Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Terminated [ ] Amended return [ ] Application pending

C Name of organization
COUNCIL ON SOCIAL WORK EDUCATION
Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): 1701 DUKE STREET — Room/suite: 200

City or town, state or province, country, and ZIP or foreign postal code: ALEXANDRIA, VA 22314

D Employer identification number: 54-1856529

E Telephone number: 703-683-8080

G Gross receipts $ 6,711,871.

F Name and address of principal officer: DARLA SPENCE COFFEY
SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.CSWE.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation 1952 **M** State of legal domicile: VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	22
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	39
6	Total number of volunteers (estimate if necessary)	6	267
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,912,424.	1,331,976.
	9	Program service revenue (Part VIII, line 2g)	4,570,003.	4,774,235.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	78,381.	193,559.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	164,375.	220,001.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,725,183.	6,519,771.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	579,899.	615,417.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,670,852.	2,947,073.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,318,082.	3,195,090.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,568,833.	6,757,580.
	19	Revenue less expenses Subtract line 18 from line 12	1,156,350.	-237,809.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	7,190,124.	7,217,192.
	21	Total liabilities (Part X, line 26)	3,389,868.	3,526,353.
	22	Net assets or fund balances Subtract line 21 from line 20	3,800,256.	3,690,839.

RECEIVED
FEB 17 2015
OGDEN, UT
IRS-OSC
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SCANNED FEB 2015

Part II Signature Block

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

Sign Here

▶ Darla Spence Coffey — Signature of officer — Date: 2.12.2015

▶ DARLA SPENCE COFFEY, PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
TERRI MCKNIGHT, CPA	Terri McKnight	2/10/15		P00543002

Firm's name ▶ GELMAN, ROSENBERG & FREEDMAN — Firm's EIN ▶ 52-1392008

Firm's address ▶ 4550 MONTGOMERY AVE SUITE 650N
BETHESDA, MD 20814-2930 — Phone no. (301) 951-9090

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

617

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Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

CSWE IS A NATIONAL ASSOCIATION OF SOCIAL WORK EDUCATION PROGRAMS AND INDIVIDUALS THAT ENSURE AND ENHANCE THE QUALITY OF SOCIAL WORK EDUCATION FOR A PROFESSIONAL PRACTICE THAT PROMOTES INDIVIDUAL FAMILY, AND COMMUNITY WELL-BEING, AND ECONOMIC JUSTICE. MORE THAN 2,500

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [X] Yes [ ] No

If "Yes," describe these changes on Schedule O

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

4a (Code ________) (Expenses $ 1,208,611. including grants of $ ________) (Revenue $ 919,237.)

ACCREDITATION: CSWE DEVELOPS ACCREDITATION STANDARDS THAT DEFINE COMPETENT PREPARATION FOR SOCIAL WORK EDUCATION PROGRAMS AT THE UNDERGRADUATE AND GRADUATE LEVELS. IN ACCORDANCE WITH THE REQUIREMENTS OF CSWE'S RECOGNITION BODY, THE COUNCIL FOR HIGHER EDUCATION ACCREDITATION, CSWE ADMINISTERS A MULTISTEP ACCREDITATION PROCESS THAT INVLOVES PROGRAM SELF-STUDIES, SITE VISITS, AND REVIEWS. AS OF OCTOBER 2013, THERE ARE:

- 489 ACCREDITED BACCALAUREATE SOCIAL WORK PROGRAMS
- 227 ACCREDITED MASTER'S SOCIAL WORK PROGRAMS
- 19 BACCALAUREATE SOCIAL WORK PROGRAMS IN CANDIDACY
- 9 MASTER'S SOCIAL WORK PROGRAMS IN CANDIDACY

4b (Code ________) (Expenses $ 1,201,907. including grants of $ ________) (Revenue $ 751,503.)

CONFERENCE FACILITY DEVELOPMENT: CSWE CONFERENCES HELP TO PROMOTE AND TEACH BEST PRACTICES IN RESEARCH AND CURRICULUM DEVELOPMENT THROUGH DYNAMIC EDUCATIONAL SESSIONS, PEER NETWORKING FORUMS, AND JOBSEARCH OPPORTUNITIES. THE ANNUAL PROGRAM MEETING (APM) IS THE PRE-EMINENT ANNUAL MEETING FOR SOCIAL WORK EDUCATORS, STUDENTS, DEANS, AND DIRECTORS WORLDWIDE. EACH YEAR THE APM BRINGS TOGETHER MORE THAN 3,000 INDIVIDUAL MEMBERS AS WELL AS MORE THAN 600 GRADUATE AND UNDERGRADUATE PROGRAMS OF PROFESSIONAL SOCIAL WORK EDUCATION. THE 2013 APM WAS HELD NOVEMBER 2013, IN DALLAS, TX.

