8879-EO	for	-file Signature Aut an Exempt Organ	nization	F	OMB No. 1545-1878
		ar beginning OCT 1 , 2018,		2019	0040
		o not send to the IRS. Keep for			2018
epartment of the Treasury ternal Revenue Service		ww.irs.gov/Form8879EO for the			
ame of exempt organization				Employer id	entification number
HILDREN'S LAW	V CENTER, INC.			52-19	61588
ame and title of officer			The second second		
UDITH SANDALO					
XECUTIVE DIRE	SCTOR				
Part I Type of F	Return and Return Info	ormation (Whole Dollars Only	<pre>/)</pre>		
n line 1a, 2a, 3a, 4a, or 5a	a, below, and the amount on	is Form 8879-EO and enter the a that line for the return being filed you entered -0- on the return, the	d with this form was blan	k, then leave lin	e 1b, 2b, 3b, 4b, or 5b,
Form 990 check here	► X b Total rever	nue, if any (Form 990, Part VIII, co	olumn (A) line 12)	1h	11,214,663.
a Form 990-EZ check he		evenue, if any (Form 990-EZ, line			
a Form 1120-POL check		tal tax (Form 1120-POL, line 22)			
a Form 990-PF check he		sed on investment income (For			
a Form 8868 check here		ue (Form 8868, line 3c)			12
Part II Declarat	tion and Signature Au	thorization of Officer			
a) an acknowledgement on the date of any refund. If a ebit) entry to the financia eturn, and the financial in	of receipt or reason for reject applicable, I authorize the U.S al institution account indicate istitution to debit the entry to	e return originator (ERO) to send to ion of the transmission, (b) the re S. Treasury and its designated Fin d in the tax preparation software this account. To revoke a payme	eason for any delay in pro nancial Agent to initiate a for payment of the organ ent. I must contact the U.	n electronic fun nization's federa S. Treasury Fin	turn or refund, and (c) ads withdrawal (direct at taxes owed on this ancial Agent at
a) an acknowledgement c ne date of any refund. If a lebit) entry to the financia eturn, and the financial in -888-353-4537 no later th roccessing of the electron ayment. I have selected	of receipt or reason for reject applicable, I authorize the U.S al institution account indicate istitution to debit the entry to an 2 business days prior to the nic payment of taxes to receive	ion of the transmission, (b) the re S. Treasury and its designated Fir d in the tax preparation software this account. To revoke a payme the payment (settlement) date. I a ve confidential information necess ober (PIN) as my signature for the	eason for any delay in pro nancial Agent to initiate a for payment of the orgar ent, I must contact the U. Ilso authorize the financia sarv to answer inquiries a	ocessing the ret in electronic fun nization's federa S. Treasury Fin al institutions in and resolve issu	urn or refund, and (c) ids withdrawal (direct al taxes owed on this ancial Agent at volved in the es related to the
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Form **990** 

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax** 

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

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.



AF	or the	2018 calendar year, or tax year beginning OCT 1, 2018 and er	nding S	EP 30, 2019									
B c a	heck if oplicable:	C Name of organization		D Employer identifie	cation number								
	Address CHILDREN'S LAW CENTER, INC.												
	Name change	Doing business as		52-1	961588								
	Initial return Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number												
	Final 501 3RD ST NW, 8TH FLOOR 202-467-4900												
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	12,435,043.								
	Amende return	WASHINGION, DC 20001		H(a) Is this a group re									
	Applica tion pending	F Name and address of principal officer. O OD I III SAMDADOW		for subordinates	? Yes 🔀 No								
		SAME AS C ABOVE		H(b) Are all subordinates in									
		mpt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or	527		list. (see instructions)								
		www.CHILDRENSLAWCENTER.ORG	1	H(c) Group exemption									
		organization: X Corporation Trust Association Other  Summary	<b>L</b> Year o	of formation: 1996	State of legal domicile: DC								
FC		Briefly describe the organization's mission or most significant activities: CHILDI	DENIG										
e	1 E	GIVE EVERY CHILD IN THE DISTRICT OF COLUMB	ATA A	SOLID FOIND	ATTON OF								
Activities & Governance		Check this box if the organization discontinued its operations or disposed											
veri				3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	19								
Ő		Number of independent voting members of the governing body (Part VI, line 1a)			19								
ళ		Total number of individuals employed in calendar year 2018 (Part V, line 2a)			108								
itie		Total number of volunteers (estimate if necessary)			600								
ctiv	7 a T	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.								
Ă		Net unrelated business taxable income from Form 990-T, line 38			0.								
				Prior Year	Current Year								
đ	8 (	Contributions and grants (Part VIII, line 1h)		2,890,164.	5,417,002.								
'nué	<b>9</b> F	Program service revenue (Part VIII, line 2g)		7,139,218.	5,772,953.								
Revenue	<b>10</b> li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		28,591.	58,324.								
œ	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-28,058.	-33,616.								
	<b>12</b> T	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,029,915.	11,214,663.								
	13 0	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.								
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.								
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $\dots$		7,926,490.	6,999,310.								
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	·····	66,750.	73,890.								
ď		Total fundraising expenses (Part IX, column (D), line 25) ►627,310		0 400 200	0 126 005								
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,402,399.	2,136,005.								
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,395,639.	9,209,205.								
<u>ب</u> در		Revenue less expenses. Subtract line 18 from line 12		-365,724.	2,005,458.								
ts or inces				ginning of Current Year	End of Year 10,102,885.								
Assets Balanc		Total assets (Part X, line 16)		8,337,089. 2,584,768.	2,396,301								
let A		Total liabilities (Part X, line 26)		5,752,321.	7,706,584.								
Pa		Net assets or fund balances. Subtract line 21 from line 20		5,154,541.	1,100,304.								

