

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning **JUL 1, 2007** and ending **JUN 30, 2008**

B Check if applicable: <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Casa Pacifica Centers for Children and Families		D Employer identification number 77-0195022
		Number and street (or P.O. box if mail is not delivered to street address) 1722 South Lewis Road		E Telephone number (805) 445-7800
		City or town, state or country, and ZIP + 4 Camarillo, CA 93012		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates **N/A**

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: **www.casapacifica.org**

J Organization type (check only one) 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number **N/A**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **21,422,445.**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue					
1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	1,882,633.		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d			
e	Total (add lines 1a through 1d) (cash \$ 1,702,064. noncash \$ 180,569.)	1e	1,882,633.		
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	19,119,537.		
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
5	Dividends and interest from securities	5	43,955.		
6 a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a	6c			
7	Other investment income (describe)	7			
8 a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less: cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c			
8d		8d			
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ 408,925. of contributions reported on line 1b)	9a	374,266.		
b	Less: direct expenses other than fundraising expenses	9b	374,266.		
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c	See Statement 1	0.	
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
11	Other revenue (from Part VII, line 103)	11	2,054.		
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	21,048,179.		
Expenses					
13	Program services (from line 44, column (B))	13	18,707,910.		
14	Management and general (from line 44, column (C))	14	1,749,257.		
15	Fundraising (from line 44, column (D))	15	300,251.		
16	Payments to affiliates (attach schedule)	16			
17	Total expenses. Add lines 16 and 44, column (A)	17	20,757,418.		
Net Assets					
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	290,761.		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	9,677,977.		
20	Other changes in net assets or fund balances (attach explanation)	20	See Statement 2		
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	9,701,069.		

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization Casa Pacifica Centers for Children and Families	Employer identification number 77-0195022
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1722 South Lewis Road	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Camarillo, CA 93012	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ Casa Pacifica Centers for Children and Families
Telephone No. ▶ (805) 445-7800 FAX No. ▶ (805) 987-7237
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box ▶ . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until February 15, 2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or

▶ tax year beginning JUL 1, 2007, and ending JUN 30, 2008

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

ENDORSED
FILED

In the office of the Secretary of State
of the State of California

NOV 6 1992

MARCH FONG EU, Secretary of State

CERTIFICATE OF AMENDMENT OF THE ARTICLES OF INCORPORATION
OF THE YOUTH CONNECTION OF VENTURA COUNTY

HELEN CALDWELL and CAROLYN HUNTSINGER certify that:

1. They are the president and the secretary, respectively of THE Youth Connection of Ventura County, a California nonprofit corporation.

2. The following amendment to the articles of incorporation has been approved by the board of directors:

Article II PURPOSES is amended to read in its entirety as follows: "This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Public Benefit Corporation Law for public and charitable purposes. The public and charitable purposes of the corporation are to meet the unmet needs of the high risk youth in Ventura County by identifying and developing resources which compliment public sector programs, and to raise and expend funds for the construction of a new home for high risk youth in Ventura County and activities related thereto, including but not limited to operating comprehensive service programs to ensure the safety, security, physical, psychological and social well-being of the high risk youth and their families.

3. The corporation as no members.

VERIFICATION

Each of the undersigned declares under penalty of perjury that the statements contained in the foregoing certificate are true and correct of her own knowledge, and that this declaration was executed on November 4, 1992, at Camarillo, California.

Helen Caldwell
HELEN CALDWELL, President

Carolyn Huntsinger
CAROLYN HUNTSINGER, Secretary

ORIGINAL

A0674260

RECEIVED
MAR 19 2008
CEO

FILED
In the office of the Secretary of State
of the State of California

FEB 19 2008

1607688

CERTIFICATE OF AMENDMENT OF ARTICLES OF INCORPORATION

The undersigned certify that:

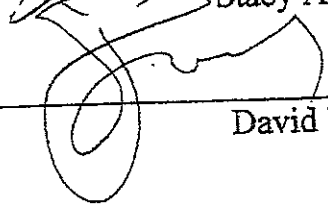
1. They are the president and secretary, respectively, of the Youth Connection of Ventura County, a California corporation.
2. ARTICLE I NAME, of the Articles of Incorporation of this Corporation is amended to read as follows:
CASA PACIFICA CENTERS FOR CHILDREN AND FAMILIES
3. This amendment was approved by the Board of Directors on January 9, 2008.
4. The corporation has no members.

We further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of our own knowledge.