4c (Code ________) (Expenses $ 860,009. including grants of $ 525,342.) (Revenue $ ________)

THE MINORITY FELLOWSHIP PROGRAMS (MFP) PROVIDE MENTORSHIP AND TRAINING TO ETHNICAL MINORITY SOCIAL WORK PROFESSIONALS, PREPARING THEM FOR LEADERSHIP ROLES IN MENTAL HEALTH AND SUBSTANCE ABUSE PROGRAMS THAT PROVIDE CULTURALLY COMPETENT SERVICES TO RACIAL AND ETHNIC MINORITIES. MFP ACCOMPLISHES THIS BY SUPPORTING ETHNIC MINORITY STUDENTS IN COMPLETING THEIR DOCTORAL DEGREES IN SOCIAL WORK EDUCATION.

4d Other program services (Describe in Schedule O)

(Expenses $ 2,761,432. including grants of $ 90,075.) (Revenue $ 2,916,008.)

4e Total program service expenses ▶ 6,031,959.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		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
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	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 and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or 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 Schedule K If "No", go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	24			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	39			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country ▶					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966? N/A			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders N/A	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? N/A			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year (1a)	22			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent (1b)	22			
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		X
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	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		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	
b	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 organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete 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			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did 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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
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 taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

EDWARD G. BLAIR - 703-519-2061
1701 DUKE STREET, NO. 200, ALEXANDRIA, VA 22314

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099 MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) BARBARA W SHANK CHAIR	2.00	X		X				0.	0.	0.
(2) ALEJANDRO GARCIA VICE CHAIR/SECRETARY	2.00	X		X				0.	0.	0.
(3) ANDREA STEWART TREASURER	2.00	X		X				0.	0.	0.
(4) SHERYL B CHAPMAN BOARD MEMBER	2.00	X						0.	0.	0.
(5) ALAN DETTLAFF BOARD MEMBER	2.00	X						0.	0.	0.
(6) CHARLOTTE T GOODLUCK BOARD MEMBER	2.00	X						0.	0.	0.
(7) JAMES LUBBEN BOARD MEMBER	2.00	X						0.	0.	0.
(8) UMA SEGAL BOARD MEMBER	2.00	X						0.	0.	0.
(9) CHRISTOPHER WILKINS BOARD MEMBER	2.00	X						0.	0.	0.
(10) IRIS CARLTON-LANEY BOARD MEMBER	2.00	X						0.	0.	0.
(11) DARLA SPENCE COFFEY BOARD MEMBER	2.00	X						0.	0.	0.
(12) CARMEN HENDRICKS BOARD MEMBER	2.00	X						0.	0.	0.
(13) TRICIA B BENT-GOODLEY BOARD MEMBER	2.00	X						0.	0.	0.
(14) CYNTHIA MONIZ BOARD MEMBER	2.00	X						0.	0.	0.
(15) ANTHONY P NATALE BOARD MEMBER	2.00	X						0.	0.	0.
(16) GISELA NEGRON-VELASQUEZ BOARD MEMBER	2.00	X						0.	0.	0.
(17) ANGELA D PHARRIS BOARD MEMBER	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) CHERYL E WAITES BOARD MEMBER	2.00	X						0.	0.	0.
(19) ANISSA ROGERS BOARD MEMBER	2.00	X						0.	0.	0.
(20) SHIRLEY GATENIO-GABEL BOARD MEMBER	2.00	X						0.	0.	0.
(21) SAM COPELAND BOARD MEMBER	2.00	X						0.	0.	0.
(22) RUTH MCROY BOARD MEMBER	2.00	X						0.	0.	0.
(23) DARLA SPENCE COFFEY PRESIDENT	35.00			X				214,168.	0.	17,841.
(24) JO ANN R. REGAN DIRECTOR - ACCREDITATION	35.00					X		119,123.	0.	10,072.
1b Sub-total ▶								333,291.	0.	27,913.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								333,291.	0.	27,913.

