Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation)

Department of the Treas	ur
Internal Revenue Service	e.

► Do not enter social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on this form as it may be made public of the social security numbers on the social security numbers on the social security numbers on the social security numbers of the security numbers of the social security numbers of the securit

tions)	(2018)
MQ	O pen to P ublic Inspection

-	A F	or the 2	2018 calendar year, or tax year beginning JUL 1 2018	nd endin	9 JI	UN 30 20)19	
-		heck if	C Name of organization					ication number
	ap	plicable	S traine of organization				y 0. 1.00.1	
	\v	Address change	CACA OF CT LOUIC					
		Name	CASA OF ST. LOUIS Doing business as	43-1807059				
	H	Jchange ∏Initial		Room/	'outo	F Talaah		
	늗	_lreturn ∏Final	Number and street (or P.O box if mail is not delivered to street address)	E relepn	one numbe			
	L	return/ termin-	105 S. CENTRAL AVENUE					15,2912
	_	ated Amended	City or town, state or province, country, and ZIP or foreign postal code			G Gross red		2,487,252.
	⊨	return Applica-	ST. LOUIS MO 63105	1 ' '	s a group r			
	_	Jtion pending	F Name and address of principal officer STEVE MOERGEN	_			ubordinate	
			SAME AS C ABOVE		1	1	subordinates i	
/ .			npt status $x = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)	(1) or 🔲	1827	1		a list (see instructions)
			▶ WWW.STLCASA.ORG		$\prime\prime$			on number 🕨
,			ganization x Corporation Trust Association Other	<u> </u>	Year	of formation:	1998 I	M State of legal domicile: MO
Į	Pa	rt I S	Summary	<u> </u>				
	a	1 Br	riefly describe the organization's mission or most significant activities $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	CATE FO	R AB	USED AND		
	auc	NI	EGLECTED CHILDREN IN ST. LOUIS					
	ř.	2 CI	heck this box 🕨 🔛 if the organization discontinued its operations or dis	sposed of	more	than 25%	of its net a	ssets
	ŏ	3 N	umber of voting members of the governing body (Part VI, line 1a)				3	14
	ο ₈	4 N	umber of independent voting members of the governing body (Part Vi line)	b)I\/EF	$\overline{}$		4	14
	Activities & Governance	5 To	otal number of individuals employed in calendar year 2018 (Fart V. line za	-1 V C L	<i></i>		5	33
	vit.	6 To	otal number of volunteers (estimate if necessary)		- 1	8	6	252
	Ç	7 a To	otal unrelated business revenue from Part VIII, column (C), line $\mathbb{C}_{2} = \mathbb{C} \mathbb{C} \mathbb{C}$ () 2 2019	9	OS	7a	0.
_	1	b Ne	et unrelated business taxable income from Form 990-T, line 88			SI SI	7b	1,760.
رِ			OGDI	= N 11	E	Prior Y	ear	Current Year
ર્	a	8 C	ontributions and grants (Part VIII, line 1h)	_14, 0	┺	2	159,553.	1,920,695.
}	Revenue	9 Pr	rogram service revenue (Part VIII, line 2g)				94 138.	101,556.
•	eve	10 In	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		7,235.	9,083.		
	œ	11 0	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				-27 210	-29 233
		12 To	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)		2	233,716.	2,002,101.
•		13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)				0.	0.
		14 B	enefits paid to or for members (Part IX, column (A), line 4)				0.	0.
	Ø	15 Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-	0)		1	633,921.	1,702,734.
	Expenses	16a Pr	rofessional fundraising fees (Part IX, column (A), line 11e)				0.	0.
	je d			14.020.				
	ũ		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				311,137.	381,460.
		18 To	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)			1	945.058.	2.084.194.
			evenue less expenses Subtract line 18 from line 12				288 658	-82,093.
-	Sec			····	Be	ginning of C	-	End of Year
-	Net Assets or Fund Balances	20 To	otal assets (Part X, line 16)				762,246.	1,664,877.
	ASS J Ba		otal liabilities (Part X, line 26)				136 094	126 836
2	E G		et assets or fund balances. Subtract line 21 from line 20			1	626 152	1,538,041,
Ī			Signature Block					
1			es of perjury, I declare that I have examined this return, including accompanying school	dules and s	tatem	ents, and to	the best of m	ny knowledge and belief, it is
			and complete. Declaration of preparer (other than officer) is based on all information of					.,
-	., .,	00.1100.,	Z / MO20211	· · · · · · · · · · · · · · · · · · ·	.ри. о.	(1/27	12019
	Sıgr	.	Signature of officer			Da	ite /	
	Here		STEVE MOERGEN EXECUTIVE DIRECTOR				-	
	nere		Type or print name and title					
-			Print Pype preparer's name Preparer's name	\mathcal{T}		ate	Check	PTIN
1	Paid		ENNIFER M. VACHA	/	- 0	9-25-19	if self-employ	-
	Prep	<u> </u>	I'M'S name BROWN SMITH WALLACE LLP				m's EIN	43-1001367
	Use (⊢	IMS lattle BROWN SMITH WALLACE LLP				0 4.111	42 1001201
		ر ب				D+	1000 00 21 4	1.983.1200
7	14000	the IDC	ST. LOUIS MO 63141 discuss this return with the preparer shown above? (see instructions)				10110 110.3 1 4	x Yes No
-			LHA For Paperwork Reduction Act Notice, see the separate instru	otions				Form 990 (2018)
	332UC	/i 12-31-	io thin for raperwork negocial Activatice, see the separate instru	vuons.				1 01111 000 (2010)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	n 990 (2018) CASA OF ST. LOUIS	43-180705	Page 2
Pa	rt III Statement of Program Service Accomplishments		
_	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
	CASA OF ST. LOUIS ADVOCATES FOR ABUSED AND NEGLECTED CHILDREN AND		
	YOUTH IN ST. LOUIS BY REPRESENTING THEIR BEST INTERESTS IN COURT AND		
	IN THE COMMUNITY. OUR VISION IS THAT EVERY CHILD LIVES IN A SAFE		
	PERMANENT HOME AND HAS THE OPPORTUNITY TO THRIVE.		
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		Yes X No
Ū	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	as measured by	expenses
Ξ.	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot		
	revenue if any far each program convex reported	incre, and total of	Aponoco, and
4a	(Code) (Expenses \$1,497,938. including grants of \$) (Rev	¢	101 556)
44		enue 5	101,550. /
	CASA OF ST. LOUIS INTEGRATES A COURT APPOINTED SPECIAL ADVOCATE (CASA)		·· · - · · · · · · · · · · · · · · ·
	PROGRAM WITH LEGAL ADVOCATES FOR CHILDREN AND YOUTH, A CHILDREN'S LAW		
	OFFICE. TEAMS OF CHILD ADVOCATES, INCLUDING WELL-TRAINED CASA		
	VOLUNTEERS, CHILD ADVOCACY ATTORNEYS AND SOCIAL SERVICE PROFESSIONALS		
-	GIVE CHILDREN A VOICE AS THEIR FUTURES ARE DECIDED. WHILE WORKING		· · ·
	TOWARD A SAFE PERMANENT HOME, CASA OF ST. LOUIS' CHILD ADVOCATES HELP		
	IDENTIFY, EXPEDITE AND MONITOR THE HEALTH, MENTAL HEALTH AND		
	EDUCATIONAL SERVICES OUR CHILDREN DESPERATELY NEED, THIS YEAR 252 CASA		
	VOLUNTEERS DONATED 30,240 HOURS OF SERVICES TO 761 ABUSED AND NEGLECTED		· · · · · · · · · · · · · · · · · · ·
	CHILDREN IN ST. LOUIS FOSTER CARE, THE PASSIONATE TEAMS OF ADVOCATES		
	PROVIDE LEGAL REPRESENTATION AND SOCIAL ADVOCACY TO ENSURE CHILD	·	****
	VICTIMS CAN HEAL THRIVE AND FIND A FOREVER FAMILY.		
4b	(Code) (Expenses \$) (Rev	enue \$)
	All and the state of the state		
			
