+-
	Did the organization receive any payments for indoor tanning services during the tax year?		14a	├	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e U	14b	1000	(0040)
			rorm	990	(ZU IU)

Form 990 (2010) NATIONAL CHILDREN'S ALLIANCE 63-1044781 Page

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

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{X}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a_	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:	_		
a	The governing body?	8a	X	-
_	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	ا ا		х
Soc	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
360	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
100	Does the organization have local chapters, branches, or affiliates?	10a	X	140
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
	and branches to ensure their operations are consistent with those of the organization?	10b	х	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ļ		
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			32
	taxable entity during the year?	16a		<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
500	exempt status with respect to such arrangements?	16b		
	List the states with which a copy of this Form 990 is required to be filed NONE			
17	List are stated with which a depy of and reminded to be made	for		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available Check all that apply	101		
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fins	ncial	
19	statements available to the public	11116		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	tion:	•	
	CRYSTAL COLLETTE - 719-527-0960			
	516 C STREET, NE, WASHINGTON, DC 20002			
			000	0040

032006 12-21-10

Form **990** (2010)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter ·0· in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

hours for week (describe hours for related organizations and other compensation from the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations and the organizations are seen to the organizations and the organizations are seen to the organizations and the organizations are seen to the organizations and the organizations are seen to the organizations are seen to the organizations and the organizations are seen to the org	Check this box if neither the organization n	(B)				C)			(D)	(E)	(F)
Week Gleschbe Page Pag	Name and Title	Average	l								Estimated
Geschbe hours for related organizations model of the four state of the four state of related organizations model of the four state of			(C	heck	all	hat apply)			· '		
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National Secretary	HENRY SHIEMBOB										
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	TERESA HUIZAR		Π								
	EXECUTIVE DIRECTOR	40.00	┞	┡	X	-	├-	┝	183,395.	0.	20,269
		<u> </u>	-	<u> </u>	_	_	<u> </u> 	L			
			\vdash		-		-	_			
			L	<u> </u>		<u> </u>		L	<u> </u>	L	5- 000 (004)

Form **990** (2010)

Part VII Section A. Officers, Directors, Tru		nple	oyee			High	est						
(A)	(B)				C)	_		(D)	(E)		_	(F)	
Name and title	Average hours per	l (c		Pos call		n t app	lv)	Reportable compensation	Reportable compensation				
	week (describe hours for related organizations in Schedule	stee or director	Institutional trustee		Key employee	ensated		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MI	d s	com fr org and	other pensatom the anizat d relat	ation e ion ed
	O)	Individ	Institu	Officer	Кеуеп	Higher emplo	Богтег				orga	anızatı	ons
		_											
		_		_					<u>-</u>			_	
		_		_								_	
						<u> </u> _							
1b Sub-total c Total from continuation sheets to Part VI	I, Section A					>		183,395.		0.		•	69. 0.
d Total (add lines 1b and 1c) Total number of individuals (including but n			linte			(0) 111		183,395.	000 in reported	0.	2	0,2	69.
compensation from the organization			i ii Ste				10 1	eceived more than \$100	,,000 iii reportab	16		Yes	1 No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	yee,	or h	highest compensated ei	mployee on		•	103	х
4 For any individual listed on line 1a, is the su	ım of reportab	le c							the organization		3	х	
and related organizations greater than \$15i 5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion i	from	an	y uni			idual for services	5	4	Α	v
rendered to the organization? If "Yes," com Section B. Independent Contractors							_				5		X
Complete this table for your five highest co the organization. NONE	mpensated in	dep	ende	ent c	cont	tracte	ors 1	that received more than	\$100,000 of cor	npens			
(A) Name and business	address							(B) Description of s	services	С	ompe	C) nsatio	'n
1000													
Total number of independent contractors (i \$100,000 in compensation from the organization).	-	ot l	mite	d to		ose li O	stec	d above) who received n	nore than		•		
2 100,000 in compensation from the organi	Lanon					<u>-</u>					Form	990 (2010\

	<u></u>					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts	1	а	Federated campaigns	1a					
ar oun		b	Membership dues	1b					
Contributions, gifts, grants and other similar amounts	1	c	Fundraising events	1c			1		
ar a		d	Related organizations	1d					
n, ini		e	Government grants (contribut	ions) 1e	12,751,474.				,
atio er s		f	All other contributions, gifts, gran	ts, and			[
들충			similar amounts not included abor	/e 1f _	9,396.				
gg		g	Noncash contributions included in lines	1a-1f \$					
<u>Q</u> <u>e</u>		h	Total. Add lines 1a-1f	<u> </u>		12,760,870.			
				_	Business Code	600 500	600 500		
<u>9</u>	2	а	SOFTWARE PROJEC		900099	623,590.	623,590.		
er re		b	MEMBERSHIP DUES	<u></u>	900099	362,834.	362,834.	. <u> </u>	
E S	ł	С	ACCREDITATION		900099	340,000.	340,000.		
Program Service Revenue]	d	CONFERENCE FEES		900099	183,450.	183,450.		
õ	}	е			<u> </u>				
ш.		f	All other program service reve	nue	L	1509874.			
	-		Total. Add lines 2a-2f		▶	1505074.			
	3		Investment income (including	dividends, inte	rest, and	723.			723.
	١.		other similar amounts)			743.			143.
	4		Income from investment of tax	x-exempt bona	proceeds				
	5		Royalties	(A Deel	(v) Damaral				
	ے ا	_	Gross Rents	(i) Real	(II) Personal				
	"			-	+]		
			Less: rental expenses Rental income or (loss)	- -	 				
	ł		Net rental income or (loss)	L					
	٦,		Gross amount from sales of	(i) Securities	(II) Other				
	′	a	assets other than inventory	(i) Occurres	(ii) Other				
		h	Less: cost or other basis						
		-	and sales expenses	}					
	1	c	Gain or (loss)		<u> </u>				
			Net gain or (loss)		•				
•	8		Gross income from fundraisin	a events (not	<u> </u>				
enne	`	_	including \$	of					
eve			contributions reported on line						
Other Rev	ļ		Part IV, line 18	•	a				
ŧ		ь	Less: direct expenses		,				
0			Net income or (loss) from fund	draising events	•	'			
	9		Gross income from gaming ac	-					
			Part IV, line 19		a				
		b	Less. direct expenses	1					
	1	С	Net income or (loss) from gam	ing activities	>				
	10	а	Gross sales of inventory, less	returns					
			and allowances	•	a				
	l	b	Less: cost of goods sold	ı	o [1		
	<u> </u>	С	Net income or (loss) from sale	s of inventory					
			Miscellaneous Revenu	е	Business Code				
	11	а	MISCELLANEOUS		900099	3,646.	3,646.		<u> </u>
	1	b							
		Ç							
		đ	All other revenue						
		е	Total. Add lines 11a-11d		•	3,646.			
000	12		Total revenue. See instructions.			14,275,113.	1513520.	_0.	723.
12-2)09 1-10								Form 990 (2010)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	10,869,501.	10,869,501.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	221,657.	172,077.	35,089.	14,491
6	Compensation not included above, to disqualified			· · · · · ·	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	652,517.	569,168.	83,349.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	30,055.	26,524.	3,531.	
9	Other employee benefits	74,962.	69,507.	5,455.	
10	Payroll taxes	59,499.	50,911.	8,588.	
11	Fees for services (non-employees)				
а	Management				
	Legal	04 675	04 675		
	1.	94,675.	94,675.		
d					<u> </u>
е	Professional fundraising services. See Part IV, line 17	 -			
f	Investment management fees	364,621.	364,365.	256.	
_ g	Other	304,021.	304,303.		
12	Advertising and promotion	18,073.	7,296.	10,777.	
13 14	Office expenses Information technology	190,084.	,,250.	190,084.	
15	Royalties			230,0023	
16	Occupancy				
17	Travel	57,602.	49,261.	8,341.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	366,369.	202,196.	164,173.	
20	Interest	67,562.	67,562.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	94,220.		94,220.	
23	Insurance	9,966.		9,966.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	ACCREDITATION	222,879.		222,879.	
b	STAFF TRAINING	115,100.	115,100.		
c	TELEPHONE	35,007.	33,680.	1,327.	
đ	MISCELLANEOUS	22,668.		22,668.	
e	UTILITIES	_18,654.	18,654.		
f	All other expenses	31,355.	18,864.	12,491.	
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	13,617,026.	12,729,341.	873,194.	14,491
26	Joint costs. Check here ☐ If following SOP 98-2 (ASC 958-720). Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	0. 12-21-10				Form 990 (2010

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orm	990 (N'S ALLIANCE		<u>63-1</u>	044781 Page 11
Par	t X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		458,422.	1	803,433
1	2	Savings and temporary cash investments		259,054.	2	468,786
	3	Pledges and grants receivable, net		48,985.	3	432,425
	4	Accounts receivable, net		22,628.	4	55,217
	5	Receivables from current and former officers, director	ors, trustees, key			
		employees, and highest compensated employees. (Complete Part II			
- 1		of Schedule L			5	
	6	Receivables from other disqualified persons (as defi	ned under section			
- 1		4958(f)(1)), persons described in section 4958(c)(3)(l	3), and contributing		1 1	
		employers and sponsoring organizations of section	501(c)(9) voluntary		li	
.]		employees' beneficiary organizations (see instruction	ns)		6	
ets	7	Notes and loans receivable, net	·		7	<u> </u>
Assets	8	Inventories for sale or use			8	
`	9	Prepaid expenses and deferred charges	Ī	18,360.	9	45,770
Ì	10a	Land, buildings, and equipment: cost or other				
ļ		basis Complete Part VI of Schedule D	a 2,403,711.]]	
	b	Less: accumulated depreciation 10	<u> </u>	1,972,008.	10c	1,877,788
	11	Investments - publicly traded securities			11	
ĺ	12	Investments - other securities. See Part IV, line 11	Ì		12	
Į	13	Investments · program-related. See Part IV, line 11	ľ		13	
ł	14	Intangible assets			14	
- 1	15	Other assets. See Part IV, line 11		· · · · ·	15	
J	16	Total assets. Add lines 1 through 15 (must equal lin	ne 34)	2,779,457.	16	3,683,419
	17	Accounts payable and accrued expenses		136,796.	17	430,465
1	18	Grants payable	•		18	
- 1	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
g l	21	Escrow or custodial account liability Complete Part	IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, tr				
ఐ		highest compensated employees, and disqualified p	persons Complete Part II			
=		of Schedule L	·		22	
- 1	23	Secured mortgages and notes payable to unrelated	third parties	1,458,974.	23	1,422,483
- 1	24	Unsecured notes and loans payable to unrelated the	rd parties		24	
- }	25	Other liabilities Complete Part X of Schedule D	·	92,278.	25	80,975
	26	Total liabilities, Add lines 17 through 25		1,688,048.	26	1,933,923
		Organizations that follow SFAS 117, check here	▶ X and complete			
ရှူ		lines 27 through 29, and lines 33 and 34.				
ğ	27	Unrestricted net assets	Į	1,091,409.	27	<u>1,749,496</u>
32	28	Temporanly restricted net assets		28		
<u> </u>	29	Permanently restricted net assets	[29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check	k here 🕨 🔲 and			
ō		complete lines 30 through 34.			1 1	
ets	30	Capital stock or trust principal, or current funds			30	
SSt	31	Paid-in or capital surplus, or land, building, or equip	ment fund		31	
¥	32	Retained earnings, endowment, accumulated incom	F		32	
ž	~~	Total not appote or find halances		1 091 409.	22	1 749 496