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

Sign Here	Signature of officer         JUDITH SANDALOW, EXECUTION         Type or print name and title	TIVE DIRECTOR		Date	
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid	KAY THIES, CPA			self-employed	P01404047
Preparer	Firm's name 🕨 RUBINO & COMPANY	, CHARTERED		Firm's EIN ▶ 5	2-1186096
Use Only	Firm's address 🖕 6903 ROCKLEDGE D	RIVE, SUITE 300			
	BETHESDA, MD 208	17-1818		Phone no. 301-	564-3636
May the IF	RS discuss this return with the preparer shown abo	ve? (see instructions)			X Yes No
832001 12-3	1-18 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.			Form <b>990</b> (2018)
S	EE SCHEDULE O FOR ORGANIZ	ATION MISSION STATEME	ENT CO	NTINUATIO	N

	990 (2018) CHILDREN'S LAW CENTER, INC. 52-1961588 Page t III Statement of Program Service Accomplishments	ge <b>2</b>
Га		X
1		<u> </u>
	Briefly describe the organization's mission: CHILDREN'S LAW CENTER WORKS TO GIVE EVERY CHILD IN THE DISTRICT OF	
	COLUMBIA A SOLID FOUNDATION OF FAMILY, HEALTH, AND EDUCATION. WITH	
	NEARLY 100 PEOPLE ON STAFF, WE ARE THE LARGEST PROVIDER OF FREE LEGAL	
	SERVICES IN THE DISTRICT, AND THE ONLY TO FOCUS ON CHILDREN. WE HELP	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$4,873,630. including grants of \$) (Revenue \$5,085,444 GUARDIAN AD LITEM PROGRAM - CLC'S ATTORNEYS ARE APPOINTED BY JUDGES	• )
	WITHIN THE DC SUPERIOR COURT TO BE THE VOICE FOR DC'S ABUSED AND	
	NEGLECTED CHILDREN. CLC FIGHTS SO THAT EVERY CHILD THEY MEET IN THE	
	CHILD WELFARE SYSTEM HAS A SAFE, LOVING HOME. CLC DOESN'T STOP THERE;	
	CLC ALSO ADVOCATES WITH JUDGES, SOCIAL WORKERS, SCHOOLS, AND MEDICAL	
	PROFESSIONALS TO MEET EACH CHILD'S PHYSICAL, EMOTIONAL, AND EDUCATIONAL	
	NEEDS TO HELP THEM RECOVER FROM TRAUMA AND PUT THEM ON A BRIGHTER PATH.	
4b	(Code:) (Expenses \$1,564,260. including grants of \$) (Revenue \$18,000	• )
	HEALTHY TOGETHER - ALL PARENTS WANT THEIR CHILDREN TO BE HEALTHY.	
	SOMETIMES, POOR HEALTH CANNOT BE SOLVED BY MEDICINE ALONE BUT REQUIRES	
	LEGAL ADVOCACY TO FIX UNSAFE HOUSING OR SECURE THE APPROPRIATE CARE A	
	CHILD NEEDS. CLC PARTNERS WITH CHILDREN'S NATIONAL, MARY'S CENTER AND	
	UNITY HEALTH CARE TO PUT CLC'S LAWYERS SIDE-BY-SIDE WITH PEDIATRICIANS	
	IN HEALTH CLINICS ACROSS THE DISTRICT - WHERE THEY FIND AND FIX THE	
	ROOT CAUSES OF CHILDREN'S POOR HEALTH. CLC ALSO FIGHTS SO CHILDREN CAN GET THE MENTAL HEALTH CARE THEY NEED TO RECOVER FROM TRAUMA.	
	GET THE MENTAL HEALTH CARE THET NEED TO RECOVER FROM TRAOMA.	
4c	(Code:) (Expenses \$745,722. including grants of \$) (Revenue \$356,898	• )
	PRO BONO - ALTHOUGH CHILDREN'S LAW CENTER IS THE LARGEST CIVIL LEGAL	
	SERVICES PROVIDER IN DC, MANY MORE CHILDREN COME TO US THAN OUR STAFF	
	ATTORNEYS CAN REPRESENT. OUR PRO BONO TEAM PLACES CHILDREN, PARENTS AND	)
	CAREGIVERS IN NEED OF LEGAL SERVICES WITH MORE THAN 500 PRO BONO	
	ATTORNEYS EVERY YEAR. PRO BONO LAWYERS FIND SUCCESS WITH OUR CASES	
	REGARDLESS OF EXPERIENCE BECAUSE OF OUR COMPREHENSIVE INTAKES AND OUR	
	COMMITMENT TO HIGH-QUALITY TRAINING AND MENTORING. THE PRO BONO TEAM	
	ALSO INCLUDES A TEAM OF LAWYERS WHO HELP CHILDREN CAUGHT IN BITTER	
	PARENTAL DISPUTES, SHIELDING THEM FROM CONFLICT AND HELPING FAMILIES	
	AGREE ON A PLAN TO SUPPORT THEIR CHILDREN'S WELL-BEING. AND, WHEN	
	PARENTS CAN NO LONGER SAFELY CARE FOR THEIR CHILDREN, CLC HELPS	
	GRANDPARENTS AND OTHER CARING ADULTS WHO STEP UP TO GIVE THEM A HOME,	
4d		
_	(Expenses \$ 689,288. including grants of \$ ) (Revenue \$ 330,611.)         Total program service expenses ▶ 7,872,900.	
4e	Total program service expenses ► 7,872,900.	010
83200	SEE SCHEDULE O FOR CONTINUATION(S)	.510)