4c	(Code) (Expenses \$ including grants of \$) (Rev	venue \$)
4d	Other program services (Describe in Schedule O)		
-	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,497,938.		
			Form 990 (2018)

Form 990 (2018) CASA OF ST. LOUIS Part IV Checklist of Required Schedules

_	·		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		165	NO
1	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		- 1	<u> </u>
•	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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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		х
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		х
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	_		- :
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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		<u>X</u>
	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	4 4 5		
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Х	<u> </u>
128	Schedule D. Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
Ü	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
	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		х
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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a ^o If "Yes," complete Schedule G, Part II	18	х	<u> </u>
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		х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form 990 (2018) 43-1807059 Page 4 CASA OF ST. LOUIS Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III Х 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 Х 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 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), 501(c)(4), and 501(c)(29) 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 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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L. Part II 26 Х 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 х Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 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 b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b Х 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Х 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 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Х 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Х 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 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 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter 0 if not applicable b Enter the number of Forms W-2G included in line 1a Enter 0 if not applicable 1b

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

	990 (2018) CASA OF ST. LOUIS	43-18	07059	F	age 5							
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T							
0-	Catantha aumber of ampleuses vanaded on Form W.O. Transported of War-s and Tay Chatemants	1 1	1.	Yes	No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	-	2.2									
	filed for the calendar year ending with or within the year covered by this return 2a 33 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?											
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)											
0-												
3a												
D 4 -	b If "Yes," has it filed a Form 990 T for this year? If "No" to line 3b, provide an explanation in Schedule O											
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				l							
	financial account in a foreign country (such as a bank account, securities account, or other financial	account) /	4a	+,,	X							
D	If "Yes," enter the name of the foreign country		annunana.	iii iiiinmeniii	n munoman							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAH)			~~~~							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	-1In	5a		X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		X							
_	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>	+	 							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization soli										
	any contributions that were not tax deductible as charitable contributions?	-	<u>6a</u>		X							
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts										
	were not tax deductible?		6b	٠ ي	 							
7	Organizations that may receive deductible contributions under section 170(c).											
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and sei	vices provided to the		X								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	_	7b	X								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required										
	to file Form 8282?	1 1	7c	-	Х							
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		.								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e	ļ	X							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f	-	Х							
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo				1							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		98-C? 7h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	ļ 	. 								
	sponsoring organization have excess business holdings at any time during the year?		8_									
9	Sponsoring organizations maintaining donor advised funds.				-							
а	Did the sponsoring organization make any taxable distributions under section 4966?		<u>9a</u>	 	ļ							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	ļ	 							
10	Section 501(c)(7) organizations. Enter	1 1		١.	'							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a										
b		10b										
11	Section 501(c)(12) organizations. Enter				١,							
а	Gross income from members or shareholders	11a										
b	Gross income from other sources (Do not net amounts due or paid to other sources against		'.		-							
	amounts due or received from them)	11b										
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		<u> </u>							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			1							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u> </u>							
а	is the organization licensed to issue qualified health plans in more than one state?		13a		-							
	Note. See the instructions for additional information the organization must report on Schedule O			•								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	. 1										
	organization is licensed to issue qualified health plans	13b										
С	Enter the amount of reserves on hand	13c		ļ								
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	<u> </u>	х							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b	ļ	ļ							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration or										
	excess parachute payment(s) during the year?		15		Х_							
	If "Yes," see instructions and file Form 4720, Schedule N			-								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		Х							
	If "Yes." complete Form 4720, Schedule O			1	1							

Form 990 (2018) CASA OF ST. LOUIS 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 Section A. Governing Body and Management Νo Yes 1a Enter the number of voting members of the governing body at the end of the tax year 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Х 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 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 Х b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 х 14 Did the organization have a written document retention and destruction policy? 14 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 Other officers or key employees of the organization 15b 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 b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply _x_ Upon request X Own website __ Another's website Other (explain in Schedule O) 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 State the name, address, and telephone number of the person who possesses the organization's books and records 20 THE ORGANIZATION - 314.615.2912

CENTRAL AVENUE ST LOUIS MO 63105

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Form 990 (2018)

CASA OF ST. LOUIS

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 th	is 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