DATE: January 30, 2008



 Stacy A. Roscoe, President



 David E. Wood, Secretary

**Casa Pacifica Centers for Children
and Families**

Form 990 (2007)

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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			Statement 4	
22b Other grants and allocations (attach schedule) (cash \$ 2,321 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	2,321.	2,321.		
23 Specific assistance to individuals (attach schedule) Statement 5	23	512,190.	512,190.		
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	253,764.	224,023.	25,275.	4,466.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	12,782,099.	11,490,501.	1,128,143.	163,455.
27 Pension plan contributions not included on lines 25a, b, and c	27	207,901.	180,099.	18,567.	9,235.
28 Employee benefits not included on lines 25a - 27	28	1,421,259.	1,231,196.	126,929.	63,134.
29 Payroll taxes	29	1,028,980.	932,382.	81,897.	14,701.
30 Professional fundraising fees	30				
31 Accounting fees	31	60,650.		60,650.	
32 Legal fees	32	8,476.		8,476.	
33 Supplies	33	293,271.	259,256.	27,569.	6,446.
34 Telephone	34	176,969.	162,317.	11,984.	2,668.
35 Postage and shipping	35	14,769.	1,794.	11,248.	1,727.
36 Occupancy	36	885,053.	851,831.	31,959.	1,263.
37 Equipment rental and maintenance	37	111,673.	110,644.	845.	184.
38 Printing and publications	38	39,661.	17,087.	5,979.	16,595.
39 Travel	39	299,670.	286,992.	12,093.	585.
40 Conferences, conventions, and meetings	40	124,085.	123,656.	83.	346.
41 Interest	41	98,974.	30,951.	68,023.	
42 Depreciation, depletion, etc. (attach schedule)	42	651,136.	646,541.	4,595.	
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g See Statement 3	43g	1,784,517.	1,644,129.	124,942.	15,446.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	20,757,418.	18,707,910.	1,749,257.	300,251.

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A; (ii) the amount allocated to Program services \$ N/A; (iii) the amount allocated to Management and general \$ N/A; and (iv) the amount allocated to Fundraising \$ N/A

**Casa Pacifica Centers for Children
and Families**

Form 990 (2007)

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Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶
To provide help and hope to abused and neglected children.

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

a See Statement 6

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

18,707,910.

b

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

c

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

d

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

e Other program services (attach schedule)
(Grants and allocations \$) If this amount includes foreign grants, check here ▶

f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶

18,707,910.
Form **990** (2007)

Casa Pacifica Centers for Children
and Families

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Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45	Cash - non-interest-bearing	186,293.	45	416,047.
	46	Savings and temporary cash investments	226,399.	46	220,217.
	47 a	Accounts receivable	4,162,561.		
		47a			
	b	Less: allowance for doubtful accounts	430,244.	47c	3,732,317.
		47b			
	48 a	Pledges receivable		48c	
		48a			
	b	Less: allowance for doubtful accounts		48b	
		48b			
	49	Grants receivable		49	
	50 a	Receivables from current and former officers, directors, trustees, and key employees		50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a	Other notes and loans receivable		51c	
		51a			
	b	Less: allowance for doubtful accounts		51b	
		51b			
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	230,423.	53	311,961.
54 a	Investments - publicly-traded securities Stmt 11 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	131,611.	54a	78,365.	
b	Investments - other securities Stmt 10 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	738,870.	54b	817,098.	
55 a	Investments - land, buildings, and equipment: basis	10,500.			
	55a				
b	Less: accumulated depreciation	10,500.	55c	10,500.	
	55b				
56	Investments - other		56		
57 a	Land, buildings, and equipment: basis	13,711,923.			
	57a				
b	Less: accumulated depreciation Stmt 7	6,446,935.	57c	7,264,988.	
	57b				
58	Other assets, including program-related investments (describe ▶ See Statement 8)	152,235.	58	286,325.	
59	Total assets (must equal line 74). Add lines 45 through 58	13,068,009.	59	13,137,818.	
Liabilities	60	Accounts payable and accrued expenses	2,338,626.	60	2,566,967.
	61	Grants payable		61	
	62	Deferred revenue	50,825.	62	17,845.
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
	b	Mortgages and other notes payable Stmt 9	350,581.	64b	251,937.
	65	Other liabilities (describe ▶ Line of credit)	650,000.	65	600,000.
	66	Total liabilities. Add lines 60 through 65	3,390,032.	66	3,436,749.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	8,732,885.	67	8,595,132.
	68	Temporarily restricted	165,096.	68	339,141.
	69	Permanently restricted	779,996.	69	766,796.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	9,677,977.	73	9,701,069.
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	13,068,009.	74	13,137,818.