1,749,496. 3,683,419. Form **990** (2010)

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,091,409. 33 2,779,457. 34

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2010)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name	of the organiza	tion			_			E	mployer i	dentification	number	
		NATIONA	L CHILDREN'S	ALLI	ANCE				63	3-10447	81	
Part	I Reasor	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	t.) See inst	ructions.				
The org	anization is not	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox)					
1 🗀	A church, c	onvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)					
2 🗀	A school de	scribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗀	\neg		tal service organization	•		170(b)(1)	(A)(iii).					
4			operated in conjunction					(b)(1)(A)(ii	ii). Enter ti	he hospital's	name,	
	city, and sta	=	•		•				•	·		
5 🗀	_ `		benefit of a college or ur	niversity o	wned or or	perated by	a governi	nentai uni	t describe	ed in		
	=	0(b)(1)(A)(iv). (Comple	=	•		•	•					
6	\neg		ent or governmental uni	t describe	d ın sectio	n 170(b)(1	I)(A)(v).					
7	- 1	-	•					r from the	general p	oublic describ	oed in	
	الـ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8 🗀	\neg		section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🔯	=7		eives (1) more than 33			rom contri	butions, m	nembershi	p fees, ar	nd gross rece	pts from	
	activities re	lated to its exempt fui	nctions - subject to certa	an excepti	ons, and (2) no more	than 33 1	/3% of its	s support	from gross in	vestment	
	income and	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization a	after June 30,	, 1975.	
		n 509(a)(2). (Complete										
10	🗌 An organiza	ation organized and o	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	I).				
11	An organiza	tion organized and o	perated exclusively for the	ne benefit	of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of	one or	
	more public	ly supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se c	tion 509(a)(3). Che	ck the box th	nat	
	describes t	he type of supporting	organization and compl	ete lines 1	1e through	11h.						
_	а 🔲 Туре	el b	☐ Type II 💢	с 🗀 Тур	e III - Fund	tionally int	egrated		d 🗀	Type III - Otl	her	
e 🗀	By checking	g this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified p	persons other	r than	
	foundation	managers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 509	9(a)(1) or s	section 509(a	1)(2).	
f	If the organ	ization received a writ	tten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting	organization, check ti	nis box									
g	Since Augu	st 17, 2006, has the o	organization accepted ai	ny gift or c	ontribution	n from any	of the foll	owing per	sons?	_		
	(i) A pers	on who directly or inc	lirectly controls, either a	lone or tog	jether with	persons o	described	ın (ıı) and ((III) below,	\	Yes No	
	the go	verning body of the s	upported organization?							11g(i)		
	(ii) A famı	ly member of a perso	n described in (i) above?	,					•	11g(ii)		
	(iii) A 35%	controlled entity of a	ı person described in (i)	or (II) abov	e?					11g(iii)		
h	Provide the	following information	about the supported or	ganızatıon	(s).							
			- ///O - /						- 			
(i) Na	me of supported	(ii) EIN	(iii) Type of organization		organization		notify the	(vi) is organizati	s the on in col.	(vii) Amo	unt of	
(organization		(described on lines 1-9		sted in your document?		r support?	(i) organiz U.S	ed in the	suppo	ort	
		ļ	above or IRC section									
		ļ	(see instructions))	Yes	No	Yes	No	Yes	No			
		ļ	ļ									
		 		<u> </u>	 		<u> </u>	 	} }-			
				1		İ						
		-			 		<u> </u>	<u> </u>	├			
				1		[[1 [
			ļ <u></u>	 	 	<u> </u>		<u> </u>	 		 .	
		}		ļ	}	ĺ	j	1	1 1			
		 	 	 	 			 	╂──┼			
]									
			 	 	 	 	<u> </u>	 	 			
Total				}		!		1				

032021 12-21-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

LHA For Paperwork Reduction Act Notice, see the Instructions for

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		ļ]		j	
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to]	ļ	
	the organization without charge						
4	Total, Add lines 1 through 3						
	The portion of total contributions	-					
Ŭ	by each person (other than a	i					
	governmental unit or publicly						•
	supported organization) included				ļ	J	
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4			 			
	etion B. Total Support		L	<u> </u>	<u> </u>	L	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	(a) 2000	(b) 2001	(6) 2000	(4) 2009	(6) 2010	(i) iotai
	Gross income from interest,						
٠	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
0	Net income from unrelated business			 	ļ	 	
9							
	activities, whether or not the		1				:
40	business is regularly carried on		! 				
10	Other income Do not include gain						
	or loss from the sale of capital						
44	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10	-1		<u> </u>		40	
	Gross receipts from related activities,	•	•			12	
13	First five years. If the Form 990 is for	=	s iirst, secona, tni	ra, tourth, or titth t	ax year as a section	on 501(c)(3)	⊾ —
organization, check this box and stop here Section C. Computation of Public Support Percentage							
	Public support percentage for 2010 (I			column (f)\		14	
	Public support percentage from 2009			Coldinii (i))		15	<u>%</u> %
	33 1/3% support test - 2010.If the o			n line 13, and line	14 is 33 1/304 or n		
100	stop here. The organization qualifies	_			14 13 33 17370 07 11	nore, check this bo	^ and
h	33 1/3% support test - 2009.If the or		•		lina 15 is 33 1/3%	or more check th	us boy
_	and stop here. The organization quali				11116 13 13 33 1/3/0	or more, check tr	▶ □
170	· · · · · · · · · · · · · · · · · · ·	, -			12 160 or 16b	and line 14 is 1004	or more
1/8	10% -facts-and-circumstances test	_					
	and if the organization meets the "fac					irt iv now the orgal	iization _
	meets the "facts-and-circumstances"	•	•		•	17- and to - 45	100/ 07
t	10% -facts-and-circumstances test						
	more, and if the organization meets the						,
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	oa, 16b, 17a, or 17	D, Check this box	and see instruction	

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 NATIONAL CHILDREN'S ALLIANCE Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	qualify under the tests listed by ction A. Public Support	elow, please comp	olete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(a) 2010	(f) Total
	Gifts, grants, contributions, and	(a) 2006	(b) 2007	(0) 2008	(a) 2009	(e) 2010	(i) Total
•	membership fees received. (Do not	ĺ					
	Include any "unusual grants.")	10,154,423.	9,184,674.	8,208,607.	11,359,424.	12,760,870.	51,667,998.
2	, , ,	10,134,413.	3,104,074.	0,200,007.	11,555,101.	12,700,070.	31,001,3301
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the	493 337	711,103.	983,287.	1,082,491.	1,509,874.	4 780 092
•	organization's tax-exempt purpose	493,337.	/11,100.	303,207.	1,002,401.	1,305,074.	4,780,092.
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-		J]	
	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities		j				
	furnished by a governmental unit to						
	the organization without charge	10 645 560	0.005.888	0.101.004	10 441 015	14 070 744	56 440 000
	Total. Add lines 1 through 5	10,647,760.	9,895,777.	9,191,894.	12,441,915.	14,270,744.	56,448,090.
78	Amounts included on lines 1, 2, and						0
	3 received from disqualified persons						0.
Ľ	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						0.
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)		-11.				56,448,090.
$\overline{}$	ction B. Total Support	·		···	<u> </u>	 	
	endar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6	10,647,760.	9,895,777.	9,191,894.	12,441,915.	14,270,744.	56,448,090.
10a	a Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties	4 065	0 040	4 000	700		0 040
	and income from similar sources	1,867.	2,948.	1,983.	792.	723.	8,313.
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	1,867.	2,948.	1,983.	792.	723.	8,313.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carned on						
12	Other income. Do not include gain			. <u>.</u>]			
	or loss from the sale of capital assets (Explain in Part IV)	7,163.		17,204.	1,525.	3,646.	<u>40,298.</u>
13	Total support (Add lines 9, 10c, 11, and 12)	10,656,790.	9,909,485.	9,211,081.	12,444,232.	14,275,113.	56,496,701.
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,					ation,	
	check this box and stop here						
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2010 (I	ine 8, column (f) d	ıvıded by lıne 13, d	olumn (f))		15	99.91 %
16	<u>v</u>					16	99.85 %
<u>Se</u>	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	10 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	.01 %
18	,			-		18	.02 %
19	a 33 1/3% support tests - 2010. If the	organization did r	ot check the box	on line 14, and line	15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly s	upported organiz	ation	▶ X
ŀ	o 33 1/3% support tests - 2009. If the	organization did r	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	eck this box and st	top here. The orga	inization qualifies a	as a publicly supp	orted organization	▶∐
20	Private foundation. If the organization	n d <u>id not check a</u>	box on line 14, 19	a, or 19b, check th	is box and see in	structions	
0320	023 12-21-10				Sch	edule A (Form 99	0 or 990-EZ) 2010

15

SCHEDULE D

Supplemental Financial Statements

(Form 990)

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Nam	NATIONAL CHILDREN'		<u>.</u>	63-104478	
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Acco	unts. Complete if the	
	organization answered "Yes" to Form 990, Part IV, line	e 6			
		(a) Donor advised funds	(b) Fur	nds and other accounts	3
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	ınds		
	are the organization's property, subject to the organization's			Yes	□ No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conf	erring		
	impermissible private benefit?		_	Yes	□ No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part I	/ <u>,</u> line 7	•	
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)			
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historic	ally imp	ortant land area	
	Protection of natural habitat	Preservation of a certified	histonc	structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conserv	ation easement on the	last
	day of the tax year				
				Held at the End of the T	ax Year
а	Total number of conservation easements		2a		
þ	Total acreage restricted by conservation easements		2b		
C	Number of conservation easements on a certified historic str	ructure included in (a)	2c	 	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure			
	listed in the National Register		2d	L	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	anızatıo	n during the tax	
	year -				
4	Number of states where property subject to conservation ea				
5	Does the organization have a written policy regarding the pe			г г	—
_	violations, and enforcement of the conservation easements i		. 41	└── Yes └	l No
6	Staff and volunteer hours devoted to monitoring, inspecting,	-	_		_
7	Amount of expenses incurred in monitoring, inspecting, and			\$	
8	Does each conservation easement reported on line 2(d) above and another 170/1/10/10	ve satisfy the requirements of section 170(n)(4)	(B)(I)	Yes	□ No
0	and section 170(h)(4)(B)(ii)?	transportation to revenue and expense state	omont		
9	In Part XIV, describe how the organization reports conservat include, if applicable, the text of the footnote to the organiza	•			u
		mons infancial statements that describes the c	n yan nza	ation's accounting for	
Pa	conservation easements t III Organizations Maintaining Collections o	of Art. Historical Treasures, or Other	Simi	lar Assets.	
	Complete if the organization answered "Yes" to Form	•	U	7.000101	
1a	If the organization elected, as permitted under SFAS 116 (AS	······································	and ba	lance sheet works of ar	— rt
	historical treasures, or other similar assets held for public ex	,			
	the text of the footnote to its financial statements that descr		or publi	o corrido, provido, ii r	,
ь	If the organization elected, as permitted under SFAS 116 (AS		balanc	e sheet works of art. his	stoncal
_	treasures, or other similar assets held for public exhibition, e	•			
	relating to these items.	addation, or rootal or in raining and or public o	,	provide the femolining at	
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$	
	(ii) Assets included in Form 990, Part X			\$	
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial dair			
_	the following amounts required to be reported under SFAS 1	-	., p. 0 v ii		
а	Revenues included in Form 990, Part VIII, line 1		•	\$	
	Assets included in Form 990, Part X		•	\$	
_	- manager was seen and the manager with the			·	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