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

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

(A) Name and Title	(B) Average hours per week	box	not c	Pos heck ss pe	more rson	than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related - organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the rorganization and related organizations
(1) ASHLEY ROEDEMEIER	3.00									
PRESIDENT		X		X				0.	0.	0,
(2) LEONORA TRAWICK	3.00	ł								
VICE PRESIDENT		Х	<u> </u>	Х	<u> </u>			0.	0.	0.
(3) CAROLYN COPELAND WEISS	2.00	-							_	_
SECRETARY	 	Х		х				0.	0.	0.
(4) SCOTT LARSON	3.00	-								
TREASURER		Х		х		_	-	0.	0.	0.
(5) JAMIE KONDIS	0.50	1								
BOARD MEMBER	0.50	Х	1					0,	0.	0.
(6) KERRIN KOWACH	0.50	١.,								_
BOARD MEMBER	0.50	Х						0.	0.	0.
(7) SHARIE MCLAFFERTY	0.50	x	Ì					0.	0.	0.
BOARD MEMBER (8) CINDY MURDOCH	0.50	^					\vdash	0.	0.	<u> </u>
BOARD MEMBER	0.30	x						0.	0.	0.
(9) MARCIE RUCKER	0.50	^				T				<u> </u>
BOARD MEMBER	0.50	X						0.	0.	0.
(10) AMY RUIZ	0.50	. <u>A.</u> .								
BOARD MEMBER	0.50	x						0.	0.	0.
(11) BETTY SANDERS	0.50									
BOARD MEMBER		x						0.	0.	0.
(12) JOY SYRCLE	0.50									
BOARD MEMBER		x		ļ				0.	0.	0.
(13) LISA VAN FLEET	0.50									
BOARD MEMBER (RESIGNED 9/2018)		х				<u> </u>		0.	0,	0.
(14) KIMBERLEY VUITEL	0.50									
BOARD MEMBER		Х					L	0.	0.	0.
(15) SHAWN WILLIAMS	0.50									
BOARD MEMBER		х				<u> </u>		0.	0.	0.
(16) STEVE MOERGEN	50.00									
EXECUTIVE DIRECTOR		ļ	ļ	х		<u> </u>		95,466.	0.	9,579.
	<u> </u>				Ĺ	<u> </u>	L	<u> </u>		

	1 990 (2018) CASA OF ST. I T VII Section A. Officers, Directors, Trus		alou	005	200	4 H	ahe		ompensated Employee	43-18070			Page 8
	(A) Name and title	(B) Average hours per week	(do box	not ci	((Pos heck ss pe	C) Ition more rson		one n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amoui	ated nt of
	•	(list any hours for related organizations below line)	Individual trustee or director institutional trustee Officer Key employee Highest compensated employee		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		compensation from the organization and related organizations				
				-	-								
											-		
С	Sub-total Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but n			lioto	ad al	2011	-\t	> >	95,466. 0. 95,466.	000 of rapadable	0.		9,579. 0. 9,579.
	compensation from the organization		<u> </u>	11516	:U ai	JOV6	3) WI	10 16	eceived more than \$100	,000 or reportable			0
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	e, ke	y er	nplo	yee,	or h	highest compensated ei	mployee on	·- 3	Ye	No X
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	um of reportabl 0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual	_	4		х
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				-		elate	ed organization or indivi	dual for services	5		x
1	tion B. Independent Contractors Complete this table for your five highest co	mpensated inc	lepe	ende	nt c	ontr	acto	rs ti	hat received more than	\$100.000 of comp	ensatio	n from	
•	the organization Report compensation for	•	•							•	oriodilo		
	(A) Name and business	address	NO	NE	-				(B) Description of s	ervices	Com	(C) pensat	ion
				_				-					•
								+			 -		
								+					

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

Form 990 (2018) 43-1807059 Page 9 CASA OF ST. LOUIS Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Gifts, Grants 1 a Federated campaigns 1a 125,340 b Membership dues 1b Fundraising events 1c 201,651 d Related organizations 1d Contributions, (and Other Simil e Government grants (contributions) 1e 83/,1// f All other contributions, gifts, grants, and similar amounts not included above 756,527 7,597 g Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f 920 695 Business Code GUARDIAN AD LITEM FEES 624100 Service 101,556 101,556 All other program service revenue q Total. Add lines 2a-2f 101,556 Investment income (including dividends, interest, and other similar amounts) 9,083. Income from investment of tax-exempt bond proceeds 5 Royalties (ı) 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 404,037 b Less cost or other basis 404,037 and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue ıncludıng \$ <u>201,651.</u> of contributions reported on line 1c) See Part IV, line 18 а 51,250 b Less direct expenses 81 114 c Net income or (loss) from fundraising events -29.864 -29,864. 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a MISCELLANEOUS REVENUE 909999 631. b

631

101,556

2,002,101

-20 150.

d All other revenue e Total. Add lines 11a-11d

Total revenue See instructions

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 respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign	•			
	organizations, foreign governments, and foreign	At 0 19		•	•
	individuals See Part IV, lines 15 and 16			~~~~	-
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	109,773.	65,864.	21,954.	21,955.
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	1,324,139.	1,055,934.	74,754.	193,451.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	24,909.	21,363.		3,546.
9	Other employee benefits	135,409.	115,264.	405.	19,740.
10	Payroll taxes	108,504.	84,884.	7,109.	16,511.
11	Fees for services (non-employees)				
a	Management	· · · · · · · · · · · · · · · · · ·			
b	Legal				***************************************
c	Accounting	88,795.		88,795.	
d	Lobbying			**************************************	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch O.)	02.040	20 (72	40.000	6 200
40		93,040.	38,653.	48,099.	6,288.
12	Advertising and promotion Office expenses	5,234.	1,677.	2,130.	1,427.
13 14	Information technology	85,967. 8,815.	42,758. 3,662.	9,753. 4,557.	33,456.
15	Royalties	8,813.	3,002.	4,557.	596.
16	Occupancy	9,933.	7,568.	779.	1,586.
17	Travel	37,639.	33,068.	2,325.	2,246.
18	Payments of travel or entertainment expenses	37,035.	33,000.	2,323.	2,240.
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,331.	2,276.	447.	5,608.
20	Interest		2,2.0.		5,555.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,663.	1,712.	1,472.	1,479.
23	Insurance	22,363.	15,355.	7,008.	
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 (C.)		/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,	
а	PUBLICATIONS AND MEMBER	9,382.	5,906.	2,258.	1,218.
b	MISC EXPENSES	7,298,	1,994.	391.	4,913.
С					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	2,084,194.	1,497,938.	272,236.	314,020.
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 X if following SOP 98-2 (ASC 958-720)				
00004	0 12-31-18				Form 990 (2018)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year Cash - non interest bearing 1 1 89,288 175,830. 2 Savings and temporary cash investments 885,195 2 568,452. 3 Pledges and grants receivable, net 3 720,728, 879,563. Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 46,939 16,314. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 167,480 b .Less accumulated depreciation 10b 143,002 19.856 10c 24 478 Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 240 15 240. 16 Total assets. Add lines 1 through 15 (must equal line 34) 762,246 16 1,664,877. 126 836. 17 Accounts payable and accrued expenses 132,794 17 18 Grants payable 18 19 19 Deferred revenue 3,300 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 25 26 Total liabilities. Add lines 17 through 25 136,094 26 126 836 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 094.952 27 794 039 531,200 28 28 Temporarily restricted net assets 744,002. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 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 33 Total net assets or fund balances 1,626,152 1,538,041.