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
LEWIS-BURKE ASSOCIATES LLC 1341 G STREET, NW, WASHINGTON, DC 20005	GOVERNMENT RELATIONS	175,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 1

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Part VIII **Statement of Revenue**

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	868,324.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	463,652.				
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f ▶			1,331,976.			
Program Service Revenue				Business Code				
	2 a	MEMBERSHIP		900099	2,862,176.	2,862,176.		
	b	CONFERENCES		900099	964,901.	751,503.		213,398.
	c	ACCREDITATION FEES		900099	919,237.	919,237.		
	d	CONTRACTS		900099	26,091.	26,091.		
	e	PUBLICATION SALES		541800	1,830.	1,830.		
	f	All other program service revenue						
	g	**Total.** Add lines 2a-2f ▶			4,774,235.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶			134,912.			134,912.
	4	Income from investment of tax-exempt bond proceeds ▶						
	5	Royalties ▶			177,276.			177,276.
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) ▶						
			(i) Securities	(ii) Other				
	7 a	Gross amount from sales of assets other than inventory	220,912.					
	b	Less cost or other basis and sales expenses	162,265.					
	c	Gain or (loss)	58,647.					
	d	Net gain or (loss) ▶			58,647.			58,647.
	8 a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events ▶						
	9 a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities ▶						
	10 a	Gross sales of inventory, less returns and allowances	a	55,746.				
	b	Less cost of goods sold	b	29,835.				
	c	Net income or (loss) from sales of inventory ▶			25,911.	25,911.		
		Miscellaneous Revenue		Business Code				
	11 a	MISCELLANEOUS		900099	16,814.			16,814.
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a-11d ▶			16,814.			
	12	**Total revenue** See instructions. ▶			6,519,771.	4,586,748.	0.	601,047.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	80,100.	80,100.		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	535,317.	535,317.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	249,671.	237,188.	12,483.	
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	2,160,579.	2,026,310.	134,269.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	110,826.	105,024.	5,802.	
9 Other employee benefits	260,393.	246,805.	13,588.	
10 Payroll taxes	165,604.	156,980.	8,624.	
11 Fees for services (non-employees)				
a Management				
b Legal	8,764.	1,399.	7,365.	
c Accounting	31,580.		31,580.	
d Lobbying	120,000.		120,000.	
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	732,982.	581,558.	151,424.	
12 Advertising and promotion	82,594.	81,745.	849.	
13 Office expenses	304,822.	180,738.	124,084.	
14 Information technology	29,872.	28,053.	1,819.	
15 Royalties	3,463.	3,463.		
16 Occupancy	659,048.		659,048.	
17 Travel	359,382.	281,386.	77,996.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	346,250.	321,100.	25,150.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	52,237.		52,237.	
23 Insurance	29,664.	2,510.	27,154.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ALLOCATION OF M&G	0.	861,012.	-861,012.	
b COMMISSION EXPENSES	156,501.	155,828.	673.	
c TRAINING/DEVELOPMENT	41,183.	35,430.	5,753.	
d FACILITIES/EQUIPMENT	32,826.		32,826.	
e All other expenses	203,922.	110,013.	93,909.	
25 **Total functional expenses** Add lines 1 through 24e	6,757,580.	6,031,959.	725,621.	0.
26 **Joint costs** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ [ ] if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		658,483.	1	778,501.
	2	Savings and temporary cash investments		1,178,263.	2	1,125,678.
	3	Pledges and grants receivable, net		1,396,492.	3	976,234.
	4	Accounts receivable, net		396,692.	4	374,881.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		80,926.	8	65,416.
	9	Prepaid expenses and deferred charges		208,521.	9	199,408.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,426,997.			
	b	Less accumulated depreciation	10b 982,985.	119,345.	10c	444,012.
	11	Investments - publicly traded securities		3,001,798.	11	3,067,611.
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets		148,046.	14	183,893.
	15	Other assets See Part IV, line 11		1,558.	15	1,558.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		7,190,124.	16	7,217,192.
Liabilities	17	Accounts payable and accrued expenses		258,159.	17	334,365.
	18	Grants payable			18	
	19	Deferred revenue		2,864,763.	19	2,916,679.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		266,946.	25	275,309.
	26	**Total liabilities.** Add lines 17 through 25		3,389,868.	26	3,526,353.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,188,120.	27	1,412,299.
	28	Temporarily restricted net assets		2,110,139.	28	1,776,543.
	29	Permanently restricted net assets		501,997.	29	501,997.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,800,256.	33	3,690,839.
	34	Total liabilities and net assets/fund balances		7,190,124.	34	7,217,192.