(a) Description of security or category	(b) Book value	(c) Method of valu	
(including name of security)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cost	or end-of-year ma	irket value
Financial derivatives				
Closely-held equity interests		 		
Other		<u>.</u>		
(A)				
(B)				
(C)				
(D)			-	
(E)				
(F)				
(G)				
(H) (I)				
al. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
art VIII Investments - Program Related.				· ·
			c) Method of valu	iation:
(a) Description of investment type	(b) Book value		or end-of-year ma	
(1)	-			·
(2)				
(3)				
(4)		1		
(5)				•
(6)				
(7)				
(8)				
(9)				
10)				
al. (Col (b) must equal Form 990, Part X, col (B) line 13.)	•			
art IX Other Assets. See Form 990, Part X, II				
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				<u> </u>
(5)				
(6)				
(7)				
(8)				
(9)				
10)				
tal. (Column (b) must equal Form 990, Part X, col (B)			<u> </u>	
art X Other Liabilities. See Form 990, Part	X, line 25.			
(a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2) OTHER DEFERRED REVENUE		80,975.		
(3)				
(4)	_ 			
(4)				
• • • • • • • • • • • • • • • • • • • •				
(5)				
(5) (6)				
(5) (6) (7)				
(5) (6) (7) (8)				
(5) (6) (7) (8) (9)				
(5) (6) (7) (8) (9)	line 25) ▶	80,975.	IIIOD'S IIZNIIIO VAY IIAAAN	TAIN YAY DONNIARS HARAF

032054

TAX AUTHORITIES.

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

Schedule I (Form 990) (2010) 216. 2011 PROGRAM IMPROVEMENT ² | 2011 PROGRAM DEVELOPMENT 2010 PROGRAM DEVELOPMENT Employer identification number 63-1044781 (h) Purpose of grant or assistance 8923-10 CH TIER X Yes ND EXPANSION Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any AND EXPANSION TIER 2011 TIER 2 2011 CH recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part il can be duplicated if additional space is needed and address of organization (b) EIN (c) IRC section or government (d) Amount of cash grant or government (e) FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 0 ٠. ö 0 。 ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 93,687, 20,227 179,542. 5,720 62,188 12,397 ALLIANCE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 501(C)(3) 91-1817911 501(C)(3) 501(C)(3) Enter total number of section 501(c)(3) and government organizations 501(C)(3) 501(C)(3) NATIONAL CHILDREN'S 20-0798040 63-1048697 63-1014993 63-1096717 63-1048697 General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization ADVOCACY CENTER - 935 SOUTH PERRY INC. - THE CHILDREN'S PLACE - 530 SOUTHEAST ALABAMA CHILD ADVOCACY CENTER, INC. - 110 HARMONY LANE MATANUSKA COMMUNITY HEALTH CARE TALKEETNA STREET - WASILLA, AK THE ALASKA CHILDREN'S ALLIANCE STREET - MONTGOMERY, AL 36104 ALABAMA NETWORK OF CAC'S INC. ALABAMA NETWORK OF CAC'S INC. CHILDREN'S MONTGOMERY, AL 36104 MONTGOMERY, AL 36104 Name of the organization 18027 AMONSON ROAD CHUGIAK, AK 99567 DOTHAN, AL 36303 935 PERRY STREET 935 PERRY STREET CHILD PROTECT, Parti Part II 99654

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NATIONAL CHILDREN'S ALLIANCE

Schedule 1 (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	rizations in the Ur	ited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ALASKA CHILDREN'S ALLIANCE 18027 AMONSON ROAD CHUGIAK, AK 99567	20-0798040	501(C)(3)	55,864.	0.			"8925-10 CH TIER 4
ARIZONA CHILD AND FAMILY ADVOCACY NETWORK - P.O. BOX 2780 - PRESCOTT, AZ 86302	86-0953031	501(C)(3)	79,946.	0.			"2011 CH TIER 4
NAVAJO COUNTY FAMILY ADVOCACY CENTER - 100 E. CARTER DRIVE - HOLBROOK, AZ 86025	86-6000541	501(C)(1)	9,711.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDHELP CHILDREN'S CENTER OF ARIZONA - 2346 N. CENTRAL AVE PHOENIX, AZ 85004	95-2884608	501(C)(3)	24,074.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
ARIZONA CHILD AND FAMILY ADVOCACY NETWORK - P.O. BOX 2780 - PRESCOTT, AZ 86302	86-0953031	501(C)(3)	28,933.	0			"8925-10 CH TIER 4
CHILDREN'S ADVOCACY CENTERS OF ARKANSAS - P.O. BOX 1038 - FAYETTEVILLE, AR 72703	56-2417905	501(C)(3)	85,000.	0			"2011 CH TIER 4
CHILDREN'S ADVOCACY CENTERS OF ARKANSAS - P.O. BOX 1038 - FAYETTEVILLE, AR 72703	56-2417905	501(C)(3)	19,999.	0			"8925-10 CH TIER 4
CALIFORNIA NETWORK OF CAC'S 524 ESTUDILLO AVENUE SAN LEANDRO, CA 94577	81-0675334	501(C)(3)	125,543.	0			"2011 TIER 2
CALICO CENTER 524 ESTUDILLO AVE SAN LEANDRO, CA 94577	94-3256781	501(C)(3)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
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Schedule I (Form 990) NATIONAL (CHILDREN'S	ALLI				9	3-1044781 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go	vernments and Orgar	nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II.)	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALICO CENTER 524 ESTUDILLO AVE SAN LEANDRO, CA 94577	94-3256781	501(C)(3)	45,500.	0			"8919-10 PROGRAM IMPROVEMENT
COMMUNITY VIOLENCE SOLUTIONS - CHILDREN'S INTERVIEW CENTER - 2101 VAN NESS STREET - SAN PABLO, CA 94806	94-2411924	501(C)(3)	44,461.	0.			"8919-10 PROGRAM IMPROVEMENT
CALIFORNIA NETWORK OF CAC'S 524 ESTUDILLO AVENUE SAN LEANDRO, CA 94577	81-0675334	501(C)(3)	107,338.	0			"8923-10 CH TIER 2
COLORADO CHILDREN'S ALLIANCE 1050 CHEROKEE, #412 DENVER, CO 80204	84-1480528	501(C)(3)	129,084.	0.			"2011 CH TIER 3
CHILDREN'S ADVOCACY CENTER FOR PIKES PEAK REGION, INC DBA SAFE PASSAGE - 423 S. CASCADE AVE - COLORADO SPRINGS, CO 80903	84-1241767	501(C)(3)	5,971.	0.			"2011 PROGRAM IMPROVEMENT
RALSTON HOUSE 10795 WEST 58TH AVENUE ARVADA, CO 80002	84-1222085	501(C)(3)	40,716.	•0			"8919-10 PROGRAM IMPROVEMENT
DENVER CHILDREN'S ADVOCACY CENTER 2149 FEDERAL BOULEVARD DENVER, CO 80211	84-1155873	501(0)(3)	35,425.	0.			"8919-10 PROGRAM IMPROVEMENT
COLORADO CHILDREN'S ALLIANCE 1050 CHEROKEE #412 DENVER, CO 80204	84-1480528	501(C)(3)	46,845.	0.			"8924-10 CH TIER 3
THE CONNECTICUT CHILDREN'S ALLIANCE - 6 WEST TRACT ROAD - CROMWELL, CT 06416	06-0712058	501(C)(3)	83,833.	0.			"2011 CH TIER 3 Schedule I (Form 990)
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Schedule I (Form 990) NATIONAL (CHILDREN'S	S ALLIANCE			(((((((((((((((((((63-1044781 Page 1
(a) Name and address of (b) EIN (c) IRC sorganization or government	Assistance to GG	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	section (d) Amount of cable cash grant assistance (book, FMV, assistance appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WENDY'S PLACE-DAY KIMBALL HOSPITAL 55 GREEN HOLLOW ROAD DANIELSON, CT 06239	06-0646599	501(C)(3)	1,510.	0			"2011 PROGRAM IMPROVEMENT
THE CONNECTICUT CHILDREN'S ALLIANCE - 6 WEST TRACT ROAD - CROMWELL, CT 06416	06-0712058	501(C)(3)	35,042.	0.			"8924-10 CH TIER 3
CHILDREN'S ADVOCACY CENTERS OF DELAWARE, INC 611 SOUTH DUPONT HIGHWAY, STE 201 - DOVER, DE 19901	51-0372506	501(C)(3)	85,000.	0.			"2011 CH TIER 4
MANATEE CHILDREN'S SERVICES 453 CORTEZ ROAD WEST BRADENTON, FL 34207	59-1771210	501(C)(3)	13,905.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
KIDS HOUSE OF SEMINOLE, INC. 5467 NORTH RONALD REAGAN BLVD SANFORD, FL 32773	59-3415005	501(C)(3)	10,248.	0.			"2011 PROGRAM IMPROVEMENT
LAKE SUMTER CHILDREN'S ADVOCACY CENTER - 300 S. CANAL ST LEESBURG, PL 34748	59-3466574	501(C)(3)	31,255.	•0			"2011 PROGRAM IMPROVEMENT
MARION COUNTY CHILDREN'S ADVOCACY CENTER, INC KIMBERLY'S COTTAGE - 2800 NE 14TH STREET - OCALA, FL 34470	59-3575631	501(C)(3)	26,649.	0			"2011 PROGRAM IMPROVEMENT
FLORIDA NETWORK OF CHILDREN'S ADVOCACY CENTERS, INC 2940 EAST PARK AVENUE, SUITE A - TALLAHASSEE, FL 32301	59-3496460	501(C)(3)	133,659.	.0			"2011 TIER 2
RRISTI HOUSE, INC. 1265 NW 12 AVENUE MIAMI, FL 33136	65-0576650	501(C)(3)	28,836.	0.			"2011 URBAN INITIATIVES
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Schedule (Form 990) NATIONAL CHILDREN'S ALLIANCE Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	CHILDREN'S	S ALLIANCE	nizations in the Ur	nited States (Sche	dule I (Form 990), Par		63-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KRISTI HOUSE, INC. 1265 NW 12TH AVENUE MIAMI, FL 33136	65-0576650	501(C)(3)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
ORANGE COUNTY CHILDREN'S ADVOCACY CENTER - 601 W. MICHIGAN STREET - ORLANDO, FL 32805	59-2244943	501(C)(3)	50,000.	0.			"8919-10 PROGRAM IMPROVEMENT
KRISTI HOUSE, INC. 1265 NW 12 AVENUE MIAMI, FL 33136	65-0576650	501(C)(3)	26,428.	0.			"8919-10 PROGRAM IMPROVEMENT
FLORIDA NETWORK OF CHILDREN'S ADVOCACY CENTERS, INC 2940 EAST PARK AVENUE, SUITE A - TALLAHASSEE, FL 32301	59-3496460	501(C)(3)	100,869.	0.			"8923-10 CH TIER 2
LILY PAD, INC. D/B/A THE TREEHOUSE CAC - 450 OLD ALBANY ROAD - THOMASVILLE, GA 31792	20-5121248	501(C)(3)	14,327.	0.	:		"2011 PROGRAM DEVELOPMENT AND EXPANSION
HELEN'S HAVEN CHILDREN'S ADVOCACY CENTER - 214 FRASER DRIVE, PO BOX 1544 - HINESVILLE, GA 31310	58-1686152	501(C)(3)	27,774.	0.			"2011 PROGRAM IMPROVEMENT
CHILDREN'S ADVOCACY CENTERS OF GEORGIA - 3355 LENOX ROAD, SUITE 600 - ATLANTA, GA 30326	31-1486065	501(C)(3)	195,786.	.0			"2011 TIER 2
SATILLA ADVOCACY SERVICES 410 DARLING AVENUE WAYCROSS, GA 31501	58-1667166	501(C)(3)	17,602.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
GEORGIA CENTER FOR CHILD ADVOCACY - FULTON COUNTY - 1485-B WOODLAND AVE., S.E - ATLANTA, GA 30316	58-1762069	501(C)(3)	24,838.	0.			"8919-10 PROGRAM IMPROVEMENT Cahadula Hearm 990)
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NATIONAL CHILDREN'S ALLIANCE	rants and Other Assistance to Governments and Organizations in the United States (Sc