1,664,877,

1,762,246

Total liabilities and net assets/fund balances

<u>Form</u>	1990 (2018) CASA OF ST. LOUIS	43-1807059		<u>P</u> a	ge 12
Pa	rt XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response or note to any line in this Part XI				х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	002	101.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	084	194.
3	Revenue less expenses Subtract line 2 from line 1	3		-82	093.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	626	152.
5	Net unrealized gains (losses) on investments	5		,	-418.
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		- 5	600.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	•			
	column (B))	10"	1	_538	041.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>ليا</u>
				Yes	No
1	Accounting method used to prepare the Form 990		1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	ŀ		
2a	, , ,		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	i 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	х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both				
	x Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	 ,
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle 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 requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		_3b_	000	<u> </u>
			Form	990	(2018)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

CASA OF ST. LOUIS 43-1807059 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (II) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1 10 organization support (see instructions) support (see instructions) above (see instructions)) **Total**

C-1-	adula A /Farra 000 as 000 F7\ 0010						
	edule A (Form 990 or 990 EZ) 2018 c art II Support Schedule for			Sections 170	(b)(1)(A)(iv) and	43-1807059 d 170(b)(1)(A)(vi	
	(Complete only if you checke						
	fails to qualify under the test						/ -
Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not					/	
	ınclude any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon'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				7		
4	Total. Add lines 1 through 3	CANAGE TENNES OF STA	\$ \$1. A			757 (27.7. 157.0)	
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,	The second second second					
	column (f)	新疆的地方等表现					
	Public support. Subtract line 5 from line 4 ction B. Total Support	Marin San Alberta	470 (65) 20 - 01,5 247	CHANTE THE	STATE AND AND A	Chore a Chilly on participal	
	ndar year (or fiscal year beginning in)	(=) 2014	/L\ 0015	(c) 20,16	(4) 0017	(-) 0010	(D. T-4-1
7	Amounts from line 4	(a) 2014	(b) 2015	(6) 20,16	(d) 2017	(e) 2018	(f) Total
8	Gross income from interest,					-	
Ū	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business			j			
	activities, whether or not the		/				
	business is regularly carried on		/				
10	Other income Do not include gain		/				
	or loss from the sale of capital		/				
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10		5434/39:30	经的证据	A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	with the state of	
12	Gross receipts from related activities	, etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	first, second, third	d, fourth, or fifth ta	ax year as a sectioi	n 501(c)(3)	
Sec	organization, check this box and storection C. Computation of Publ		/ rçentage				<u>▶</u>
14	Public support percentage for 2018 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2017	7 Schedule A, Pa _l rt	II, line 14		ĺ	15	%
16a	33 1/3% support test - 2018. If the	organization did/no	t check the box or	line 13, and line	14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				ightharpoons
b	33 1/3% support test - 2017. If the	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check this	s box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2018 . If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	ınd line 14 is 10% o	r more,
	and if the organization meets the "fac	cts-and circumstan	ces" test, check th	is box and stop h	i ere. Explain in Par	t VI how the organiz	zation
	meets the "facts and-circumstances"	1			-		▶, □
b	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	/					
	organization meets the "facts-and cire	cumstances" test	The organization q	ualifies as a public	cly supported orga	nızatıon	▶ <u></u>
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16a	i, 16b, 17a, or 17b	o, check this box a	nd see instructions	▶