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,519,771.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,757,580.
3	Revenue less expenses Subtract line 2 from line 1	3	-237,809.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,800,256.
5	Net unrealized gains (losses) on investments	5	128,392.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,690,839.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X	

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. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*	OMB No 1545-0047 **2013** Open to Public Inspection

Name of the organization	Employer identification number
COUNCIL ON SOCIAL WORK EDUCATION	54-1856529

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 [ ] An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a [ ] Type I b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Non-functionally integrated

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2013

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	1,442,688.	3,897,733.	948,872.	2,912,424.	1,331,976.	10,533,693.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	1,442,688.	3,897,733.	948,872.	2,912,424.	1,331,976.	10,533,693.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,081,113.
6 **Public support.** Subtract line 5 from line 4						9,452,580.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	1,442,688.	3,897,733.	948,872.	2,912,424.	1,331,976.	10,533,693.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	75,802.	138,188.	147,989.	171,252.	312,188.	845,419.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	7,616.	29,952.	760.	37,433.	16,814.	92,575.
11 **Total support.** Add lines 7 through 10						11,471,687.

12 Gross receipts from related activities, etc (see instructions) | 12 | 21,951,486.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	82.40 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	82.70 %

16a **33 1/3% support test - 2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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 qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

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, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

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2013
Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization	Employer identification number
COUNCIL ON SOCIAL WORK EDUCATION	54-1856529

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
2 Political expenditures ▶ $ ____
3 Volunteer hours ____

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

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

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

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

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

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	0.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	120,000.	
c Total lobbying expenditures (add lines 1a and 1b)	120,000.	
d Other exempt purpose expenditures	6,637,580.	
e Total exempt purpose expenditures (add lines 1c and 1d)	6,757,580.	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	487,879.	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a) Filing organization's totals	(b) Affiliated group totals
g Grassroots nontaxable amount (enter 25% of line 1f)	121,970.	
h Subtract line 1g from line 1a If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c If zero or less, enter -0-	0.	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	488,239.	472,935.	478,442.	487,879.	1,927,495.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,891,243.
c Total lobbying expenditures	120,000.	120,000.	120,000.	120,000.	480,000.
d Grassroots nontaxable amount	122,060.	118,234.	119,611.	121,970.	481,875.
e Grassroots ceiling amount (150% of line 2d, column (e))					722,813.
f Grassroots lobbying expenditures					

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

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

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

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

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

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

Part IV Supplemental Information

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047 **2013** Open to Public Inspection

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

		(a) Donor advised funds	(b) Funds and other accounts
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 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

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

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	753,286.	697,470.	713,814.	599,755.	546,704.
b Contributions					830.
c Net investment earnings, gains, and losses	98,464.	73,534.	-7,329.	120,251.	55,806.
d Grants or scholarships					
e Other expenditures for facilities and programs	8,856.	17,718.	9,015.	6,192.	3,585.
f Administrative expenses					
g End of year balance	842,894.	753,286.	697,470.	713,814.	599,755.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ .00 %

b Permanent endowment ▶ 59.56 %

c Temporarily restricted endowment ▶ 40.44 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI **Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		198,801.	154,883.	43,918.
e Other		1,228,196.	828,102.	400,094.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				444,012.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col (b) must equal Form 990, Part X, col. (B) line 13) ▶		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	275,309.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	275,309.

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

Schedule D (Form 990) 2013

332053
09-25-13

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements			1	6,897,978.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	128,392.		
b	Donated services and use of facilities	2b	219,980.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	348,372.
3	Subtract line **2e** from line **1**			3	6,549,606.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-29,835.		
c	Add lines **4a** and **4b**			4c	-29,835.
5	Total revenue Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	6,519,771.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements			1	7,007,395.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	219,980.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	219,980.
3	Subtract line **2e** from line **1**			3	6,787,415.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-29,835.		
c	Add lines **4a** and **4b**			4c	-29,835.
5	Total expenses Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	6,757,580.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART V, LINE 4:

EXPLANATION: CSWE HOLDS TWO PERMANENTLY RESTRICTED ENDOWMENT FUNDS. THE CORPUS OF EACH FUND MUST BE HELD IN PERPETUITY, WHILE THE INVESTMENT EARNINGS FROM THE FUNDS MAY BE USED TO SATISFY THE DONOR'S SPECIFIED PURPOSES IN ACCORDANCE WITH THE BOARD'S ENDOWMENT SPENDING POLICY. PROCEEDS FROM ONE FUND ARE USED TO FOSTER INTERACTION WITH THE GLOBAL SOCIAL WORK COMMUNITY AND TO FORMULATE PROJECTS DESIGNED TO FURTHER OUR GLOBAL AWARENESS AND VISION FOR SOCIAL WORK EDUCATION AND PRACTICE. PROCEEDS FROM THE OTHER FUND ARE USED TO SUPPORT AN ANNUAL INTERNATIONAL LECTURE.