Schedule I (Form 990) NATIONAL CHILDREN'S ALLI	CHILDREN'S	S ALLIANCE	lizations in the H	ited States (Sche	ANCE		63-1044781 Page 1
1	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S ADVOCACY CENTERS OF GEORGIA - 3355 LENOX ROAD, SUITE 600 - ATLANTA, GA 30326	31-1486065	501(C)(3)	85,476.	0.			"8923-10 CH TIER 2
FRIENDS CHILDREN'S JUSTICE CENTERS OF HAWAII - 3019 PALI HWY, - HONOLULU, HI 96817	27-3663109	501(C)(1)	78,614.	0			"2011 CH TIER 4
FRIENDS CHILDREN'S JUSTICE CENTERS OF HAWAII - 3019 PALI HWY HONOLULU, HI 96817	27-3663109	501(C)(1)	20,086.	0.			"8925-10 CH TIER 4
IDAHO NETWORK OF CHILDREN'S ADVOCACY CENTERS - 300 E. MALLARD DRIVE - BOISE, ID 83706	82-0410899	501(C)(1)	71,377.	0.			"2011 CH TIER 4
NAMPA FAMILY JUSTICE CENTER 1305 THIRD STREET SOUTH NAMPA, ID 83651	82-6000231	501(C)(1)	9,846.	0			"2011 PROGRAM IMPROVEMENT
BRIGHT TOMORROWS 409 WASHINGTON POCATELLO, ID 83201	82-0396300	501(C)(3)	26,383.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
IDAHO NETWORK OF CHILDREN'S ADVOCACY CENTERS - 300 E. MALLARD DRIVE - BOISE, ID 83706	82-0410899	501(C)(1)	20,501.	0.			"8925-10 CH TIER 4
THE GUARDIAN CENTER, INC. 207 E MAIN ST CARMI, IL 62821	37-1377173	501(C)(3)	7,009.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTERS OF ILLINOIS - 1133 SOUTH SECOND STREET - SPRINGFIELD, IL 62704 LHA	36-4254553	501(C)(3)	259,949.	0			"2011 TIER 1 Schedule I (Form 990)
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLIANCE Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	CHILDREN'S Assistance to Gover	S ALLIANCE	nizations in the Ur	nited States (Sche	dule I (Form 990), Par		63-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S ADVOCACY CENTERS OF ILLINOIS - 1133 SOUTH SECOND STREET - SPRINGFIELD, IL 62704	36-4254553	501(C)(3)	140,028.	.0			"8922-10 CH TIER 1
INDIANA CHAPTER OF NATIONAL CHILDREN'S ALLIANCE - 7910 PRESERVATION DRIVE - INDIANAPOLIS, IN 46278	26-2269042	501(C)(3)	85,000.	0.			"2011 CH TIER 4
BOONE COUNTY CHILD ADVOCACY CENTER, INC 218 E, WASHINGTON ST LEBANON, IN 46052	37-1607071	501(C)(3)	20,683.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
SUSIE'S PLACE - THE HENDRICKS COUNTY CHILD ADVOCACY CENTER - 7386 BUSINESS CENTER DRIVE, SUITE B - AVON, IN 46123	26-2132955	501(C)(3)	31,655.	0.	:		"2011 PROGRAM IMPROVEMENT
CHILD AND FAMILY ADVOCACY CENTER 1000 WEST HIVELY AVENUE ELKHART, IN 46517	35-0888765	501(C)(3)	2,888.	0			"2011 PROGRAM IMPROVEMENT
	35-1899479	501(C)(3)	17,912.	0			"2011 PROGRAM IMPROVEMENT
SUSIE'S PLACE - THE HENDRICKS COUNTY CHILD ADVOCACY CENTER - 7386 BUSINESS CENTER DRIVE, SUITE B - AVON, IN 43123	26-2132955	501(C)(3)	11,106.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
INDIANA CHAPTER OF NATIONAL CHILDREN'S ALLIANCE - 7910 PRESERVATION DRIVE - INDIANAPOLIS, IN 46278	26-2269042	501(C)(3)	22,626.	0			"8925-10 CH TIER 4
IOWA CHAPTER OF CHILDREN'S ADVOCACY CENTERS - 505 FIFTH AVENUE, SUITE 1001 - DES MOINES, IA 50309	42-1467682	501(C)(3)	64,666.	0			"2011 CH TIER 4
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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA CHAPTER OF CHILDREN'S ADVOCACY CENTERS - 505 FIFTH AVENUE, SUITE 1001 - DES MOINES, IA 50309	42-1467682	501(C)(3)	31,209.	.0			"8925-10 CH TIER 4
KANSAS CHAPTER OF CHILDREN'S ADVOCACY CENTERS - 15301 W. 87TH STREET, SUITE 260 - LENEXA, KS 66219	20-8497489	501(C)(3)	125,283.	0			"2011 CH TIER 3
SUNLIGHT CHILD ADVOCACY CENTER 110 S. GORDY ST. EL DORADO, KS 67042	84-1648274	501(C)(3)	3,684.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
WESTERN KANSAS CHILD ADVOCACY CENTER-SCOTT CITY - 103 E, 9TH - SCOTT CITY, KS 67871	20-1055623	\$01(C)(3)	16,856.	0			"2011 PROGRAM IMPROVEMENT
WESTERN KANSAS CHILD ADVOCACY CENTER-COLBY - 103 E. 9TH - COLBY, KS 67701	20-1055623	501(C)(3)	25,204.	0			"8919-10 PROGRAM IMPROVEMENT
WESTERN KANSAS CHILD ADVOCACY CENTER - MOBILE UNIT - 103 E. 9TH - SCOTT CITY, KS 67871	20-1055623	501(C)(3)	25,613.	0.			"8919-10 PROGRAM IMPROVEMENT
KANSAS CHAPTER OF CHILDREN'S ADVOCACY CENTERS - 15301 W. 87TH STREET, SUITE 260 - LENEXA, KS 66219	20-8497489	501(C)(3)	69,319.	0.			"8924-10 CH TIER 3
KENTUCKY ASSOCIATION OF CHILDREN'S ADVOCACY CENTERS - 649 CHARITY COURT, SUITE 12 - FRANKFORT, KY 40601	61-1395277	501(C)(3)	87,929.	0			"2011 CH TIER 3
NORTHERN KENTUCKY CHILDREN'S ADVOCACY CENTER - 4890 HOUSTON ROAD - FLORENCE, KY 41042	26-3272297	501(C)(3)	1,182,	0			"2011 PROGRAM IMPROVEMENT
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Schedule I (Form 990) NATIONAL C	CHILDREN'S	ALLI				9	3-1044781 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go		izations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II)	(II)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNYRILE CAC 409 E. 7TH STREET HOPKINSVILLE, KY 42240	61-1399197	501(C)(3)	9,594.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
KENTUCKY ASSOCIATION OF CHILDREN'S ADVOCACY CENTERS - 649 CHARITY COURT, SUITE 12 - FRANKFORT, KY 40601	61-1395277	501(C)(3)	60,047.	0.			"8924-10 CH TIER 3
CHILDREN'S ADVOCACY CENTERS OF LOUISIANA - 9654 BROOKLINE AVENUE SUITE 210 - BATON ROUGE, LA 70809	72-1474064	501(C)(3)	110,394.	0			"2011 CH TIER 3
CHILDREN'S ADVOCACY CENTERS OF LOUISIANA - 9654 BROOKLINE AVENUE SUITE 210 - BATON ROUGE, LA 70809	72-1474064	501(C)(3)	30,690.	0			"8924-10 CH TIER 3
MARYLAND CHILDREN'S ALLIANCE 2825 GRIER NURSERY ROAD FOREST HILL, MD 21050	42-1602584	501(C)(3)	60,929.	0			"2011 CH TIER 3
HARFORD COUNTY CHILD ADVOCACY CENTER - 23 NORTH MAIN STREET - BEL AIR, MD 21014	53-6000959	501(C)(1)	2,530.	.0			"2011 PROGRAM IMPROVEMENT
BALTIMORE CHILD ABUSE CENTER 2300 NORTH CHARLES STREET, 4TH FLOO BALTIMORE, MD 21218	52-1681279	501(C)(3)	59,079.	0			"8916-10 URBAN INITIATIVES
BALTIMORE CHILD ABUSE CENTER 2300 NORTH CHARLES STREET, 4TH FLOO BALTIMORE, MD 21218	52-1681279	501(0)(3)	16,026.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
BALTIMORE CHILD ABUSE CENTER 2300 NORTH CHARLES STREET, 4TH FLOO BALTIMORE, MD 21218	52-1681279	501(C)(3)	21,204.	0			"8919-10 PROGRAM IMPROVEMENT
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(a) Name and address of (b) EIN (c) IRCs organization or government if applications and address of the properties of the	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARYLAND CHILDREN'S ALLIANCE 2825 GRIER NURSERY ROAD FOREST HILL, MD 21050	42.1602584	501(C)(3)	68,719.	Ö			"8924-10 CH TIER 3
CHILDREN'S ADVOCACY CENTER OF SUFFOLK COUNTY - 989 COMMONWEALTH AVENUE - BOSTON, MA 02215	04-3273300	501(C)(3)	23,406.	.0			"2011 CAC RESPONSE TO
MASSACHUSETTS CHILDREN'S ALLIANCE 14 BEACON STREET, SUITE 420 BOSTON, MA 02108	34-2006038	501(C)(3)	89,548.	0.	,		"2011 CH TIER 3
BERKSHIRE COUNTY KIDS' PLACE AND VIOLENCE PREVENTION CENTER - 63 WENDELL AVENUE - PITTSFIELD, MA 01201	04-3193833	501(C)(3)	12,828.	0.0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL- CHILD PROTECTION PROGRAM - 55 LAKE AVE NORTH - WORCESTER, MA 01655	04-3167352	501(C)(3)	12,872.	.0			"2011 PROGRAM IMPROVEMENT
UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL- CHILD PROTECTION PROGRAM - 55 LAKE AVE NORTH - WORCESTER, MA 01655	04-3167352	501(C)(3)	21,379.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
NORFOLK ADVOCATES FOR CHILDREN 12 PAYSON RD FOXBOROUGH, MA 02035	04-3693324	501(C)(3)	11,031.	0			"8919-10 PROGRAM IMPROVEMENT
CHILDREN'S ADVOCACY CENTER OF SUFFOLK COUNTY - 989 COMMONWEALTH AVENUE - BOSTON, MA 02215	04-3273300	501(C)(3)	26,800.	•0			"8919-10 PROGRAM IMPROVEMENT
NORFOLK ADVOCATES FOR CHILDREN 12 PAYSON RD FOXBOROUGH, MA 02035	04-3693324	501(C)(3)	18,794.	0			"8919-10 PROGRAM IMPROVEMENT Schedule I (Form 990)