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990 EZ) 2018 CASA OF ST. LOUIS Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support								
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1 Gifts, grants, contributions, and								
membership fees received (Do not								
include any "unusual grants ")	1,387,296.	1,811,184.	1,563,005.	2,159,553.	1,920,695.	8,841,733.		
2 Gross receipts from admissions, merchandise sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	92,405.	72,055.	88,416.	94,138,	101,556.	448,570.		
3 Gross receipts from activities that								
are not an unrelated trade or bus-					-			
4 Tax revenues levied for the organ ization'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	95,403,	95,400.	95,400.	90,000.	90,000.	466,203.		
6 Total. Add lines 1 through 5	1,575,104.	1,978,639.	1,746,821.	2,343,691.	2,112,251.	9,756,506.		
7a Amounts included on lines 1, 2, and								
3 received from disqualified persons	91,608.	229,569.	147,741.	655,391.	50,298.	1,174,607.		
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	40,597,	50,992.	64,473.	47,098.	54,190.	257,350,		
c Add lines 7a and 7b	132,205,	280 561.	212,214.	702,489.	104,488.	1,431,957.		
8 Public support. (Subtract line 7c from line 6)						8 324 549.		
Section B. Total Support			1					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
9 Amounts from line 6	1,575,104.	1,978,639.	1,746,821.	2,343,691.	2,112,251.	9,756,506.		
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,079.	1,094.	4,989.	7,235.	9,083.	25,480.		
b Unrelated business taxable income								
(less section 511 taxes) from businesses acquired after June 30, 1975				_				
c Add lines 10a and 10b	3,079.	1,094.	4,989.	7,235.	9,083.	25,480 <u>.</u>		
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12 Other income Do not include gain								
or loss from the sale of capital assets (Explain in Part VI)	1,587.	3,657.	346.	1,090.	631.	7 311.		
13 Total support (Add lines 9, 10c, 11, and 12)	1,579,770.	1,983,390.	1,752,156.	2,352,016.	2,121,965.	9,789,297.		
14 First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ix year as a section	n 501(c)(3) organiza	ation,		
check this box and stop here		 						
Section C. Computation of Publ	ic Support Per	rcentage						
15 Public support percentage for 2018 (line 8, column (f), d	ivided by line 13, o	column (f))		15	85.04 %		
16 Public support percentage from 2017	Schedule A, Part	III, line 15			16	83,99 %		
Section D. Computation of Inve	stment Income	e Percentage						
17 Investment income percentage for 20)18 (line 10c, colun	nn (f), divided by lii	ne 13, column (f))	ļ	17	.26 %		
18 Investment income percentage from					18	.30 %		
19a 33 1/3% support tests - 2018. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 1			
more than 33 1/3%, check this box a	nd stop here. The	organızatıon qualıf	ies as a publicly su	upported organiza	tion	▶ x		
b 33 1/3% support tests - 2017. If the line 18 is not more than 33 1/3%, che	=					and		
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
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Scho	edule A (Form 990 or 990-EZ) 2018 CASA OF ST. LOUIS	42 1907050		Па	
	rt IV Supporting Organizations (continued)	43-1807059			age 5
	Supporting Organizations (continued)	<u> </u>	т,	. 1	
	Healtha avacatation accounted a gift avacativity transfer any of the falleying account	Ţ	_ 	res	No
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	}		٠	
	below, the governing body of a supported organization?	11			
	A family member of a person described in (a) above?	11			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11	С		 -
Sec	tion B. Type I Supporting Organizations				
			<u> </u>	⁄es	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		- 1		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	'			ı .
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or				
	controlled the organization's activities. If the organization had more than one supported organization,		- 1		. !
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported				
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1			
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	,		Ì	
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,		_ `	,	_]
	supervised, or controlled the supporting organization	2			
Sec	tion C. Type II Supporting Organizations				
			TY	res	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		一		-110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or management of the supporting organization was vested in the same persons that controlled or managed				
	the supported organization(s)	1)
Sec	tion D. All Type III Supporting Organizations				
	ton birth type in eapporting organizations			<i>,</i>	
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	, · ·	 '	<u>res</u>	No
1					
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	ax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the				
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	+	\rightarrow	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	,			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a			ľ	
	significant voice in the organization's investment policies and in directing the use of the organization's			, i	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
	supported organizations played in this regard	3			
Sec	tion E. Type III Functionally Integrated Supporting Organizations	-1			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see	instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below				
b	The organization is the parent of each of its supported organizations. Complete line 3 below				
С	The organization supported a governmental entity. Describe in Part VI how you supported a government of	entity (see instructi	ons)_		
2	Activities Test Answer (a) and (b) below.		Υ	/es	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify				
	those supported organizations and explain how these activities directly furthered their exempt purposes,				
	how the organization was responsive to those supported organizations, and how the organization determined				
	that these activities constituted substantially all of its activities	2a	.		•
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		\top	_	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		- 1	ŀ	
	reasons for the organization's position that its supported organization(s) would have engaged in these		}		
	activities but for the organization's involvement				
ာ	•		+	\dashv	
3	Parent of Supported Organizations Answer (a) and (b) below.		•		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or				•
	trustees of each of the supported organizations? Provide details in Part VI.	3a	. 1	- 1	

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Sche	edule A (Form 990 or 990 EZ) 2018 CASA OF ST. LOUIS			43 <u>-</u> 1807059	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportir	ig Orga	anizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov 20, 1970 (explain in	Part VI) See inst	ructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete :	Sections A through E		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Curren (option	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3	4			
_5	Depreciation and depletion	5	•		
6	Portion of operating expenses paid or incurred for production or	-			
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	- ₋ 7	•		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Curren (option	
1	Aggregate fair market value of all non-exempt-use assets (see				, , ,
	instructions for short tax year or assets held for part of year)		,	,	
a	Average monthly value of securities	1a		-	
b	Average monthly cash balances	1b			
	Fair market value of other non exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other		4	•	4, ,
	factors (explain in detail in Part VI)	ı	The state of the Party commonweal	III PIII 1991 MORES PETETTI I I I I I I I I I I I I I I I I I	ក្រុមប្រការស្វារ 🖟
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3			·
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,				
	see instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 035	6	,		
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current \	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	,	,	
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	~ · · · · · · · ·		
4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
-	emergency temporary reduction (see instructions)	6	• •		
7	Check here if the current year is the organization's first as a non-functional	ىت	ated Type III supporting ord	anization (see	
	instructions)	, ,	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	, -	

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

than zero, explain in Part VI. See instructions

Part VI See instructions

and 4c

8 Breakdown of line 7

a Excess from 2014

b Excess from 2015

c Excess from 2016

d Excess from 2017

e Excess from 2018

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2019. Add lines 3]

Schedule A	(Form 990 or 990-EZ) 2018 CASA OF ST. LOUIS	43-1807059	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions.)	17a or 17b, Part III, line lines 1 and 2, Part IV, S Part V, Section B, line	12, ection C.
			
		 -	-
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			•
		-	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	CASA OF ST. LOUIS		43-1807059					
'Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lii	· · · · · · · · · · · · · · · · · · ·						
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)	-						
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds					
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No					
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only					
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	e conferring					
-	impermissible private benefit?		Yes No					
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7					
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply)						
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically important land area					
	Protection of natural habitat	Preservation of a cer	tified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a quali	ified 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					
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c					
d	Number of conservation easements included in (c) acquired	ture						
	listed in the National Register	2d						
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax					
	year ▶							
4	Number of states where property subject to conservation ea	asement is located						
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of							
	violations, and enforcement of the conservation easements	rt holds?	└── Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cor	servation easements during the year					
	>							
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year					
	▶ \$							
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170	O(h)(4)(B)(ı)					
	and section 170(h)(4)(B)(ii)?		└── Yes └── No					
9	In Part XIII, describe how the organization reports conservat	•						
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for					
_	conservation easements	(<u> </u>					
Pai	rt III Organizations Maintaining Collections o		other Similar Assets.					
	Complete if the organization answered "Yes" on Form							
1a	If the organization elected, as permitted under SFAS 116 (AS	·						
	historical treasures, or other similar assets held for public ex	chibition, education, or research in further	ance of public service, provide, in Part XIII,					
	the text of the footnote to its financial statements that descr							
b	If the organization elected, as permitted under SFAS 116 (AS							
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	iblic service, provide the following amounts					
	relating to these items							
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$					
	(II) Assets included in Form 990, Part X		▶ \$					
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide					
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items						
а	Revenue included on Form 990, Part VIII, line 1		> \$					
b	Assets included in Form 990, Part X		▶ \$					