PART X, LINE 2:

Part XIII Supplemental Information *(continued)*

EXPLANATION: FOR THE YEAR ENDED JUNE 30, 2014, THE COUNCIL HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER IT IS FILED.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD REPORTED AS AN EXPENSE ON THE FINANCIAL -29,835.
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990, PART VIII, LINE 10B.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD REPORTED AS AN EXPENSE ON THE FINANCIAL -29,835.
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990, PART VIII, LINE 10B.

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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

Part I — General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WISCONSIN, GB 2420 NICOLET DRIVE GREEN BAY, WI 54311	39-1805963	GOVERNMENT	9,000.	0.			GENERAL ASSISTANCE
PLYMOUTH STATE UNIVERSITY 17 HIGH STREET, MSC 51 PLYMOUTH, NH 03264	02-6000937	501(C)(3)	9,000.	0.			GENERAL ASSISTANCE
UNIVERSITY OF MARYLAND-BALT P.O. BOX 41428 BALTMORE, MD 21203	15-2600203	GOVERNMENT	9,000.	0.			GENERAL ASSISTANCE
HUNTER COLLEGE 230 W. 41ST STREET NEW YORK, NY 10036	13-1988190	501(C)(3)	9,000.	0.			GENERAL ASSISTANCE
UNIVERSITY OF PORTLAND 5000 N. WILLAMETTE BLVD PORTLAND, OR 97203	93-0401259	501(C)(3)	9,000.	0.			GENERAL ASSISTANCE
TRUSTEES OF BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL, MA 02467	04-2103545	501(C)(3)	9,000.	0.			GENERAL ASSISTANCE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 8.

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

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF VERMONT 217 WATERMAN BUILDING BURLINGTON, VT 05405	03-0179440	501(C)(3)	9,000.	0.			GENERAL ASSISTANCE
SOUTHERN CT STATE UNIVERSITY 501 CRESCENT STREET NEW HAVEN, CT 06515	23-7208882	501(C)(3)	9,000.	0.			GENERAL ASSISTANCE

Part III **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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SAMHSA FELLOWS	25	522,342.	0.		
SAMHSA FELLOWS TUITION	3	3,000.	0.		
GENERAL ASSISTANCE	3	9,975.	0.		

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

PART I, LINE 2:

EXPLANATION: THE CSWE GERO-ED CENTER REQUIRES ALL GRANT APPLICANTS TO SUBMIT BUDGETS WITH THEIR GRANT APPLICATIONS. ONCE FUNDED, THEY SUBMIT ANNUAL EXPENDITURE REPORTS. IF BUDGET CHANGES BECOME NECESSARY THAT EXCEED 10% OF ANY LINE ITEM IN THE APPROVED BUDGET, A BUDGET REVISION REQUEST IS SUBMITTED TO CSWE.

CSWE'S MINORITY FELLOWSHIP PROGRAM (MFP) OVERSEES FUNDING OPPORTUNITIES FOR RACIAL/ETHNIC MASTERS AND DOCTORAL SOCIAL WORK STUDENTS. THE FELLOWSHIP

Part IV Supplemental Information

PROGRAM IS FUNDED BY THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA), PART OF THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES. FELLOWSHIP RECIPIENTS RECEIVE MONETARY STIPENDS, MENTORING AND OTHER NON-MONETARY SUPPORTS.

PARTNERSHIP SUPPORT: PARTNERSHIPS FOR PERSON-CENTERED AND PARTICIPANT-DIRECTED LONG-TERM SERVICES AND SUPPORT. THIS PARTNERSHIP IN FUNDED BY THE NEW YORK COMMUNITY TRUST (GEO-ED).