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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI Part II Continuation of Grants and Other Assistance to Governments	CHILDREN'S Assistance to Gove	S ALLIANCE	nizations in the Ur	nited States (Sche	ANCE and Organizations in the United States (Schedule I (Form 990), Part II)	63 nii)	3-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS CHILDREN'S ALLIANCE 14 BEACON STREET, SUITE 420 BOSTON, MA,02108	34-2006038	501(C)(3)	34,011.	0.			8925-10 CH TIER 4
GRATIOT COUNTY CHILD ADVOCACY ASSOCIATION - 525 N. STATE ST., SUITE 4 - ALMA, MI 48801	38-2179785	501(C)(3)	6,088.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CHILD AND FAMILY ENRICHMENT COUNCIL - 3333 S. LINCOLN RD MT. PLEASANT, MI 48858	38-2485330	501(¢)(3)	13,784.	0.	i.		"2011 PROGRAM DEVELOPMENT AND EXPANSION
TRAVERSE BAY CHILDREN'S ADVOCACY CENTER - 121 EAST FRONT STREET, SUITE 301 - TRAVERSE CITY, MI 49684	38-3090530	501(C)(3)	14,649.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTER-CAN COUNCIL GREAT LAKES BAY REGION SAGINAW - 1311 N. MICHIGAN - SAGINAW, MI 48602	38-2480726	501(C)(3)	16,681.	0.			"2011 PROGRAM IMPROVEMENT
MICHIGAN CHAPTER OF THE NATIONAL CHILDREN'S ALLIANCE - P.O. BOX 543 - HUDSONVILLE, MI 49426	38-2118108	501(C)(3)	192,054.	.0			"2011 TIER 2
WASHTENAW CHILD ADVOCACY CENTER 555 TOWNER YPSILANTI, MI 48198	38-1654500	501(c)(3)	28,707.	0.			"8919-10 PROGRAM IMPROVEMENT
CHILD AND FAMILY ENRICHMENT COUNCIL - 3333 S. LINCOLN RD MT. PLEASANT, MI 48858	38-2485330	501(C)(3)	23,351.	0.			"8919-10 PROGRAM IMPROVEMENT
MICHIGAN CHAPTER OF THE NATIONAL CHILDREN'S ALLIANCE - P.O. BOX 543 - HUDSONVILLE, MI 49426 LHA	38-2118108	501(C)(3)	55,329.	0.		;	"8924-10 CH TIER 3 Schedule I (Form 990)