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**Casa Pacifica Centers for Children
and Families**

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Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		82b	118,659.
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
83 b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
84 b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A
85 b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
85 c	Dues, assessments, and similar amounts from members	85c	N/A
85 d	Section 162(e) lobbying and political expenditures	85d	N/A
85 e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
85 f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
85 g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
85 h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
86 b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
87 b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
88 b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0.		
89 b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
89 c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶	0.
89 d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	▶	0.
89 e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
89 f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
89 g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed ▶ <u>CA</u>		
90 b	Number of employees employed in the pay period that includes March 12, 2007	90b	346
91 a	The books are in care of ▶ <u>Casa Pacifica Centers for Children</u> Telephone no. ▶ <u>(805) 445-7800</u> Located at ▶ <u>1722 S. Lewis Road, Camarillo, CA</u> ZIP + 4 ▶ <u>93012</u>		
91 b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	X
If "Yes," enter the name of the foreign country ▶ <u>N/A</u>			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

**Casa Pacifica Centers for Children
and Families**

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Part VI Other Information (continued)

Yes No

- c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c
 If "Yes," enter the name of the foreign country N/A
- 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a Meal Tickets					683.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					19,118,854.
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	43,955.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a Miscellaneous income			01	2,054.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))			0.	46,009.	19,119,537.
105 Total (add line 104, columns (B), (D), and (E))					19,165,546.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	All program fees and government revenues are received as a result of services performed in the process of carrying out the organization's primary tax exempt purpose as stated in Part III.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Form 990 (2007)

Casa Pacifica Centers for Children
and Families

Form 990 (2007)

77-0195022 Page 9

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a					
b					
c					
Totals					

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a					
b					
c					
Totals					

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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

Please Sign Here: Signature of officer: *[Signature]* Date: 12/16/08
CLIENT'S COPY
 Felice Ginsberg, Chief Financial Officer
 Type or print name and title

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: 12/16/08 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. X):
 Firm's name (or yours if self-employed), address, and ZIP + 4: Huntington Group, CPAs, LLP
 2670 Mission Street, Suite 200
 San Marino, CA 91108
 EIN: 95-4557617
 Phone no.: (626) 403-6801

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No. 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization **Casa Pacifica Centers for Children and Families** Employer identification number **77 0195022**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Myra Saltoun 1722 S. Lewis Road, Camarillo, CA 930	Clinical Director 40.00	135,077.	18,835.	0.
Vicki Murphy 1722 S. Lewis Road, Camarillo, CA 930	Dir.-Fund Dev./Opns. 40.00	106,013.	11,723.	0.
Leslie Singer 1722 S. Lewis Road, Camarillo, CA 930	Asst. Clinical Dir. 40.00	93,773.	5,009.	0.
Jody Kussin 1722 S. Lewis Road, Camarillo, CA 930	Community Serv. Dir. 40.00	93,962.	9,326.	0.
Donna Amerson 1722 S. Lewis Road, Camarillo, CA 930	Asst. Res. Serv. Dir 40.00	89,781.	7,003.	0.
Total number of other employees paid over \$50,000	▶ 51			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Ronald Pollack, M.D. 1722 S. Lewis Road, Camarillo, CA 93012	Psychiatrist	68,500.
Sabira Saiffudin, M.D. 1722 S. Lewis Road, Camarillo, CA 93012	Psychiatrist	56,937.
Green, Hasson & Janks, LLP 10990 Wilshire Blvd., Los Angeles, CA 90024	Accounting Services	54,150.
Total number of others receiving over \$50,000 for professional services	▶ 0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Atticus 100 E. Thousand Oaks Blvd., #231, Thousand Oaks,	Computer Consultants	110,835.
Total number of other contractors receiving over \$50,000 for other services	▶ 0	

Casa Pacifica Centers for Children

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Statement 13	X	
e	Transfer of any part of its income or assets?		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) See Statement 14	X	
b	Did the organization have a section 403(b) annuity plan for its employees?		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966? N/A		
c	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
d	Enter the total number of donor advised funds owned at the end of the tax year	N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	0.	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					▶

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Casa Pacifica Centers for Children

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,623,183.	1,475,562.	1,422,294.	2,258,072.	6,779,111.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	15,290,315.	15,281,879.	13,029,762.	8,524,131.	52,126,087.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	30,430.	35,849.	44,247.	12,268.	122,794.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	4,149.	3,838.	See Statement 15 10,330.	4,375.	22,692.
23 Total of lines 15 through 22	16,948,077.	16,797,128.	14,506,633.	10,798,846.	59,050,684.
24 Line 23 minus line 17	1,657,762.	1,515,249.	1,476,871.	2,274,715.	6,924,597.
25 Enter 1% of line 23	169,481.	167,971.	145,066.	107,988.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 138,492.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 61,508.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 6,924,597.
d Add: Amounts from column (e) for lines: 18 122,794. 19 _____ 22 22,692. 26b 61,508.					26d 206,994.
e Public support (line 26c minus line 26d total)					26e 6,717,603.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 97.0107%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)			27f N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15. None					