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

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 ☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ 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		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
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?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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			
a	The organization?	5a		X
b	Any related organization?	5b		X
	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			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
(1) DARLA SPENCE COFFEY	(i)	214,168.	0.	0.	7,156.	10,685.	232,009.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III | Supplemental Information

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization	Employer identification number
COUNCIL ON SOCIAL WORK EDUCATION	54-1856529

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

INDIVIDUAL MEMBERS, AS WELL AS GRADUATE AND UNDERGRADUATE PROGRAMS OF PROFESSIONAL SOCIAL WORK EDUCATION. FOUNDED IN 1952, THIS PARTNERSHIP OF EDUCATIONAL AND PROFESSIONAL INSTITUTIONS, SOCIAL WELFARE AGENCIES, AND PRIVATE CITIZENS IS RECOGNIZED BY THE COUNCIL FOR HIGHER EDUCATION ACCREDITATION AS THE SOLE ACCREDITING AGENCY FOR SOCIAL WORK EDUCATION IN THE COUNTRY.

CSWE PURSUES THIS MISSION IN HIGHER EDUCATION BY SETTING AND MAINTAINING NATIONAL ACCREDITATION STANDARDS FOR BACCALAUREATE AND MASTER'S DEGREE PROGRAMS IN SOCIAL WORK, BY PROMOTING FACULTY DEVELOPMENT, BY ENGAGING IN INTERNATIONAL COLLABORATIONS, AND BY ADVOCATING FOR SOCIAL WORK EDUCATION AND RESEARCH.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

EXPLANATION: IN FY14, THE ORGANIZATION DISCONTINUED ITS RESEARCH INTEGRITY PROGRAM.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAMS: CSWE HOUSES TWO INSTITUTES, TWO CENTERS, AND OTHER INITIATIVES THAT STRIVE TO STRENGTHEN AND IMPROVE SPECIFIC AREAS OF SOCIAL WORK EDUCATION THROUGH FACULTY AND STUDENT TRAINING, POLICY, AND DATA COLLECTION. SOME EXAMPLES INCLUDE:

- THE KATHERINE A. KENDALL INSTITUTE FOR INTERNATIONAL SOCIAL WORK EDUCATION WORKS TO PREPARE EDUCATORS, RESEARCHERS, STUDENTS, AND PRACTITIONERS FOR AN INCREASINGLY GLOBAL COMMUNITY.

Name of the organization	Employer identification number
COUNCIL ON SOCIAL WORK EDUCATION	54-1856529

- THE CSWE LEADERSHIP INSTITUTE IS DESIGNED TO PROMOTE FUTURE LEADERS IN SOCIAL WORK EDUCATION, HIGHER EDUCATION, AND THE SOCIAL WORK PROFESSION.
- THE CSWE CENTER FOR DIVERSITY AND SOCIAL & ECONOMIC JUSTICE ADVANCES INDIVIDUAL GROWTH, COMMUNITY WELL-BEING, AND SOCIAL JUSTICE.
- THE RECOVERY TO PRACTICE INITIATIVE DEVELOPS, IMPLEMENTS, AND EVALUATES MENTAL HEALTH RECOVERY-ORIENTED TRAINING MATERIALS FOR SOCIAL WORK EDUCATORS AND PRACTITIONERS.
- THE NEW VIRTUAL FILM FESTIVAL FEATURES STUDENT FILMS ON SOCIAL WORK ISSUES THAT CAN ENHANCE SOCIAL WORK TEACHING AND LEARNING.

EXPENSES $ 801,418. INCLUDING GRANTS OF $ 1,000. REVENUE $ 52,002.

SOCIAL WORK EDUCATION RESEARCH: THE CSWE ORGANIZATIONAL MISSION INCLUDES THE CHARGE TO ADVOCATE FOR SOCIAL WORK EDUCATION AND RESEARCH. CSWE WORKS TOWARD THAT MISSION THROUGH THE RESEARCH AGENDA, WHICH OUTLINES THE NEED FOR RESEARCH TO INFORM POLICY AND PRACTICE FOR CSWE STAFF, BOARD OF DIRECTORS, AND THE VOLUNTEER COMMISSIONS AND COUNCILS, AND TO SERVE THE NEEDS OF CSWE MEMBER PROGRAMS - THEIR DEANS, DIRECTORS, FACULTY MEMBERS, AND STUDENTS. CSWE CONDUCTS RESEARCH THROUGH SURVEYS, THE ANNUAL CENSUS OF SOCIAL WORK PROGRAMS, AND QUALITY ASSURANCE MEASURES FOR THE COMMISSION ON ACCREDITATION. THE RESEARCH CAPACITY IS FURTHER AUGMENTED THROUGH THE CSWE SCHOLARS PROGRAM, WHICH FUNDS RESEARCH PROJECTS IN AREAS OF NEED.