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(a) Name and address of (b) EIN (c) IRO so organization or government if appli	(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA CHILDREN'S ALLIANCE 15225 SQUARE LAKE TRAIL N. STILLWATER, MN 55082	26-3318481	501(C)(3)	60,814.	0.			"2011 CH TIER 4
MINNESOTA CHILDREN'S ALLIANCE 15225 SQUARE LAKE TRAIL N. STILLWATER, MN 55092	26-3318481	501(C)(3)	17,668.	0.			"8925-10 CH TIBR 4
CHILDREN'S ADVOCACY CENTERS OF MISSISSIPPI - 425 MAGAZINE STREET - TUPELO, MS 38804	27-2541336	501(C)(3)	87,573.	0.			"2011 CH TIER 4
MISSISSIPPI COMMUNITY EDUCATION CENTER - 1203 JOHN PITTMAN DRIVE - GREENWOOD, MS 38930	58-2046994	501(C)(3)	7,893.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTERS OF MISSISSIPPI - 425 MAGAZINE STREET - TUPELO, MS 38804	27-2541336	501(C)(3)	19,227.	0.			"8925-10 CH TIER 4
SOUTHEAST MISSOURI NETWORK AGAINST SEXUAL VIOLENCE DBA BEACON HEALTH CENTER - #69 DOCTORS' PARK, SUITE C - CAPE GIRARDEAU, MO 63703	43-1799296	501(C)(3)	24,881.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
THE CHILD CENTER, INC. 989 HERITAGE PARKWAY WENTZVILLE, MO 63385	43-1856223	S01(C)(3)	13,880.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CHILD PROTECTION CENTER, INC. 3101 BROADWAY, SUITE 750 KANSAS CITY, MO 64111	20-4535728	501(C)(3)	11,584.	0.			"2011 PROGRAM IMPROVEMENT
MISSOURI NETWORK OF CHILD ADVOCACY CENTERS DBA MISSOURI KIDS - 520 DIX ROAD, SUITE C - JEFFERSON CITY, MO 65109	27-0124899	501(c)(3)	165,255.	0.			"2011 TIER 2
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Schedule (Form 990) NATIONAL (CHILDREN'S	S ALLIANCE				9	63-1044781 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go		izations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II)	ц!!)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYNERGY SERVICES CHILDREN'S ADVOCACY CENTER - 400 EAST 6TH STREET - PARKVILLE, MO 64152	43-0970674	501(C)(3)	15,618.	0	i.		"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S CENTER OF SOUTHWEST MISSOURI - 921 E, 34TH STREET, SUITE A - JOPLIN, MO 64804	43-1740718	501(C)(3)	11,336.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
	36-2800788	501(C)(3)	44,541.	0.			"8919-10 PROGRAM IMPROVEMENT
SOUTHEAST MISSOURI NETWORK AGAINST SEXUAL VIOLENCE DBA BEACON HEALTH CENTER - #69 DOCTORS' PARK, SUITE C - CAPE GIRARDEAU, MO 63703	43-1799296	501(C)(3)	.000,02	0.			"8919-10 PROGRAM IMPROVEMENT
	43-1819961	501(C)(3)	49,438.	0.			"8919-10 PROGRAM IMPROVEMENT
THE CHILD CENTER, INC. 306 MUNGER HANNIBAL, MO 63401	43-1856223	501(C)(3)	45,224.	0.			"8919-10 PROGRAM IMPROVEMENT
CHILDREN'S ADVOCACY SERVICES OF GREATER ST. LOUIS - ONE UNIVERSITY BLVD - ST. LOUIS, MO 63121	43-6003859	\$01(c)(3)	49,726.	0.			"8919-10 PROGRAM IMPROVEMENT
MISSOURI NETWORK OF CHILD ADVOCACY CENTERS DBA MISSOURI KIDS - 520 DIX ROAD, SUITE C - JEFFERSON CITY, MO 65109	27-0124899	501(C)(3)	117,886.	0.			"8923-10 CH TIER 2
CHILDREN'S ALLIANCE OF MONTANA 445 CENTENNIAL AVE BUTTE, MT 59701	81-0432169	501(C)(3)	82,290.	0.			"2011 CH TIER 4
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI	CHILDREN'S	S ALLIANCE	Il ett in the Ill	ited States (Sche	ANCE		63-1044781 Page 1
1	(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S ALLIANCE OF MONTANA 445 CENTENNIAL AVE BUTTE, MT 59701	81-0432169	501(C)(3)	24,975.	0.			"8925-10 CH TIER 4
PROJECT HARMONY - NEBRASKA ALLIANCE OF CACS - 11949 Q STREET - OMAHA, NE 68137	47-0789054	501(c)(3)	118,185.	,0			"2011 CH TIER 3
PROJECT HARMONY - NEBRASKA ALLIANCE OF CACS - 11949 Q STREET - OMAHA, NE 68137	47-0789054	501(C)(3)	19,981.	0			"8924-10 CH TIER 3
NEW HAMPSHIRE NETWORK OF CHILD ADVOCACY CENTERS - 960 AUBURN STREET - MANCHESTER, NH 03103	74-3186259	501(C)(3)	95,000.	0.		i i	"2011 CH TIER 4
CAC OF CARROLL COUNTY 56 UNION STREET WOLFEBORO, NH 03894	20-2110940	501(C)(3)	17,215.	.0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
NEW JERSEY CHILDREN'S ALLIANCE 185 WASHINGTON STREET NEWARK, NJ 07102	41-2255586	501(C)(3)	90,191.	0			"2011 CH TIER 3
MONMOUTH COUNTY CHILD ADVOCACY CENTER C/O MONMOUTH COUNTY PROSECUTOR'S OFFI - 500 KOZLOSKI ROAD - FREEHOLD, NJ 07728	21-6000881	501(C)(1)	.000,03	0.			"8919-10 PROGRAM IMPROVEMENT
NEW JERSEY CHILDREN'S ALLIANCE 185 WASHINGTON STREET NEWARK, NJ 07102	41-2255586	501(C)(3)	29,439.	.0			"8924-10 CH TIER 3
NEW MEXICO CHILDREN'S SAFEHOUSE NETWORK - 807 W. APACHE - FARMINGTON, NM 87401	85-0206752	501(C)(3)	75,000.	0			"2011 CH TIER 4
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLIANCE Dart II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	CHILDREN'S	S ALLIANCE	izations in the Ur	uted States (Sche	dule I (Form 990). Par	:	63-1044781 Page 1
	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW MEXICO CHILDREN'S SAFEHOUSE NETWORK - 807 W. APACHE - FARMINGTON, NM 87401	85-0206752	501(C)(3)	21,860.	.0			"8925-10 CH TIER 4
NEW YORK STATE CHILDREN'S ALLIANCE, INC 320 SCHERMERHORN STREET - BROOKLYN, NY 11217	27-3705749	501(C)(3)	134,583.	0.			"2011 TIER 2
CAYUGA COUNSELING SERVICES, INC. 17 EAST GENESEE STREET AUBURN, NY 13021	16-0978035	501(C)(3)	17,855.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
SAFE HORIZON 2 LAFAYETTE STREET, 3RD FLOOR NEW YORK, NY 10007	13-2946970	501(C)(3)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
SOUTHERN TIER HEALTH CARE SYSTEM, INC ONE BLUE BIRD SQUARE - OLEAN, NY 14760	16-1469489	501(C)(3)	22,319.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
START CHILDREN'S CENTER 76 PAWLING AVENUE TROY, NY 12180	58-2546388	501(C)(3)	43,958.	0.			"8919-10 PROGRAM IMPROVEMENT
NEW YORK STATE CHILDREN'S ALLIANCE, INC 320 SCHERMERHORN STREET - BROOKLYN, NY 11217	27-3705749	501(C)(3)	115,299.	0.			"8923-10 CH TIER 2
CAROLINAS MEDICAL CENTER - CHILDREN'S ADVOCACY CENTER - 920 CHURCH STREET NORTH - CONCORD, NC 28025	20-8776473	501(C)(3)	8,524.	0			"2011 PROGRAM IMPROVEMENT
CHILD ADVOCACY CENTER, INC. 336 RAY AVENUE FAYETTEVILLE, NC 28301	56-2161682	501(C)(3)	30,810.	0.0			"2011 PROGRAM IMPROVEMENT
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI	CHILDREN'S	S ALLIANCE	nizations in the Ur	nited States (Sche	ANCE and Organizations in the United States (Schedule I (Form 990), Part II.)		63-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S ADVOCACY CENTERS OF NORTH CAROLINA - 1418 LONG STREET - HIGH POINT, NC 27262	56-2047227	501(C)(3)	171,356.	0			"2011 TIER 2
CHILDREN'S ADVOCACY CENTER YANCEY COUNTY - 101 NORTH MAIN STREET - BURNSVILLE, NC 28714	26-4688873	501(C)(3)	21,303.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
EAST CAROLINA UNIVERSITY 2303 EXECUTIVE CIRCLE GREENVILLE, NC 27834	61-1354945	501(C)(1)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
KIDS ADVOCACY RESOURCE EFFORT (KARE) - 1159 NORTH MAIN STREET - WAYNESVILLE, NC 28786	58-1983449	501(c)(3)	16,435.	0.			"8919-10 PROGRAM IMPROVEMENT
CHILDREN'S ADVOCACY CENTERS OF NORTH CAROLINA - 1418 LONG STREET - HIGH POINT, NC 27262	56-2047227	501(C)(3)	97,353.	0			"8923-10 CH TIER 2
CHILDREN'S ADVOCACY CENTERS OF ND 200 E. MAIN STREET SUITE 301 BISMARCK, ND 58501	36-3441387	501(C)(3)	59,903.	0.			"2011 CH TIER 4
DAKOTA CHILDREN'S ADVOCACY CENTER 200 E. MAIN #301 BISMARCK, ND 58501	45-0226700	501(C)(3)	3,358.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
RED RIVER CHILDREN'S ADVOCACY CENTER - 100 SOUTH 4TH STREET #302 - FARGO, ND 58078	45-6014870	501(C)(3)	24,544.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
DAKOTA CHILDREN'S ADVOCACY CENTER 200 E. MAIN #30 BISMARCK, ND 58501	45-0226700	501(C)(3)	14,777.	0.			"8919-10 PROGRAM IMPROVEMENT Cohedile (Form 990)
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI Part II Continuation of Grants and Other Assistance to Governments	CHILDREN'S Assistance to Gove	S ALLIANCE vernments and Organ	nizations in the Ur	nited States (Sche	ANCE and Organizations in the United States (Schedule I (Form 990), Part II)		63-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S ADVOCACY CENTERS OF ND 200 E. MAIN STREET SUITE 301 BISMARCK ND 58501	36-3441387	501(C)(3)	39,850	0			"8925-10 CH TIER 4
OHIO NETWORK OF CHILDREN'S ADVOCACY CENTERS - 655 E. LIVINGSTON AVENUE - COLUMBUS, OH 43205	01-0688897	501(C)(3)	138,850.	.0			"2011 TIER 2
MICHAEL'S HOUSE 1016 RAINBOW COURT FAIRBORN, OH 45324	31-0672132	\$01(C)(3)	28,300.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
NATIVE AMERICAN CHILDREN'S ALLIANCE - 3719 MEADOWBROOK BLVD - CLEVELAND, OH 44118	84-1585177	501(C)(3)	23,655.	0.			"8918-10 CHAPTER AND TRIBAL DEVELOPMENT
CHILDREN'S NETWORK OF STARK COUNTY 213 MARKET AVENUE N., STE. 20 CANTON, OH 44702	34-6002718	501(C)(1)	13,299.	0			"8919-10 PROGRAM IMPROVEMENT
OHIO NETWORK OF CHILDREN'S ADVOCACY CENTERS - 655 E. LIVINGSTON AVENUE - COLUMBUS, OH 43205	01-0688897	501(C)(3)	93,569.	0.			"8924~10 CH TIER 3
NATIVE AMERICAN CHILDREN'S ALLIANCE - 3719 MEADOWBROOK BLVD - CLEVELAND, OH 44118	84-1585177	501(C)(3)	25,000.	0.			2011 TRIBAL DEVELOPMENT
LEFLORE COUNTY CHILD ADVOCACY NETWORK, INC 300 ROGERS AVENUE - POTEAU, OK 74953	73-1576658	501(C)(3)	19,650.	0.			"2011 PROGRAM IMPROVEMENT
CACS OF OKLAHOMA, INC. 427 K SW ARDMORE, OK 73401	73-1566086	501(C)(3)	165,756.	.0			"2011 TIER 2
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Schedule I (Form 990) NATIONAL (CHILDREN'S	S ALLIANCE				9	63-1044781 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Go	vernments and Orga	nizations in the Ur	nited States (Sche	dule I (Form 990), Pai	u=)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CACS OF OKLAHOMA, INC.							
427 K SW							
ARDMORE, OK 73401	73-1566086	501(C)(3)	90,336.	0.			"8923-10 CH TIER 2
THE OREGON NETWORK OF CHILD ABUSE							
INTERVENTION CENTERS - 2800 N							
VANCOUVER AVE., SUITE 201 -							
PORTLAND, OR 97227	93-1293021	501(C)(3)	100,000.	0.			"2011 CH TIER 3
JACKSON COUNTY CHILD ABUSE TASK							
FORCE, INC CHILDREN'S ADVOCACY							
CENTER OF - 816 W. 10TH STREET -							"8919-10 PROGRAM
MEDFORD, OR 97501	94-3079497	501(C)(3)	3,577.	0.			IMPROVEMENT
THE OREGON NETWORK OF CHILD ABUSE							
INTERVENTION CENTERS - 2800 N							
VANCOUVER AVE., SUITE 201 -							
PORTLAND, OR 97227	93-1293021	501(C)(3)	45,346.	0.			"8924-10 CH TIER 3
PENNSYLVANIA CHAPTER OF CHILDREN'S							
ADVOCACY CENTERS AND							
MULTIDISCIPLINARY T - 626 JAMES							
ST ERIE, PA 16509	20-8387293	501(C)(3)	92,601.	0.			"2011 CH TIER 3
MISSION KIDS CHILD ADVOCACY CENTER							
OF MONTGOMERY COUNTY - 160 W.							
GERMANTOWN PIKE, SUITE D-4							"2011 PROGRAM DEVELOPMENT
EAST NORRITON, PA 19401	14-1975929	501(C)(3)	16,119.	0.			AND EXPANSION
MISSION KIDS CHILD ADVOCACY CENTER							
OF MONTGOMERY COUNTY - 160 W.							
GERMANTOWN PIKE, SUITE D-4 -						~ ~~	
EAST NORRITON, PA 19401	14-1975929	501(C)(3)	22,465.	0.			"2011 PROGRAM IMPROVEMENT
LANCASTER COUNTY CHILDREN'S							
ALLIANCE - 628 NORTH DUKE STREET -							
LANCASTER, PA 17602	23-1365353	501(C)(3)	6,176.	0.			"2011 PROGRAM IMPROVEMENT
172 DOINT TOWNSHIP DELITE SILVES							
	23-1995911	501(C)(3)	24 519.	0			"2011 PROGRAM IMPROVEMENT
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLIANCE Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	CHILDREN'S Assistance to Gover	S ALLIANCE	nzations in the Ur	nted States (Sche	dule I (Form 990), Par		63-1044781 Page 1
1	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
YORK COUNTY CHILDREN'S ADVOCACY CENTER - 28 S QUEEN STREET - YORK, PA 17403	74-3054788	501(C)(3)	10,554.	0			"2011 PROGRAM IMPROVEMENT
PHILADELPHIA CHILDREN'S ALLIANCE 42 S. 15TH STREET, SUITE 300 PHILADELPHIA, PA 19104	23-2526605	501(C)(3)	100,000.	0.			"8916-10 URBAN INITIATIVES
BUCKS COUNTY CHILDREN'S ADVOCACY CENTER - 2370 YORK ROAD, SUITE B-5 - JAMISON, PA 18929	23-7438387	501(C)(3)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
PHILADELPHIA CHILDREN'S ALLIANCE 42 S. 15TH STREET, SUITE 300 PHILADELPHIA, PA 19102	23-2526605	501(C)(3)	49,990.	0.			"8919-10 PROGRAM IMPROVEMENT
PENNSYLVANIA CHAPTER OF CHILDREN'S ADVOCACY CENTERS AND MULTIDISCIPLINARY T - 626 JAMES ST ERIE, PA 16509	20-8387293	501(C)(3)	44,317.	0			"8924-10 CH TIER 3
DAY ONE 100 MEDWAY ST. PROVIDENCE, RI 02906	05-0385696	501(C)(3)	25,000.	0			"2011 CHAPTER AND TRIBAL DEVELOPMENT
DAY ONE 100 MEDWAY ST. PROVIDENCE, RI 02906	05-0385696	501(C)(3)	29,858.	0.		:	"2010 PROGRAM DEVELOPMENT AND EXPANSION
DAY ONE 100 MEDWAY ST. PROVIDENCE, RI 02906	05-0385696	501(C)(3)	24,654.	0.			"8918-10 CHAPTER AND TRIBAL DEVELOPMENT
S.C. NETWORK OF CHILDREN'S ADVOCACY CENTERS - "1600 HAMPTON STREET, SUITE 502 - COLUMBIA, SC 29208	86-1158952	501(C)(3)	116,943.	0			2011 CH TIER 3
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI Part II Continuation of Grants and Other Assistance to Governments	CHILDREN'S Assistance to Gove	S ALLIANCE vernments and Organ	nizations in the Ur	ANCE and Organizations in the United States (Schedule I (Form 990),	dule I (Form 990), Par	6 Part II)	63-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE DEE NORTON LOWCOUNTRY CHILDREN'S CENTER - 1061 KING STREET - CHARLESTON, SC 29403	57-0905724	501(C)(3)	14,319.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CHILD ADVOCACY CENTER OF AIKEN COUNTY - 4231 TROLLEY LINE ROAD - AIKEN, SC 29801	20-1565539	501(C)(3)	35,987.	0			"2011 PROGRAM IMPROVEMENT
THE CHILD'S PLACE 115 EAST ALEXANDER AVENUE GREENWOOD, SC 29646	57-0681915	501(C)(3)	20,317.	0.0			"2011 PROGRAM IMPROVEMENT
JULIE VALENTINE CENTER 2905 WHITE HORSE ROAD GREENVILLE, SC 29611	57-0655611	501(C)(3)	30,000	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
DURANT CHILDREN'S CENTER FOURTH JUDICIAL CIRCUIT SATELLITE CENTER - 510 WEST CAROLINA AVENUE - HARTSVILLE, SC 29550	57-0830844	501(C)(3)	21,499.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
THE DEE NORTON LOWCOUNTRY CHILDREN'S CENTER - 1061 KING STREET - CHARLESTON, SC 29403	57-0905724	501(C)(3)	28,818.	.0			"8919-10 PROGRAM IMPROVEMENT
S.C. NETWORK OF CHILDREN'S ADVOCACY CENTERS - 1600 HAMPTON STREET, SUITE 502 - COLUMBIA, SC 29208	86-1158952	501(C)(3)	41,603.	0.			"8924-10 CH TIER 3
CHILD'S VOICE PO BOX 89916 SIOUX FALLS, SD 57109	46-0227855	501(C)(3)	84,682.	.0			"2011 CH TIER 4
CHILD'S VOICE 1305 W. 18TH STREET SIOUX FALLS, SD 57117	46-0227855	501(C)(3)	22,849.	0			"2011 PROGRAM IMPROVEMENT
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Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go		nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II)	ת =)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILD ADVOCACY CENTERS OF SOUTH DAKOTA (CACSD) C/O CHILD'S VOICE - PO BOX 89916 - SIOUX FALLS, SD 57105	46-0227855	501(C)(3)	36,201.	0			"8925-10 CH TIER 4
MEMPHIS CHILD ADVOCACY CENTER 1085 POPLAR AVENUE MEMPHIS, TN 38105	58-1745787	501(C)(3)	12,171.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
WILLIAMSON COUNTY CHILD ADVOCACY CENTER - 101 FORREST CROSSING BLVD, STE 106 - FRANKLIN, TN 37064	62-1772353	S01(C)(3)	17,091.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
CAMPBELL COUNTY CHILDREN'S CENTER 2315 JACKSBORO PIKE LAFOLLETTE, TN 37766	11-3820921	501(c)(3)	16,373.	.0			"2011 PROGRAM IMPROVEMENT
FENTRESS COUNTY CHILDREN'S CENTER 340 WEST CENTRAL AVENUE JAMESTOWN, TN 38556	20-3963104	501(C)(3)	18,180,	0.			"2011 PROGRAM IMPROVEMENT
TENNESSEE CHAPTER OF CACS 1266 FOSTER AVENUE NASHVILLE, TN 37210	62-1679668	501(C)(3)	188,382.	0			"2011 TIER 2
CAMPBELL COUNTY CHILDREN'S CENTER 2315 JACKSBORO PIKE LAFOLLETTE, IN 37766	11-3820921	501(c)(3)	30,000.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
SAFE HARBOR CAC, INC. 935 CEDAR LANE SEVIERVILLE, TN 37862	20-3408131	501(C)(3)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
TENNESSEE CHAPTER OF CACS 1266 POSTER AVENUE NASHVILLE, TN 37210	62-1679668	501(C)(3)	129,996.	0			"8923-10 CH TIER 2
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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI Part II Continuation of Grants and Other Assistance to Governments	CHILDREN'S Assistance to Gove		nizations in the Ur	nited States (Sche	ANCE and Organizations in the United States (Schedule I (Form 990), Part II)	9	3-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILL COUNTY CHILDREN'S ADVOCACY CENTER - 1001 NORTH HILL ST BURNET, TX 78611	74-2656084	501(C)(3)	10,843.	.0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
THE BRIDGE CHILDREN'S ADVOCACY CENTER - 804 QUAIL CREEK DRIVE - AMARILLO, TX 79124	75-1995807	501(C)(3)	9,093.	.0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
HENDERSON COUNTY HELP CENTER, INC. 309 ROYAL ATHENS, TX 75751	75-2362794	501(C)(3)	15,908.	0,			"2011 PROGRAM DEVELOPMENT AND EXPANSION
FORT BEND CHILDREN'S ADVOCACY CENTER - 5403 AVENUE N - ROSENBERG, TX 77471	76-0337426	501(C)(3)	14,687.	0.0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
HENDERSON COUNTY HELP CENTER, INC. 309 ROYAL ATHENS, TX 75751	75-2362794	501(C)(3)	27,372.	0			"2011 PROGRAM IMPROVEMENT
CHILDREN'S ADVOCACY CENTERS OF TEXAS, INC 1501 W. ANDERSON LANE, BLDG. B-1 - AUSTIN, TX 78757	75-2581804	501(C)(3)	250,687.	0.			"2011 TIER 1
CHILDREN'S ADVOCACY CENTER OF THE SOUTH PLAINS, INC 720 TEXAS AVE - LUBBOCK, TX 79401	75-2660920	501(C)(3)	16,252.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTER OF PARIS - 711 PINE BLUFF - PARIS, TX 75460	75-2768380	501(C)(3)	17,627.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTERS OF TEXAS, INC 1501 W. ANDERSON LANE, BLDG. B-1 - AUSTIN, TX 78757 LHA	75-2581804	501(C)(3)	201,435,	0			"8922-10 CH TIER 1 Schedule I (Form 990)
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(a) Name and address of (b) EIN (c) IRC : organization or government if appli	(b) EIN		section (d) Amount of (e) Amount of (f) Methocable cash grant non-cash valuat assistance (book, factor)	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTAH ATTORNEY GENERAL - CHILDREN'S JUSTICE CENTER PROGRAM - 5272 S. COLLEGE DRIVE, #200 - SALT LAKE	87-6000-84-8	501(0)(1)	79 087	0			"2011 CH TIER 3
UTAH ATTORNEY GENERAL - CHILDREN'S JUSTICE CENTER PROGRAM - 5272 S. COLLEGE DRIVE, #200 - SALT LAKE CITY. UT 84123		501(C)(1)		.0			"8924-10 CH TIER 3
VERMONT CHILDREN'S ALLIANCE 25 BAKER STREET RICHMOND, VT 05477	03-0305264	501(C)(3)	71,839.	0			"2011 CH TIER 4
BENNINGTON COUNTY ASSOCIATION AGAINST CHILD ABUSE - 439 MAIN STREET, SUITE 8 - BENNINGTON, VT 05201	03-0338769	501(C)(3)	1,682.	0			"2011 PROGRAM IMPROVEMENT
NORTH EAST KINGDOM SPECIAL INVESTIGATIONS UNIT - 217 MAIN STREET, SUITE 2 - NEWPORT, VT 05855	26-3064714	501(C)(1)	28,879.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
VERMONT CHILDREN'S ALLIANCE 25 BAKER STREET RICHMOND, VT ,05477	03-0305264	501(C)(3)	30,019.	.0			"8925-10 CH TIER 4
CHILDREN'S ADVOCACY CENTERS OF VIRGINIA - 191 BRISTOL EAST ROAD, SUITE 102 - BRISTOL, VA 24201	20-0617657	501(C)(3)	85,178.	,0			"2011 CH TIER 3
CHILDREN'S TRUST ROANOKE VALLEY 541 LUCK AVE., SUITE 308 ROANOKE, VA 24016	51-0235891	501(C)(3)	6,619.	.0			"2011 PROGRAM IMPROVEMENT
THE COLLINS CENTER 165 SOUTH MAIN ST. SUITE C & D HARRISONBURG, VA 22801	54-1478133	501(C)(3)	29,456,	0			"2011 PROGRAM IMPROVEMENT Schedule I (Form 990)