Casa Pacifica Centers for Children

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Casa Pacifica Centers for Children

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Schedule B

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

Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization

Casa Pacifica Centers for Children
and Families

Employer identification number

77-0195022

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)**General Rule-** For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)**Special Rules-** For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$ _____**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).LHA For Paperwork Reduction Act Notice, see the Instructions
for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Name of organization
**Casa Pacifica Centers for Children
 and Families**

Employer identification number

77-0195022

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Mr. & Mrs. Herb Hyman 535 Via Con Dios Camarillo, CA 93010-8456	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	Weingart Foundation 1055 West Seventh Street Los Angeles, CA 90017-2555	\$ 183,555.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	Wood-Claeyssens Foundation P.O. Box 30586 Santa Barbara, CA 93130-0586	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Form 990	Special Events and Activities				Statement	1
Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income or (Loss)	
Golf Tournament	87,441.	87,657.	-216.	-216.	0.	
Fashion Show	135,660.	57,178.	78,482.	78,482.	0.	
Wine and Food Festival	283,840.	105,961.	177,879.	177,879.	0.	
Angels Ball	245,158.	161,043.	84,115.	84,115.	0.	
Other Special Events	31,092.	-2,914.	34,006.	34,006.	0.	
To Fm 990, Part I, line 9	783,191.	408,925.	374,266.	374,266.	0.	

Form 990	Other Changes in Net Assets or Fund Balances	Statement	2
Description	Amount		
Unrealized loss on investment	-2,408.		
Prior-year mental health contract adjustment	-265,261.		
Total to Form 990, Part I, line 20	-267,669.		

Form 990	Other Expenses			Statement	3
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising	
Outside services	639,343.	632,731.	6,612.		
Miscellaneous	18,644.	855.	12,935.	4,854.	
Uncollectible expense	350,000.	350,000.			
Consultants	263,697.	251,012.	6,738.	5,947.	
Insurance	198,481.	187,549.	9,234.	1,698.	
Child-related expenses	40.			40.	
Staff development	157,289.	86,032.	70,987.	270.	
Small equipment	56,791.	43,041.	11,522.	2,228.	
Program expenses	56,657.	56,657.			
Licenses and fees	43,575.	36,252.	6,914.	409.	
Total to Fm 990, ln 43	1,784,517.	1,644,129.	124,942.	15,446.	

Form 990	Cash Grants and Allocations to Others	Statement 4
----------	--	-------------

<u>Class of Activity/Donee's Name and Address</u>	<u>Amount</u>
Scholar A 1722 S. Lewis Road Camarillo, CA 93012	800.
Scholar B 1722 S. Lewis Road Camarillo, CA 93012	1,021.
Scholar C 1722 S. Lewis Road Camarillo, CA 93012	500.
Total Included on Form 990, Part II, line 22b	2,321.

Form 990	Specific Assistance to Individuals	Statement 5
----------	------------------------------------	-------------

<u>Description</u>	<u>Amount</u>
Food	399,007.
Child-related expenses	113,183.
Total to Form 990, Part II, line 23	512,190.

Description of Program Service One

The Youth Connection of Ventura County d.b.a. Casa Pacifica was conceived as a state of the art residential trauma care and treatment center designed to provide comprehensive assessment, treatment, medical, and education services in the context of 24-hour care to meet the needs of Ventura County's most vulnerable children. The public/private collaboration that resulted opened in 1994 and remains unique in the state and perhaps the country. During the year ending June 30, 2008, Casa Pacifica changed its name to Casa Pacifica Centers for Children and Families.

In 2000, Casa Pacifica extended its services off-campus and into the Ventura County community through an intensive, behavioral service intended to be an ancillary, last effort intervention delivered in their homes for children in jeopardy of being removed. In 2003, at the request of Santa Barbara County, Casa Pacifica began providing this same Therapeutic Behavioral Service (TBS) to that community as well. In the last four years, Casa Pacifica's community-based programs in both counties now include TBS, a comprehensive Wraparound program with motto whatever it takes to keep families together, and a mobile intensive response crisis unit for psychiatric emergencies involving children and youth. All of these services are directed at children and families in the most challenging times and places of their lives and are designed to prevent out-of-home placement and help families over the barriers to them staying together.