	dule D (Form 990) 2018 CASA OF ST.							43-1807			age 2
Par	rt III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, c	r Oth	er Simil	ar Asse	ts(contir	nued)	
3	Using the organization's acquisition, accessi	on, and other recore	ds, check	k any of the	following that	t are a s	significant	use of its	collection	n item:	s
	(check all that apply)										
а	Public exhibition	(ا <u>ل</u> ا د	Loan or exc	hange progra	ms					
b	Scholarly research	•	· [Other					_ .		
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organizatio	on's exe	empt purp	ose in Par	t XIII		
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or othe	er sımıla	r assets		_		_
	to be sold to raise funds rather than to be ma	aintained as part of	the orgai	nization's co	ollection?				Yes		No
Par	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa	-	ete if the	organizatio	n answered "	Yes" or	n Form 99	0, Part IV,	line 9, or	-	-
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	s or other as	sets no	t included		_		_
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able							
									Amount	t	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	escrow or co	ustodial acco	unt liabi	ılıty?		Yes		No
b	If "Yes," explain the arrangement in Part XIII										
Pai	rt V Endowment Funds. Complete	f the organization a	nswered	"Yes" on Fo	orm 990, Part	IV, line	10				
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four	years '	back
1a	Beginning of year balance										
þ	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities			•							·
	and programs								l		
f	Administrative expenses						·				
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1	g, column (a	a)) held as				•		
а	Board designated or quasi-endowment	•	%	•							
b	Permanent endowment	%									
С	Temporarily restricted endowment										
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse		ation tha	at are held a	nd administe	red for t	the organi	zation			
	by .	-					-		[Yes	No
	(i) unrelated organizations								3a(ı)		
	(ii) related organizations								3a(II)		
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requ	red on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pai	rt VI Land, Buildings, and Equipm										
	Complete if the organization answere		0, Part IV	/, line 11a S	See Form 990	, Part X	, line 10				
-	Description of property	(a) Cost or o			or other (other)	,	ccumulat		(d) Bool	k value	
12	Land				, -,						
	Buildings		-					- -			
	•										
	Leasehold improvements	<u> </u>			154 447		120	255		24	002
	Equipment				154,447.			355.			092.
	Other	aud Form 000 Par	t Y 00/11-	nn (P) line 1	13,033		12	647.			386.
otal	I. Add lines 1a through 1e (Column (d) must e	quai Form 990, Pan	, colun	ııı (b), iine i	UC)					24	478.

Schedule D (Form 990) 2018

Complete if the organization answered "Yes" o			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost	or end of-year market value
I) Financial derivatives			
2) Closely-held equity interests			
3) Other			· · · · · · · · · · · · · · · · · · ·
(A)			· · · · · · · · · · · · · · · · · · ·
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) (Oct /h)			
otal (Col (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments - Program Related.		<u> </u>	
Complete if the organization answered "Yes" of (a) Description of investment	on Form 990, Part IV, line (b) Book value	11c See Form 990, Part X, line 13 (c) Method of valuation Cost	
(1)	(5) 500.1 74140	(c) metrica or variation door	
(1)	-v		
(0)			
(4)			
(5)			
(6)		-	
(7)			
(8)			
(9)			
otal (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			<u> </u>
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	11d See Form 990, Part X, line 15	;
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		7.74	
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line	15)		•
Part X Other Liabilities.			
Complete if the organization answered "Yes" or			line 25
(a) Description of liability		(b) Book value	•
(1) Federal income taxes			
(2)			,
(3)			
(4)			• .
(5)			•
(6)			
(7)			
(0)			
(8)			
(9)			

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

	dule D (Form 990) 2018 CASA OF ST. LOUIS			43-1807	059 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State		Revenue per R	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a		 	
1	Total revenue, gains, and other support per audited financial statements			1	2,101,733.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	اما			
a	Net unrealized gains (losses) on investments	2a	-418.	1	
b	Donated services and use of facilities	2b	94,745.	1 1	
c	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII)	2d		1 20	04 227
e	Add lines 2a through 2d Subtract line 2e from line 1			2e	94,327.
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		-		2,007,406.
ът а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	-5.305.	1	
	Add lines 4a and 4b		-5,305,	4c	-5.305.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,002,101,
	t XII Reconciliation of Expenses per Audited Financial Stat	tements With	Expenses per		
	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1	Total expenses and losses per audited financial statements			1	2,189,844.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			-	2,105,011.
a	Donated services and use of facilities	2a	94.745.		
b	Prior year adjustments	2b	21,710.	1_	
c	Other losses	2c		1	
d	Other (Describe in Part XIII)	2d	10 905.		
e	Add lines 2a through 2d	20	10,503.	2e	105,650.
3	Subtract line 2e from line 1			3	2,084,194.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				<u> </u>
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b		1	
	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	1		5	2.084.194.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any			4, Part X, I	ıne 2, Part XI,
PART	X, LINE 2:				
THE	ORGANIZATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF		.	
<u>THE</u>	INTERNAL REVENUE CODE. ACCORDINGLY, NO PROVISION FOR INCOM	E TAXES HAS			
BEEN	INCLUDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE OR	GANIZATION			
HAS_	EVALUATED ITS TAX POSITIONS EXPIRING TAX STATUTES OF LIMIT	'ATIONS,			
AUDI	TS PROPOSED SETTLEMENTS CHANGES IN TAX LAW AND NEW AUTHOR	ITATIVE			
RULI	NGS AND BELIEVES THAT NO PROVISION FOR INCOME TAXES IS NECE	SSARY, AT			
тито	TIME TO COVER ANY UNCERTAIN TAX POSITIONS. THE ORGANIZAT	Y ON 'S			
FEDE	RAL FORM 990S ARE SUBJECT TO EXAMINATION, GENERALLY FOR THR	EE YEARS			
AFTE	R THEY ARE FILED.	-11-1-1			N
					············
PART	XI LINE 4B - OTHER ADJUSTMENTS.				