	990 (2018) CHILDREN'S LAW CENTER, INC. 52-1962	588	Р	age <b>3</b>
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	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		х	
F	during the tax year? If "Yes," complete Schedule C, Part II	4	А	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		x
6	similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
U	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? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
-	Schedule D. Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		<u> </u>
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	77	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	Х	
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	10		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	1	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		- 23
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	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? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X

Form	990 (2018) CHILDREN'S LAW CENTER, INC. 52-1961 t IV Checklist of Required Schedules (continued)	588	P	<sub>age</sub> 4
I ai	Checklist of Required Schedules (continued)		Vee	
00			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00		x
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	
04-	Schedule J	23	- 12	
248	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	04-		x
<b>L</b>	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04		
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			37
	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	┝───
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		┝───
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	L
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 17	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2018)

52-1	961588	Page 5
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Part V         Statements Regarding Other IRS Filings and Tax Compliance (continued)         Ves         No           2a         Enter the number of employees reported on Fram W-3, Transmittal of Wage and Tax Statements, 2         10.8         10.8           5         If a least one is reported on line 2a, diff the organization file all required forder amployment tax returns?         2b         X           4a         Date organization have urelated baseness gross income of \$1,000 or more during the year?         2a         2a         X           4a         Date organization have urelated baseness gross income of \$1,000 or more during the year?         2a         X           4a         At any time during the calendar year, did the organization have an interact in or a signature or other subority over, a financial account?         4a         X           5a         Tixes: enter the name of the foreign country?         5a         X         5a         X           5a         Tixes: a loss of bd, did the organization have an ita sature transaction at any time during the tay ear?         5a         X           5a         Tixes: a loss of bd, did the organization have an itage as party to a prohibited tax shale contributions?         5a         X           5a         Tixes: a loss of bd, did the organization include with every solicitation an express tatement that such contributions or any taxito have annual gross receipts that are normaly greater than \$100,000, and did the organization have th	Form	990 (2018) CHILDREN'S LAW CENTER, INC. 52-1961	588	Р	age <b>5</b>					
ga         Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements.         108         2a         108           b         If at least one is reported on line 2a, did the organization file all explored fideal amployment tax returns?         2b         X           Note. If the sum of line 2a, did the organization file all explored fideal amployment tax returns?         2a         X           D         The Yas, 'Institution tay enclosed business groups income of 51.000 or more during the value of the support of the support of more during the value of the support of the support of more during the value of the support support of the support of the	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)								
test for the calendar year ending with or within the year covered by this return     2a     108       bit at least one is reported on the 2a, did the carganization fie all required federal employment tax returns?     2b     2a       3a     Did the carganization have unrequired to <i>c</i> <sub>1</sub> /lip (see instructions)     2a     3a       3a     Did the carganization have unrequired to <i>c</i> <sub>1</sub> /lip (see instructions)     2a     3a       3b     If "Yes," this it flied a Form 190-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.     3a       3b     If "Yes," this it flied a Form 190-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.     4a       3c     If "Yes," enter the name of the foreign country. If was or is a party to a prohibited tax schedur.     5a       3c     If "Yes," enter the name of the foreign country. If was or is a party to a prohibited tax schedur.     5a       3c     If "Yes," enter the organization that are normally greater than \$100,000, and did the organization solicit any contributions are party to a prohibited tax schedure that such contributions or gifs were not tax deductible.     5a       3c     If "Yes," field the organization that are normally greater than \$100,000, and did the organization solicit any contributions are partern to access of \$75 rade party as a contribution are party for prodix ant such are party of the was required to the payo?     5a       3c     If "Yes," indid the organization that was required to access provided?     5a       3c     If "Yes," indid the				Yes	No					