Throughout Casa Pacifica's 12 year history more than 4,158 abused, neglected and emotionally disturbed children-ages 0 to 18 and their families have been helped. On any given day Casa Pacifica works with over 1,143 of the Tri-Counties highest risk children, 300 of them on-campus in residential treatment, emergency shelter care, or day school, and more than 520 in the Santa Barbara and Ventura County communities.

Casa Pacifica is licensed and certified by California's Departments of Social Services, Mental Health, Education, and Health Services and its programs and services are accredited by the National Council on Accreditation (COA)

and the nonpublic special education school carries certification of the Western Association of Schools and Colleges (WASC). Casa Pacifica is active in national, state, interagency and community organizations, collaborative, task forces, and work groups. A sampling of Casa Pacifica's involvement, often in leadership positions includes the American Association of children's residential centers, California Alliance of Child and Family Services, California Council of Community Mental Health Agencies, California Mental Health Coalition, Santa Barbara Children's Project Program Committee, and The Ventura County Children, Families, and Community Commission.

Casa Pacifica provides residential services, an emergency shelter, day treatment, and a non-public school on site. Casa Pacifica's trained professionals, along with county partners, plan to "wrap" services around these children and their families in an effort to stop the cycle and heal the pain of abuse and neglect, and we are the exclusive provider of therapeutic behavioral services in Ventura and Santa Barbara Counties.

Casa Pacifica receives funding from county and state agencies with portions of their funding originating from the federal government. Casa Pacifica also receives funding from private sources.

Casa Pacifica's board of directors is actively engaged in developing strategic direction, overseeing the operations of the organization, and providing a leadership role in supporting the agency financially. In addition, Casa Pacifica has developed an advisory board in both Ventura and Santa Barbara Counties. Casa Pacifica boasts more than 400 auxiliary members, 30 on-campus volunteers, and its annual giving campaign has averaged over \$1 million per year throughout our 12 year history.

	<u>Grants</u>	<u>Expenses</u>
To Form 990, Part III, line a		<u>18,707,910.</u>

Form 990 Depreciation of Assets Not Held for Investment Statement 7

Description	Cost or Other Basis	Accumulated Depreciation	Book Value
Property and Equipment	13,711,923.	6,446,935.	7,264,988.
Total to Form 990, Part IV, ln 57	13,711,923.	6,446,935.	7,264,988.

Form 990 Other Assets Statement 8

Description	Beginning of Year	End of Year
Other receivables	82,250.	178,500.
Deposits	69,985.	107,825.
Total to Form 990, Part IV, line 58	152,235.	286,325.

Form 990 Other Notes and Loans Payable Statement 9

<u>Lender's Name</u>	<u>Terms of Repayment</u>
California Health Facilities Financing Authority	Monthly principal and interest payments of \$8,984

<u>Date of Note</u>	<u>Maturity Date</u>	<u>Original Loan Amount</u>	<u>Interest Rate</u>
12/10/06	01/31/11	500,000.	3.00%

<u>Security Provided by Borrower</u>	<u>Purpose of Loan</u>
The note secured by revenues and equipment.	To refurbish boiler, parking lot, and cottage.

Relationship of Lender

Unrelated.

<u>Description of Consideration</u>	<u>FMV of Consideration</u>	<u>Balance Due</u>
	0.	251,937.
Total included on Form 990, Part IV, line 64, Column B		251,937.

Form 990 Other Securities Statement 10

<u>Security Description</u>	<u>Cost/FMV</u>	<u>Other Securities</u>
Money funds	FMV	7,585.
Equities	FMV	536,015.
Pooled investments	FMV	132,593.
Money market funds	FMV	140,905.
To Form 990, line 54b, Col B		817,098.

Form 990	Non-Government Securities			Statement	11
Security Description	Cost/FMV	Corporate Stocks	Corporate Bonds	Other Publicly Traded Securities	Total Non-Gov't Securities
Corporate Bonds	FMV		78,365.		78,365.
To Form 990, line 54a, Col B			78,365.		78,365.