EXPENSES $ 705,371. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

JOHN A. HARTFORD PROGRAM: THE JOHN A. HARTFORD FOUNDATION IS A PRIVATE PHILANTHROPY WORKING TO IMPROVE THE HEALTH OF OLDER AMERICANS. BASED IN NEW YORK CITY, IT WAS FOUNDED IN 1929 BY THE FAMILY OWNERS OF THE A&P

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

GROCERY CHAIN. AFTER THREE DECADES OF CHAMPIONING RESEARCH AND EDUCATION IN GERIATRIC MEDICINE, NURSING, AND SOCIAL WORK, TODAY THE FOUNDATION PURSUES OPPORTUNITIES TO PUT GERIATRICS EXPERTISE TO WORK IN ALL HEALTH CARE SETTINGS BY:

- ADVANCING PRACTICE CHANGE AND INNOVATION;
- SUPPORTING TEAM-BASED CARE THROUGH INTERDISCIPLINARY EDUCATION OF ALL HEALTH CARE PROVIDERS;
- SUPPORTING POLICIES AND REGULATIONS THAT PROMOTE BETTER CARE; AND
- DEVELOPING AND DISSEMINATING NEW EVIDENCE-BASED MODELS THAT DELIVER BETTER, MORE COST-EFFECTIVE HEALTH CARE.

EXPENSES $ 687,048. INCLUDING GRANTS OF $ 89,075. REVENUE $ 0.

MEMBERSHIP SERVICES: CSWE CONDUCTS VARIOUS ACTIVITIES AND SERVICES TO BENEFIT ITS MEMBERS AND MEET THEIR NEEDS. IT ALSO PROVIDES CURRENT INFORMATION TO ITS MEMBERS THROUGH ITS NEWSLETTER AND VIA ITS WEBSITE, EXPENSES $ 364,696. INCLUDING GRANTS OF $ 0. REVENUE $ 2,862,176.

PUBLICATIONS: CSWE'S PUBLICATIONS PROGRAM DEVELOPS NEW TOOLS TO HELP SOCIAL WORKERS AND SOCIAL WORK EDUCATORS SERVE THEIR CLIENTS AND ADVANCE THEIR PROFESSION.

CSWE PRESS IS A NICHE PUBLISHER THAT ADDRESSES THE NEEDS OF SOCIAL WORK EDUCATORS. AREAS OF EXPERTISE INCLUDE THE PHILOSOPHY, THEORY, AND PRACTICE OF TEACHING; THE PROCESS AND EVALUATION OF LEARNING; AND THE ORGANIZATION AND STRUCTURE OF SOCIAL WORK EDUCATION.

CSWE'S FLAGSHIP PUBLICATION IS THE JOURNAL OF SOCIAL WORK EDUCATION (JSWE), A PEER REVIEWED PROFESSIONAL JOURNAL CIRCULATED TO MORE THAN 3,900 MEMBERS AND INSTITUTIONAL SUBSCRIBERS.

EXPENSES $ 202,899. INCLUDING GRANTS OF $ 0. REVENUE $ 1,830.

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

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

EXPLANATION: THE COUNCIL HAS TWO CATEGORIES OF MEMBERS - FULL MEMBERS (VOTING RIGHTS) AND ASSOCIATE MEMBERS (NON-VOTING). FULL MEMBERSHIP IS AVAILABLE TO, (1) EDUCATIONAL PROGRAMS, WHICH CONSIST OF UNDERGRADUATE AND GRADUATE SOCIAL WORK EDUCATION PROGRAMS ACCREDITED BY CSWE, (2) FACULTY AND ADMINISTRATORS, WHICH CONSIST OF PERSONS HOLDING PAID FACULTY, ADMINISTRATIVE, OR MANAGERIAL APPOINTMENTS IN PROGRAMS ACCREDITED BY CSWE; AND (3) INDIVIDUAL MEMBERS, WHICH CONSIST OF INDIVIDUALS AFFILIATED WITH NATIONAL, STATE, LOCAL, VOLUNTARY, PUBLIC SOCIAL WELFARE AGENCIES, AND OTHER PROFESSIONAL SOCIAL WORK ORGANIZATIONS AS WELL AS FIELD INSTRUCTORS WITH EDUCATIONAL RESPONSIBILITIES FOR STUDENTS IN SOCIAL WORK UNDERGRADUATE AND GRADUATE PROGRAMS. ASSOCIATE MEMBERSHIP CONSISTS OF (1) SOCIAL WORK EDUCATION PROGRAMS IN CANDIDACY STATUS FOR CSWE ACCREDITATION, (2) EMERITUS FACULTY OR ADMINISTRATORS, (3) STUDENT MEMBERS, AND (4) AGENCIES, INSTITUTIONS, PROFESSIONAL LIBRARIES AND LIBRARY ASSOCIATIONS, AND OTHER ORGANIZATIONS INTERESTED IN SOCIAL WORK EDUCATION.