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Schedule 1/Form 990) NATIONAL CHILDREN'S	CHILDREN'	S ALLIANCE				9	3-1044781 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II)	(u	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER RICHMOND SCAN 103 EAST GRACE STREET RICHMOND, VA 23219	54-1584969	501(C)(3)	14,041.	0.			"2011 PROGRAM IMPROVEMENT
CHILDREN'S ADVOCACY CENTER OF THE NEW RIVER VALLEY - PO BOX 6926 - RADFORD, VA 24141	23-7219782	501(C)(1)	9,721.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
SAFE HARBOR CHILD ADVOCACY CENTER 4702 SOUTHPOINT PARKWAY FREDERICKSBURG, VA 22407	26-1563081	501(C)(3)	13,727.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S HOSPITAL OF THE KING'S DAUGHTERS C/O CHILD ABUSE PROGRAM - 601 CHILDREN'S LANE - NORFOLK, VA 23507	54-0506321	501(C)(3)	14,245.	0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
THE COLLINS CENTER 165 SOUTH MAIN ST, SUITE C & D HARRISONBURG, VA 22801	54-1478133	501(C)(3)	5,874.	0	į		"2010 PROGRAM DEVELOPMENT AND EXPANSION
GREATER RICHMOND SCAN 103 EAST GRACE STREET RICHMOND, VA 23219	54-1584969	501(C)(3)	20,713.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTERS OF VIRGINIA - 191 BRISTOL EAST ROAD, SUITE 102 - BRISTOL, VA 24201	20-0617657	501(C)(3)	34, 839.	0.			"8924-10 CH TIER 3
CHILDREN'S ADVOCACY CENTERS OF WASHINGTON - 1800 COOPER PT RD SW #14 - OLYMPIA, WA 98502	20-8597550	501(0)(3)	69,488.	0.			"2011 CH TIER 3
SKAGIT COUNTY CHILDREN'S ADVOCACY CENTER - 1500 E, BROADWAY - MOUNT VERNON, WA 98273	94-3121951	501(C)(3)	13,523.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
LHA							Schedule I (Form 990)

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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI Part II Continuation of Grants and Other Assistance to Governments	CHILDREN'S Assistance to Gove	S ALLIANCE	nizations in the U	nited States (Sche	ANCE and Organizations in the United States (Schedule I (Form 990), Part II)	9	3-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERS WITH FAMILIES & CHILDREN. SPOKANE - 613 SOUTH WASHINGTON - SPOKANE, WA 99204	68-0576560	S01(C)(3)	17,428.	0			"2011 PROGRAM IMPROVEMENT
MONARCH CHILDREN'S JUSTICE & ADVOCACY CENTER - 420 GOLF CLUB RD., SE - LACEY, WA 98503	91-0818368	S01(C)(3)	15,148.	.0			"2011 PROGRAM IMPROVEMENT
PARTNERS WITH FAMILIES & CHILDREN. SPOKANE - 613 SOUTH WASHINGTON - SPOKANE, WA 99204	68-0576560	501(C)(3)	18,356.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILDREN'S ADVOCACY CENTERS OF WASHINGTON - 1800 COOPER PT RD SW #14 - OLYMPIA, WA 98502	20-8597550	501(c)(3)	76,006.	0			"8924-10 CH TIER 3
WEST VIRGINIA CHILD ADVOCACY NETWORK - 1701 5TH AVE. BOX 12 - CHARLESTON, WV 25387	38-3784521	501(c)(3)	59,654.	0.			"2011 CH TIER 3
CORNERSTONE FAMILY INTERVENTIONS, INC 331 STATE STREET, ROOM 403 - MADISON, WV 25130	30-0415430	501(c)(3)	11,378.	0.			"2011 PROGRAM DEVELOPMENT AND EXPANSION
WOOD COUNTY COMMISSION ONE COURT SQUARE, SUITE 203 PARKERSBURG, WV 26101	55-6000417	501(C)(1)	1,049.	0			"2011 PROGRAM DEVELOPMENT AND EXPANSION
WEST VIRGINIA CHILD ADVOCACY NETWORK - 1701 5TH AVE, BOX 12 - CHARLESTON, WV 25387	38-3784521	501(c)(3)	53,664.	.0			"8924-10 CH TIER 3
FAMILY SERVICES OF NORTHEAST WISCONSIN - 300 CROOKS STREET - GREEN BAY, WI 54301	39-0827320	501(C)(3)	30,000.	0.			"2010 PROGRAM DEVELOPMENT AND EXPANSION
LHA							Schedule I (Form 990)