Form 990	Part V-A - List of Current Officers, Directors, Trustees and Key Employees	Statement	12
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Name and Address	Title and Avrg Hrs/Wk	Compensation	Employee Ben Plan Contrib	Expense Account
Steven E. Elson 1722 South Lewis Road Camarillo, CA 93012	Chief Executive Officer 40.00	165,214.	43,470.	0.
Felice Ginsberg 1722 South Lewis Road Camarillo, CA 93012	Chief Financial Officer 40.00	88,550.	13,274.	0.
Stacy A. Roscoe 1722 South Lewis Road Camarillo, CA 93012	President 5.00	0.	0.	0.
Sheila Rakestraw 1722 South Lewis Road Camarillo, CA 93012	Vice President 5.00	0.	0.	0.
Richard H. Goodrich 1722 South Lewis Road Camarillo, CA 93012	Treasurer 5.00	0.	0.	0.
David Wood, Esq. 1722 South Lewis Road Camarillo, CA 93012	Secretary 5.00	0.	0.	0.
Richard Rush, Ph.D. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.

Edward Summers 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Marla Vasquez 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Dave Wallace 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Joseph Hadden 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Susan Herrick 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Petra Lowe 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Terry O'Neal 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Michael D. Bradbury 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
John S. Broome, Jr. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Michael W. Case, Esq. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
John A. Cliff, DMD 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Charles W. Cohen, Esq. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Geoff Dean 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.

Carole Echt 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Rebecca Elliott 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Barbara Fitzgerald 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Gary Gorian 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.
Steven M. Greenwood, Esq. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.	0.	0.

Totals Included on Form 990, Part V-A

253,764.	56,744.	0.
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Schedule A

Explanation of Transactions
Part III, Line 2d

Statement 13

Please see Form 990, Part V-A and Schedule A, Part I, for details on compensation of officers, directors, trustees, and key employees.

Schedule A Explanation of Qualifications to Receive Payments Statement 14
Part III, Line 3a

Recipients are selected by a committee from applications submitted by former residents of Casa Pacifica's programs.

Schedule A Other Income Statement 15

Description	2006 Amount	2005 Amount	2004 Amount	2003 Amount
Miscellaneous income	4,149.	3,838.	10,330.	4,375.
Total to Schedule A, line 22	4,149.	3,838.	10,330.	4,375.

2007

California Exempt Organization Annual Information Return

199

For calendar year 2007 or fiscal year beginning month: <u>July</u> day: <u>1</u> year: <u>2007</u>	, and ending month: <u>June</u> day: <u>30</u> year: <u>2008</u>
IMPORTANT: Your number is required.	
California corporation number A425050	Federal employer identification number (FEIN) 77-0195022
Corporation/Organization name Casa Pacifica Centers for Children and Families	
Address (including suite, room, or PMB no.) 1722 South Lewis Road City: _____ State: _____ ZIP Code: Camarillo, CA 93012	
A Final return? Check applicable box. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No • <input type="checkbox"/> Dissolved <input type="checkbox"/> Withdrawn <input type="checkbox"/> Merged/Reorganized (attach explanation) If a box is checked, enter date: _____	
B Check forms filed this year. State: <input type="checkbox"/> 109 <input type="checkbox"/> 100 <input type="checkbox"/> 100S <input type="checkbox"/> 100W Federal: <input checked="" type="checkbox"/> 990 <input type="checkbox"/> 990EZ <input type="checkbox"/> 990T <input type="checkbox"/> 990PF <input type="checkbox"/> 1041 <input type="checkbox"/> 1120H <input type="checkbox"/> 1120	
C If organization is exempt under R&TC Section 23701d and is a school, public charity, religious organization, or is controlled by a religious operation, check box. See General Instruction F. No filing fee is required. <input checked="" type="checkbox"/>	
D Is this a group filing? See General Instruction N <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
E Accounting method used Accrual	
F Type of organization <input checked="" type="checkbox"/> Exempt under Section 23701 d (insert letter) <input type="checkbox"/> IRC Section 4947(a)(1) trust	

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues (Enclose, but do not staple, any payment.)	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	19,539,812.00
	2	Gross dues and assessments from members and affiliates	00
	3	Gross contributions, gifts, grants, and similar amounts received. See instructions Stmt 1	1,882,633.00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction C	21,422,445.00
	5	Cost of goods sold	00
	6	Cost or other basis, and sales expenses of assets sold	00
	7	Total costs. Add line 5 and line 6	00
	8	Total gross income. Subtract line 7 from line 4	21,422,445.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	21,131,684.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	290,761.00
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F	N/A 00
	12	Penalty for failure to file on time. See General Instruction L	00
	13	Use tax. See "General Instruction M"	00
	14	Balance due. Add line 11, line 12, and line 13	00

- 15 If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations Yes No
- 16 Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents Yes No
- 17 Is the organization exempt under R&TC Section 23701g? Yes No
 If "Yes," enter amount of gross receipts from nonmember sources \$ _____
- 18 Did the organization file Form 100, Form 100S, Form 100W, or Form 109 to report taxable income? Yes No
 If "Yes," enter amount of total income reported \$ _____
- 19 The financial records are in care of Casa Pacifica Centers for Childr Daytime telephone (805) 445-7800
 located at 1722 S. Lewis Road, Camarillo, CA 93012