832054 10-29-18

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 CASA OF ST. LOUIS		43-1807059	Page 5
Schedule D (Form 990) 2018 CASA OF ST. LOUIS Part XIII Supplemental Information (continued)			
ADDITIONAL EXPENSES NETTED AGAINST SPECIAL EVENT REVENUE	-5,305.		
		_ .	
PART XII, LINE 2D - OTHER ADJUSTMENTS		····	
BAD DEBT EXPENSE	5,600.		
ADDITIONAL EXPENSES NETTED AGAINST SPECIAL EVENT REVENUE	5,305.		
TOTAL TO SCHEDULE D. DART YEL LINE 2D	10 905		
TOTAL TO SCHEDULE D, PART XII, LINE 2D	10,703.		
			·
			

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

► Go to www.irs gov/Form990 for instructions and the latest information

OMB No 1545-0047

2018

Open to Public Inspection

-					Employer ide	ntification number			
CASA OF ST. LOUIS 43-1807059									
Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part									
e Solicita s f Solicita g Special	tion of tion of fundra	non g gover	overnment grants nment grants events			-			
Part VII) or entity in connection with p	rofess	ional f	undraising services?		Yes				
(ii) Activity	have con	ustody trol of	(Iv) Gross receipts from activity	to (c	or retained by) fundraiser	(vi) Amount paid to (or retained by) organization			
	Yes	No							

					-				
					:				
		•							
on is registered or licensed to solicit o	contrib	utions	or has been notified	l it is	exempt from re	gistration			
NA.									
, <u>.</u>									
		_							
	sed funds through any of the following sed funds through any of the following sed funds through any of the following solicitates of Solicitates or Special section or oral agreement with any individual Part VII) or entity in connection with providuals or entities (fundraisers) pursues organization (ii) Activity	sed funds through any of the following actives and funds through any of the following actives and funds and solicitation of a solicitation of g Special funds are solicitation of g Special funds and solicitation of g Special funds are constructed funds are solicitation of g Special funds are constructed funds are solicitation. (ii) Activity (iii) funds are constructed fun	sed funds through any of the following activities e Solicitation of non g s f Solicitation of gover g Special fundraising or oral agreement with any individual (including o Part VII) or entity in connection with professional fundraiser or entities (fundraisers) pursuant to agree e organization (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No	Section Complete if the organization answered "Yes" on Form 990, Part IV, it is sed funds through any of the following activities. Check all that apply e Solicitation of non government grants is solicitation of government grants g Special fundraising events. Sor or oral agreement with any individual (including officers, directors, truster VII) or entity in connection with professional fundraising services? Inviduals or entities (fundraisers) pursuant to agreements under which is erganization. Solicitation of government grants g Special fundraising events. Solicitation of government grants gr	c. Complete if the organization answered "Yes" on Form 990, Part IV, line 1 rt sed funds through any of the following activities. Check all that apply e Solicitation of non government grants s f Solicitation of government grants g Special fundraising events or oral agreement with any individual (including officers, directors, trustees) Part VII) or entity in connection with professional fundraising services? Inviduals or entities (fundraisers) pursuant to agreements under which the fundraiser have custody or control of contributions? Yes No Yes No Invited Type No Inv	Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-Ezert seed funds through any of the following activities. Check all that apply e			

Page 2

		of fundraising event contributions and gre	oss income on Form 990	EZ, lines 1 and 6b List	events with gross receip	ots greater than \$5,000	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			GALA BENEFIT	TRIVIA	NONE	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
ŭe			(overletype)	(overic type)	(total namber)		
Revenue	1	Gross receipts	227,271.	25,630.		252,901.	
	2	Less Contributions	183,521.	18,130.		201,651.	
_	3	Gross income (line 1 minus line 2)	43,750.	7,500.		51,250,	
	4	Cash prizes	-	350.			
v	5	Noncash prizes	6,000.			6,000.	
Direct Expenses	6	Rent/facility costs	32,283.	700.		32,983.	
rect E	7	Food and beverages	10,396.	175.		10,571.	
۵		Entertainment	2 000	200	-		
	8	Other direct expenses	2,000. 20,995.	200. 8 015.		2,200.	
	10			0.012.1		29,010.	
		Net income summary Subtract line 10 from li				81 114 -29 864	
Pa	rt I			990. Part IV. line 19. or	reported more than	-23,004,	
<u> </u>		\$15,000 on Form 990-EZ, line 6a			,		
Δ)			(-) D	(b) Pull tabs/instant	4.3.000	(d) Total gaming (add	
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))	
eve							
<u> </u>	1	Gross revenue					
ses	2	Cash prizes			nee -		
Direct Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					
			Yes %	Yes %	Yes %		
	6	Volunteer labor	No	No	No No		
	7	Direct expense summary Add lines 2 through	ı 5 ın column (d)		•		
	•	Not coming income sureman. College 1. 7	from line 4 ==1 ···· = 1.15		k		
	Ö	Net gaming income summary Subtract line 7	nom line 1, column (d)		<u></u>	<u> </u>	
o.	Ent	er the state(s) in which the organization condu	icts damind activities				
		he organization licensed to conduct gaming ac	<u> </u>	etatos?		Yes No	
		No," explain		States		1es No	
~						· · · · · · · · · · · · · · · · · · ·	
						· · · · · · · · · · · · · · · · · · ·	
		re any of the organization's gaming licenses re			year [?]	Yes No	
b	If "\	f "Yes," explain					
		· · · · · · · · · · · · · · · · · · ·					

Sch	nedule G (Form 990 or 990 EZ) 2018 CASA OF ST. LOUIS	43-1807059	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	s No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	s 🔲 No
13	Indicate the percentage of gaming activity conducted in		
	The organization's facility	_{13a}	%
	o An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and reco		
1-4	The the hame and address of the person who prepares the organization's gaming/special events books and reco	105	
	Name		Yes No
	Address ▶		-
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount of gaming revenue received by the organization in the second s	ount	
	of gaming revenue retained by the third party > \$		
c	: If "Yes," enter name and address of the third party		
	Name		
	Address >		
16	Gaming manager information		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
47	Manufakan dakih kana		
	Mandatory distributions		
а	s Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?		No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the	
<u> </u>	organization's own exempt activities during the tax year > \$		
Ŗа	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v)	, and Part III, lines	9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions		
.			
			