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: BOARD OF DIRECTOR MEMBERS ARE ELECTED BY FULL MEMBERS OF THE COUNCIL IN ACCORDANCE WITH THE TERMS OF THE CSWE BYLAWS.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: MEMBERSHIP HAS TO APPROVE BY-LAWS AND NOMINATING COMMITTEE.

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

EXPLANATION: THE FORM 990 WAS PREPARED BY AN OUTSIDE ACCOUNTING FIRM. THE ORGANIZATION REVIEWED THE FORM 990 WITH THE ENTIRE BOARD PRIOR TO FILING.

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

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

EXPLANATION: EACH DIRECTOR OF THE COUNCIL IS REQUIRED TO UPDATE IF A CONFLICT OF INTEREST ARISES, THE BOARD HOLDS A DISCUSSION ABOUT THE CONFLICT OF INTEREST WHILE THE INDIVIDUAL THAT HAS THE CONFLICT IS NOT PRESENT. IF THE CONFLICT OF INTEREST IS SIGNIFICANT, THE BOARD MAY ASK THE INDIVIDUAL TO RESIGN FROM HIS/HER BOARD DUTIES.

EMPLOYEES OF THE ORGANIZATION MUST READ AND SIGN THE CONFLICT OF INTEREST POLICY AT THE TIME OF EMPLOYMENT. THE SUPERVISOR ADDRESSES ANY CONFLICTS.

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

EXPLANATION: THE PROCESS FOR DETERMINING COMPENSATION INCLUDES A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, USE OF COMPARABILITY DATA AND DOCUMENTATION OF THE DECISION REACHED. THE LAST COMPENSATION REVIEW TOOK PLACE JULY 2014.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: CSWE'S BYLAWS ARE AVAILABLE FROM ITS WEBSITE. CSWE MAKES ITS OTHER GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROF. FEES & OUTSIDE SVCS:

PROGRAM SERVICE EXPENSES	40,383.
MANAGEMENT AND GENERAL EXPENSES	35,498.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	75,881.

Name of the organization	Employer identification number
COUNCIL ON SOCIAL WORK EDUCATION	54-1856529

FREELANCE FEES:

PROGRAM SERVICE EXPENSES	31,746.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	31,746.

MANUSCRIPT SUBMISSION FEES:

PROGRAM SERVICE EXPENSES	775.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	775.

EXHIBITS:

PROGRAM SERVICE EXPENSES	57,861.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	57,861.

SECURITY:

PROGRAM SERVICE EXPENSES	6,149.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,149.

SIGN LANGUAGE:

PROGRAM SERVICE EXPENSES	11,305.
MANAGEMENT AND GENERAL EXPENSES	0.

Name of the organization	Employer identification number
COUNCIL ON SOCIAL WORK EDUCATION	54-1856529

FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	11,305.
PHOTOGRAPHER:	
PROGRAM SERVICE EXPENSES	4,055.
MANAGEMENT AND GENERAL EXPENSES	626.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,681.
RETENTION EFFORTS:	
PROGRAM SERVICE EXPENSES	6,440.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,440.
SUBCONTRACTS:	
PROGRAM SERVICE EXPENSES	409,183.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	409,183.
RECRUITMENT/RETENTION:	
PROGRAM SERVICE EXPENSES	3,213.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,213.
ANNUAL REPORT:	

Name of the organization: COUNCIL ON SOCIAL WORK EDUCATION

Employer identification number: 54-1856529

PROGRAM SERVICE EXPENSES	5,490.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,490.
INSTITUTIONAL RESEARCH:	
PROGRAM SERVICE EXPENSES	4,958.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,958.
HR SOLUTIONS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	60,300.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	60,300.
GOVERNMENT RELATIONS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	55,000.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	55,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	732,982.