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	Signature of officer: _____ Date: _____	Title: Chief Financial Of	Daytime telephone: _____
Paid Preparer's Use Only	Paid Preparer's signature:	Date: <u>12/14/08</u>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours, if self-employed) and address: Harrington Group, CPAs, LLP 2670 Mission Street, Suite 200 San Marino, CA 91108	FEIN: 95-4557617	Daytime telephone: (626) 403-6801

Casa Pacifica Centers for Children and Families

77-0195022

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information. See Specific Line Instructions.

728951/12-14-07

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	1	374,266.00
	2	Interest	2	00
	3	Dividends	3	43,955.00
	4	Gross rents	4	00
	5	Gross royalties	5	00
	6	Gross amount received from sale of assets	6	00
	7	Other income See Statement 2	7	19,121,591.00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	19,539,812.00
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid	9	2,321.00
	10	Disbursements to or for members	10	00
	11	Compensation of officers, directors, and trustees See Statement 3	11	253,764.00
	12	Other salaries and wages	12	12,782,099.00
	13	Interest	13	98,974.00
	14	Taxes	14	1,028,980.00
	15	Rents	15	996,726.00
	16	Depreciation and depletion	16	651,136.00
	17	Other See Statement 4	17	5,317,684.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	21,131,684.00

Schedule L Balance Sheets		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		412,692.		636,264.
2	Net accounts receivable		3,884,198.		3,732,317.
3	Net notes receivable				
4	Inventories				
5	Federal and state government obligations				
6	Investments in other bonds Stmt 5				78,365.
7	Investments in stock				
8	Mortgage loans (number of loans _____)				
9	Other investments Stmt 6		870,481.		817,098.
10	a Depreciable assets	13,309,100.		13,711,923.	
	b Less accumulated depreciation	(5,801,620.)	7,507,480.	(6,446,935.)	7,264,988.
11	Land		10,500.		10,500.
12	Other assets Stmt 7		382,658.		598,286.
13	Total assets		13,068,009.		13,137,818.
Liabilities and net worth					
14	Accounts payable		2,338,626.		2,566,967.
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable Stmt 8		350,581.		251,937.
17	Mortgages payable				
18	Other liabilities Stmt 9		700,825.		617,845.
19	Capital stock or principle fund				
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund		9,677,977.		9,701,069.
22	Total liabilities and net worth		13,068,009.		13,137,818.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

1	Net income per books	290,761.	7	Income recorded on books this year not included in this return	
2	Federal income tax		8	Deductions in this return not charged against book income this year	
3	Excess of capital losses over capital gains		9	Total. Add line 7 and line 8	
4	Income not recorded on books this year		10	Net income per return.	
5	Expenses recorded on books this year not deducted in this return			Subtract line 9 from line 6	290,761.
6	Total.				
	Add line 1 through line 5	290,761.			

Form 199	Cash Contributions of \$5000 or More Included on Part I, Line 3	Statement 1
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Contributor's Name	Contributor's Address	Date of Gift	Amount
Mr. & Mrs. Herb Hyman	535 Via Con Dios Camarillo, CA 93010-8456		100,000.
Weingart Foundation	1055 West Seventh Street Los Angeles, CA 90017-2555		183,555.
Wood-Claeyssens Foundation	P.O. Box 30586 Santa Barbara, CA 93130-0586		250,000.
Total Included on Line 3			<u>533,555.</u>

Form 199	Other Income	Statement 2
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Description	Amount
Miscellaneous income	2,054.
Meal Tickets	683.
Fees and contracts from government agencies	19,118,854.
Total to Form 199, Part II, line 7	<u>19,121,591.</u>

Form 199 Compensation of Officers, Directors and Trustees Statement 3

Name and Address	Title and Average Hrs Worked/Wk	Compensation
Steven E. Elson 1722 South Lewis Road Camarillo, CA 93012	Chief Executive Officer 40.00	165,214.
Felice Ginsberg 1722 South Lewis Road Camarillo, CA 93012	Chief Financial Officer 40.00	88,550.
Stacy A. Roscoe 1722 South Lewis Road Camarillo, CA 93012	President 5.00	0.
Sheila Rakestraw 1722 South Lewis Road Camarillo, CA 93012	Vice President 5.00	0.
Richard H. Goodrich 1722 South Lewis Road Camarillo, CA 93012	Treasurer 5.00	0.
David Wood, Esq. 1722 South Lewis Road Camarillo, CA 93012	Secretary 5.00	0.
Richard Rush, Ph.D. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Edward Summers 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Marla Vasquez 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Dave Wallace 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Joseph Hadden 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.