Schedule G (Form 990 or 990-EZ) CASA OF ST. LOUIS Part IV Supplemental Information (continued)	43-1807059	Page 4
Part IV Supplemental Information (continued)		
	-	
•		
No.		
	•	
· · · · · · · · · · · · · · · · · · ·		
		·
	•	

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2018

Open to Public Inspection

Name of the organization **Employer identification number** 43-1807059 CASA OF ST. LOUIS FORM 990 PART VI SECTION A LINE 4: ON JULY 15, 2019, THE ORGANIZATION, FORMERLY KNOWN AS VOICES FOR CHILDREN FILED ARTICLES OF AMENDMENT FOR A NONPROFIT CORPORATION WITH THE MISSOURI SECRETARY OF STATE. THE AMENDED ARTICLES OF INCORPORATION REFLECT THE CHANGE IN NAME OF THE ORGANIZATION TO CASA OF ST. LOUIS EFFECTIVE JULY 17 2019. THIS CHANGE WAS EFFECTIVE AFTER THE YEAR END COVERED BY THIS FORM 990 HOWEVER, IT IS EFFECTIVE DURING THE TIME IN WHICH THE RETURN WILL BE FILED, AS SUCH, THE ORGANIZATION IS FILING THIS FORM 990 UNDER THE NEW CURRENT LEGAL NAME AND IS ATTACHING ALL NECESSARY DOCUMENTATION TO SUPPORT THE CHANGE, FORM 990 PART VI SECTION A LINE 8B: NO COMMITTEES OF THE ORGANIZATION HAVE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY FORM 990 PART VI SECTION B LINE 11B: A DRAFT COPY OF FORM 990 IS REVIEWED BY THE BOARD FINANCE COMMITTEE, PROPOSED CHANGES. IF ANY. ARE DISCUSSED AND INCORPORATED INTO FORM 990. THE RETURN IS THEN MADE AVAILABLE TO THE FULL BOARD OF DIRECTORS PRIOR TO SUBMISSION TO IRS. FORM 990 PART VI SECTION B. LINE 12C: THE ORGANIZATION HAS INCORPORATED A PROCESS INTO ITS GOVERNING BODY POLICIES AND PROCEDURES TO PROVIDE FOR ANNUAL DISCLOSURE OF CONFLICTS AND ASSIST THE ORGANIZATION IN MONITORING AND ENFORCING THE CONFLICT OF

Name of the organization	Employer identification number
CASA OF ST. LOUIS	43-1807059
FORM 990 PART VI SECTION B. LINE 15A:	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE PROCESS FOR DETERMINING COMPENSATION FOR THE EXECUTIVE DIRECTOR	
INCLUDED A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, UPON	
RECOMMENDATIONS BY THE SEARCH COMMITTEE, THE BOARD OF DIRECTORS APPROVED	<u> </u>
THE COMPENSATION PACKAGE.	
THE OPCANIZATION DODG NOT HAVE ANY OTHER COMPENSATED OPPICEDS OF THE	
THE ORGANIZATION DOES NOT HAVE ANY OTHER COMPENSATED OFFICERS OR KEY	
EMPLOYEES.	
FORM 990 PART VI, SECTION C, LINE 19:	
REQUESTS FOR THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST	
POLICY AND FINANCIAL STATEMENTS WILL BE HANDLED ON A CASE BY CASE BASIS.	
FORM 990 PART XI, LINE 9 CHANGES IN NET ASSETS:	
BAD DEBT EXPENSE -5,600,	
FORM 990, PART XI, LINE 2C:	
THE ORGANIZATION HAS A FINANCE COMMITTEE WHICH IS RESPONSIBLE FOR	
OVERSEEING THE AUDIT OF THE ORGANIZATION AND THE SELECTION OF THE	
INDEPENDENT ACCOUNTANT, THESE PROCESSES HAVE NOT CHANGED FROM THE	
PRIOR YEAR.	
FATOR IBAN.	,
	· · · · · · · · · · · · · · · · · · ·



State of Missouri

John R. Ashcroft, Secretary of State

Corporations Division PO Box 778 / 600 W. Main St., Rm. 322 Jefferson City, MO 65102

N00058306 Date Filed: 7/17/2019 John R. Ashcroft Missouri Secretary of State

Corp. 53A (01/2017)

Articles of Amendment for a Nonprofit Corporation

(Submit with filing fee of \$10.00)

The undersigned corporation, for nent:	or the purpose of amending its	s articles of incorporation, her	eby executes the following articles of amend		
. The name of corporation is:	Voices for Children		N00058306		
	Name		Charter Number		
2. The amendment was adopte	d on 6/12/19 month/day/year	and changed article(s)	1 to state as follows		
	poration shall be CAS				
I. If approval of members was porators, check here and ski		nent(s) was approved by a sui	fficient vote of the board of directors or incor		
I. If approval by members was	s required, check here and pr	ovide the following informat	ion:		
A. Number of memberships	•	•			
B. Complete either C or D: C. Number of votes for and	against the amendments(s) b	ıv class was:			
	_				
Class 1	lumber entitled to vote	Number voting for	Number voting against		
					
 -			and the second s		
D. Number of undiamated as	oten and for the smood-sout/	s) was sufficient for approval	and was:		
D. Number of undisputed ve	nes cast for the amendments	s) was sufficient for approval	, aid was.		
Class:	lumber Voting undisputed:				
 -	·				
					
The number of votes cast in	favor of the amendment(s) b	by each class was sufficient f	or approval by that class.		
	ent(s) by some person(s) other ere to indicate that approval		rd or the incorporators was required pursuan		
to section 333.000, check in	ere to midicate that approvar	was obtained.			
	(F	lease see next page)			
Name and address to return f	iled document:	(DRI-07192019-0466 State of Missouri No of Pages 2 Pages		
Name: Stephen E. Moerge	n	,			
Address: 105 S. Central A					
City, State, and Zip Code: C			Amend/Restate - Non-Profit		

In Affirmation thereof, the facts stated above are true and correct:
(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Corp. 53A (01/2017)

STATE OF MISSOUR



John R. Ashcroft Secretary of State

CERTIFICATE OF AMENDMENT

WHEREAS,

CASA of St. Louis N00058306

Formerly,

Voices for Children

a corporation organized under The Missouri Nonprofit Corporation Law has delivered to me Articles of Amendment of its Articles of Incorporation and has in all respects complied with the requirements of law governing the Amendment of Articles of Incorporation under The Missouri Nonprofit Corporation Law, and that the Articles of Incorporation of said corporation are amended in accordance therewith

IN TESTIMONY WHEREOF, I hercunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri Done at the City of Jefferson, this 17th day of July, 2019