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Schedule I (Form 990) NATIONAL CHILDREN'S ALLI Part II Continuation of Grants and Other Assistance to Governments	CHILDREN'S Assistance to Gove	S ALLIANCE vernments and Organ	nizations in the Ur	nted States (Sche	ANCE and Organizations in the United States (Schedule I (Form 990), Part II)		63-1044781 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAFE HARBOR CHILD ADVOCACY CENTER, INC - 1457 E. WASHINGTON AVE SUITE 102 - MADISON, WI 53703	39-2004933	501(C)(3)	9,107.	.0			"2010 PROGRAM DEVELOPMENT AND EXPANSION
CHILD ADVOCACY CENTERS OF WYOMING 2712 THOMES AVENUE CHEYENNE, WY 82001	11-3709321	501(C)(3)	37,753.	.0			"2011 CHAPTER AND TRIBAL DEVELOPMENT
CHILD ADVOCACY CENTERS OF WYOMING 2712 THOMES AVENUE CHEYENNE, WY 82001	11-3709321	501(C)(3)	12,624.	0.			"8918-10 CHAPTER AND TRIBAL DEVELOPMENT
MEDICAL UNIVERSITY OF SOUTH CAROLINA - 261 CALHOUN STREET, SUITE 306 - CHARLESTON, SC 29425	57-6000722	501(C)(3)	121,755.	0.			CHILD VICTIM WEB
CAC OF TEXAS, INC. 1501 W. ANDERSON LANE, BULDING B-1 AUSTIN, TX 78757	75-2581804	501(C)(3)	30,000.	0			PUBLIC AWARENESS CAMPAIGN
KLAMATH-LAKE CARES HENZEL PAVILION AT 2220 ELDORADO AV KLAMATH FALLS, OR 97601	93-0508781	501(C)(3)	10,000.	0			PUBLIC AWARENESS CAMPAIGN
LHA							Schedule I (Form 990)

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed INTERNAL Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information MONITORING- STAFF CONDUCTS REVIEWS OF GRANT REPORTS FOR FEDERAL GRANT SUPPORT DOCUMENTATION REVIEWED AND SELECTED BY INDEPENDENT REVIEWERS. LINE 2: INITIAL GRANT AWARDS- GRANT REPORTS WITH COMPLIANCE AT LEAST TWICE A YEAR OR MORE FREQUENTLY AS NECESSARY. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients AUDITS ARE CONDUCTED TO ENSURE COMPLIANCE (a) Type of grant or assistance PART I, SCHEDULE I, Part IV

Schedule I (Form 990) (2010)

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Page 2

63-1044781

NATIONAL CHILDREN'S ALLIANCE

Schedule I (Form 990) (2010)

Part III

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23. 2010

63-1044781

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

► Attach to Form 990. ► See separate instructions.

NATIONAL CHILDREN'S ALLIANCE

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply X Compensation committee Written employment contract Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment from the organization or a related organization? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of X a The organization? 5a X b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

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7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments

initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the

Schedule J (Form 990) 2010

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X

X

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

Regulations section 53 4958-6(c)?

not described in lines 5 and 67 If "Yes," describe in Part III

NATIONAL CHILDREN'S ALLIANCE

Schedule J (Form 990) 2010 NATIONAL CHILDREN'S ALLIANCE 63-1044/81

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

TERESA HUIZAR		-	(B) Breakdown of W	V-2 and/or 1099-MISC compensation	3C compensation	(c)	(a)	(E)	(F)
HUIZAR (u) 173,395. 10,000. 0. 0. 0. 20 HUIZAR (u) (u) (u) (u) (u) (u) (u) (u) (u) (u)	(A) Name		(i) Base compensation	(II) Bonus & Incentive compensation	(iii) Other reportable compensation	neurement and other deferred compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
HUIZAR (II) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		Ξ	, 395	10,000.	0.	0	, 26	203,664.	0
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SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Open to Public Department of the Treasury ▶ Attach to Form 990 or 990-EZ. Inspection Internal Revenue Service Name of the organization **Employer Identification number** NATIONAL CHILDREN'S ALLIANCE 63-1044781 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND/OR PHYSICAL ABUSE CAN GO FOR INTERVENTION AND COUNSELING. FORM 990, PART VI, SECTION A, LINE 3: OUTSOURCE ACCOUNTING FUNCTION FORM 990, PART VI, SECTION A, LINE 6: THE TYPES OF MEMBERS ARE: ACCREDITED, ASSOCIATE, AND CHAPTER. FORM 990, PART VI, SECTION A, LINE 7A: ACCREDITED MEMBERS MAY ELECT FOUR SLOTS ON THE BOARD. FORM 990, PART VI, SECTION A, LINE 8B: MINUTES ARE DOCUMENTED FOR BOARD OF DIRECTORS MEETINGS. COMMITTEE MEETINGS DO NOT HAVE WRITTEN MINUTES DUE TO THE CONFIDENTIAL NATURE OF BUSINESS DISCUSSED. FORM 990, PART VI, SECTION B, LINE 11: ELECTRONIC COPIES OF 990 ARE EMAILED TO BOARD MEMBERS FOR REVIEW PRIOR TO SUBMISSION TO THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS AND EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICT AT TIME OF TRANSACTIONS TO BE CONDUCTED. THEY ARE REQUIRED TO ABSTAIN FROM VOTING. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR'S COMPENSATION AND REVIEW IS DONE BY EXECUTIVE COMMITTEE AND THEN APPROVED BY THE BOARD. EMPLOYEES' COMPENSATION AND REVIEW IS DONE BY EXECUTIVE ALL COMPENSATION CHANGES ARE APPROVED BY THE DEPARTMENT OF

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Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization NATIONAL CHILDREN'S ALLIANCE	Employer identification number 63-1044781
JUSTICE.	
FORM 990, PART VI, SECTION C, LINE 19: COPIES WILL BE PRO	OVIDED UPON
REQUEST IN WRITING OR IN PERSON.	0101
FORM 990. PART XII, LINE 2C THE OVERSIGHT PROCESS FOR THE AUDIT DID NOT CHANGE FROM 1	THE PRIOR YEAR.
THE OVERSEGNET TROUBED TON THE HODET DIE NOT CHRISE TROIT	THE TRIOR TENEV.
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Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

➤ See separate instructions.

► Attach to your tax return. Business or activity to which this form relates

990

OMB No 1545-0172

Sequence No 67 Identifying number

NAT	IONAL CHILDREN'S A	LLIANCE		FOR	M 990	PAGE 10			63-1044781
Par	t I Election To Expense Certain Prop	erty Under Section 1	79 Note: If yo	ou have any lis	sted proper	y, complete Pa	rt V be	fore y	ou complete Part I
1 M	aximum amount (see instructions)							1	500,000.
2 To	otal cost of section 179 property pla	ced in service (see	instructions	s)				2	
3 Th	nreshold cost of section 179 propert	y before reduction	in limitation					3	2,000,000.
4 R	eduction in limitation. Subtract line 3	from line 2. If zero	or less, ent	er -0-				4	
5 Do	ollar limitation for tax year Subtract line 4 from lin	ne 1 If zero or less, enter	-0- If married fi	ling separately, se	e instructions			5	
6	(a) Description of p	property		(b) Cost (busin	ness use only)	(c) Elec	ted cost		
				_	-				
						I			
7 L	sted property Enter the amount from	m line 29			7				
8 To	otal elected cost of section 179 prop	erty Add amounts	s in column (c), lines 6 and	17			8	
9 Te	entative deduction. Enter the smalle	r of line 5 or line 8						9	
10 C	arryover of disallowed deduction fro	m line 13 of your 2	009 Form 45	662				10	
11 B	usiness income limitation. Enter the	smaller of busines:	s income (no	t less than ze	ro) or line 5			11	
12 S	ection 179 expense deduction Add	lines 9 and 10, but	t do not ente	er more than li	ne 11			12	
	arryover of disallowed deduction to				▶ 13	<u></u>			
_	Do not use Part II or Part III below for								
Par	II Special Depreciation Allow	ance and Other D	epreciation	(Do not inclu	de listed pr	operty.)			
14 S	pecial depreciation allowance for qu	alified property (ot	her than liste	ed property) p	laced in ser	vice during			
	e tax year							14	
15 Pi	roperty subject to section 168(f)(1) e	lection						15	04.000
_	ther depreciation (including ACRS)							16	94,220.
Par	t III MACRS Depreciation (Do n	ot include listed p)				
				ection A					r ————
17 M	ACRS deductions for assets placed	I in service in tax y	ears beginnii	ng before 201	0		_	17	<u> </u>
18 If y	you are electing to group any assets placed in se						<u> </u>		· - , · -
	Section B - Asset	(b) Month and		or depreciation	1		ciatio	Syst	em I
	(a) Classification of property	year placed in service	(business/i	investment use instructions)	(d) Recov	(e) Convention	on (f) N	fethod	(g) Depreciation deduction
<u>19a</u>	3-year property								<u>.</u>
<u>_b</u>	5-year property								
_c	7-year property						\perp		
_ <u>d</u>	10-year property	_			<u> </u>				
e	15-year property								
_ <u>f</u> _	20 year property				ļ				
g	25-year property				25 yrs		:	S/L	
h	Residential rental property				27 5 yr	s MM	_ :	S/L	
		/	ļ		27 5 yr	s MM	:	S/L	
i	Nonresidential real property				39 yrs	MM	;	S/L	
		//	<u> </u>		<u> </u>	MM		S/L	
	Section C - Assets	Placed in Service	During 201	0 Tax Year U	sing the Al	ternative Depr	eciati	on Sys	stem
<u>20a</u>	Class life				ļ		_	S/L	
b	12-year				12 yrs			S/L_	 -
	40-year	/	L		40 yrs	MM	:	S/L	L
Par	t IV Summary (See instructions)	<u> </u>							
	sted property Enter amount from Irr							21	
	otal. Add amounts from line 12, lines	•							04 000
	nter here and on the appropriate line	•	-	-	itions - see	nstr.		22	94,220.
	or assets shown above and placed i	-	e current ye	ar, enter the					
016251	ortion of the basis attributable to sec				23	<u> </u>			
016251	o I HA For Paperwork Reduction	n Act Notice, see	separate ir	structions					Form 4562 (2010)

NATIONAL CHILDREN'S ALLIANCE Form 4562 (2010) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Part V Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes." is the evidence written? (c) (i) (e) (d) Business/ Date Basis for depreciation Elected Type of property Recovery Method/ Depreciation Cost or (business/investment placed in investment section 179 (list vehicles first) period Convention deduction other basis service use percentage use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use: S/L · % S/L S/L· % 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles **(f)** (a) (b) (c) (d) (e) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven

33 Total miles driven during the year Add lines 30 through 32 Yes Yes Ye<u>s</u> 34 Was the vehicle available for personal use Yes No Yes No No Yes No Nο No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your]]	
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part V	Amortization				_			
	(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortizati period or perci		(f) Amortization for this year	
42 Amor	tization of costs that begins during your	2010 tax year						
43 Amortization of costs that began before your 2010 tax year					43			
44 Total. Add amounts in column (f). See the instructions for where to report						44		

016252 12-21-10

Form 4562 (2010)