Susan Herrick 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Petra Lowe 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Terry O'Neal 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Michael D. Bradbury 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
John S. Broome, Jr. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Michael W. Case, Esq. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
John A. Cliff, DMD 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Charles W. Cohen, Esq. 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Geoff Dean 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Carole Echt 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Rebecca Elliott 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Barbara Fitzgerald 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.
Gary Gorian 1722 South Lewis Road Camarillo, CA 93012	Board member 5.00	0.

Steven M. Greenwood, Esq.
 1722 South Lewis Road
 Camarillo, CA 93012

Board member
 5.00

0.

Total to Form 199, Part II, line 11

253,764.

Form 199	Other Expenses	Statement	4
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Description	Amount
Outside services	639,343.
Miscellaneous	18,644.
Uncollectible expense	350,000.
Consultants	263,697.
Insurance	198,481.
Child-related expenses	40.
Staff development	157,289.
Small equipment	56,791.
Program expenses	56,657.
Licenses and fees	43,575.
Direct expenses of fundraising events	374,266.
Specific assistance to individuals	512,190.
Pension plan contributions	207,901.
Other employee benefits	1,421,259.
Accounting fees	60,650.
Legal fees	8,476.
Supplies	293,271.
Telephone	176,969.
Postage and shipping	14,769.
Printing and publications	39,661.
Travel	299,670.
Conferences, conventions and meetings	124,085.
Total to Form 199, Part II, line 17	5,317,684.

Form 199	Investments in Other Bonds	Statement	5
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Description	Beg. of Year	End of Year
Corporate Bonds	0.	78,365.
Total to Form 199, Schedule L, line 6	0.	78,365.

Form 199	Other Investments	Statement	6
<u>Description</u>		<u>Beg. of Year</u>	<u>End of Year</u>
Money funds		56,696.	7,585.
Equities		433,209.	536,015.
Pooled investments		131,080.	132,593.
Money market funds		117,885.	140,905.
Government securities		131,611.	0.
Total to Form 199, Schedule L, line 9		<u>870,481.</u>	<u>817,098.</u>

Form 199	Other Assets	Statement	7
<u>Description</u>		<u>Beg. of Year</u>	<u>End of Year</u>
Prepaid Expenses and Deferred Charges		230,423.	311,961.
Other receivables		82,250.	178,500.
Deposits		69,985.	107,825.
Total to Form 199, Schedule L, line 12		<u>382,658.</u>	<u>598,286.</u>

Form 199	Bonds and Notes Payable	Statement	8
<u>Description</u>		<u>Beg. of Year</u>	<u>End of Year</u>
California Health Facilities Financing Authority		350,581.	251,937.
Total to Form 199, Schedule L, line 16		<u>350,581.</u>	<u>251,937.</u>

Form 199	Other Liabilities	Statement	9
<u>Description</u>		<u>Beg. of Year</u>	<u>End of Year</u>
Line of credit		650,000.	600,000.
Deferred Revenue		50,825.	17,845.
Total to Form 199, Schedule L, line 18		<u>700,825.</u>	<u>617,845.</u>

Form 199	Fund Balances	Statement 10
Description	Beg. of Year	End of Year
Unrestricted Assets	8,732,885.	8,595,132.
Temporarily Restricted Assets	165,096.	339,141.
Permanently Restricted Assets	779,996.	766,796.
Total to Form 199, Schedule L, line 21	9,677,977.	9,701,069.

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W.

Form 199

FEIN 77-0195022

Corporation name Casa Pacifica Centers for Children and Families	California corporation number A425050
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Part I Election To Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California	1	\$25,000
2 Total cost of Section 179 property placed in service	2	
3 Threshold cost of Section 179 property before reduction in limitation	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property (elected Section 179 cost)	7	
8 Total elected cost of Section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from prior years	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation Method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14 11 Property and Equipment	Various	13,711,923.	5,795,799.		.000	651,136.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h)						15	651,136.

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), or Depreciation (if no election is made), enter the amount from line 15, column (g)	16	651,136.
17 Total depreciation claimed for federal purposes from federal Form 4562 or Form 4562-FY, line 22	17	651,136.
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	0.

Part IV Amortization

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year	
19							
20 Total. Add the amounts in column (g)						20	
21 Total amortization claimed for federal purposes from federal Form 4562 or Form 4562-FY, line 44						21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12						22	