b       If a least one is monitored on line 2a, did the organization file all required to <i>a</i> - <i>did</i> (we instructions)       3a       X         3a       Dot the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         3b       Thes, 'that it filed a form 900-Tror this year? If No' to line 3b, provide an explanation on Schedule O       3a       X         3b       If 'Yes,' that it filed a form 900-Tror this year? If No' to line 3b, provide an explanation or other studently over, a financial accountly accounts (sector), content during the calendary year, dith organization have annual prose to a part to a prohibited tax whether than asmoot the organization have annual prose monitors at any time during the tax year?       5a       X         b       If 'Yes,' the file 5a or 5b, did the organization the form 8806.7°.       5a       X         cold any taxable party notify the organization the form 8806.7°.       5a       X         cold any taxable party notify the organization the form 8806.7°.       5a       X         cold any taxable party notify the organization the form 8806.7°.       5a       X         cold any taxable party notify the organization have annual gross monitor that such contributions?       5a       X         di       I'Yes,' tid the organization network advibule as ontifution of quark such that such contributions?       7a       X         di       I'Yes,' tid the organization neave as advibule tax sheller transaction?	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
Note. If the sum of thes 1a and 2a is greater than 250, you may be required to <i>e-sis</i> (see instructions)         Image: second sec		filed for the calendar year ending with or within the year covered by this return 2a 108								
a Did the organization have unrelated business gross income of \$1,000 or more during the yea?       3a       X         b If Yes, "Institution for the isyse?" (Yes 16 tinks 30, provide an explanation in Schedule 0       3a       X         d A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account is count is sourced to the organization in Schedule 0       3a       X         b If Yes, "inter the name of the foreign country; source and the tary time during the tax yea?       5a       X         b U any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         d If Yes," ind the organization include with every solicitation an express statement that such contributions or gifts were not tax discutibles calentable contributions?       5a       X         d If Yes," idd the organization include with every solicitation an express statement that such contributions or gifts were not tax discutibles calentable contributions?       6a       X         d If Yes," idd the organization include with every solicitation an express tatement that such contributions or gifts were not tax discutibles calentable contributions?       6a       X         d If Yes," idd the organization notift the down of the value of the good or services provided?       7a       X       7a       X         d If Yes," idd the organization notift the down of the value of the good or services provide?       7a       X       7a       X <th>b</th> <th>If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</th> <th>2b</th> <th>Х</th> <th></th>	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
b       If Yes, 'has it filed a Form 990-T for his year? // 'No' to line 3b, provide an explanation in Schedule 0       3b         4       At any time during the calendar year, did the organization have an inferest in, or a signature or other authority over, a financial accounts / Celendar Schedule 0       4a         b       I'''es,' reate the name of the foreign country: Schedule as beak account; scuritles account; or other financial accounts (FBAR).       5a         5a       Was the organization have main of the foreign country: Schedule 0.       5a         5a       Was the organization ap any to a prohibited tax shelter transaction?       5a         5a       Dod any taxable party notify the organization that two or is a party to a prohibited tax shelter transaction?       5a         6a       Dod any taxable party notify the organization have every solicitation an express statement that such contributions or gits were not tax deductible as chantable contributions?       5a         7       Organization netwo approximation networks approximation nethome approximation networks approximation networks app		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
4a At any time during the calendary pair, did the organization have an Interest II, or a signature or other funncial account/9 cever, a funncial account is a foring country (>).       4a       X         b       If "Yes," enter the name of the foreign country. >>       See instructions for finiting requirements for FinCEH Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       See instructions for finiting requirements for FinCEH Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       See X         b       Uld any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       See X       X         cli If "ves" to bine Sa or Sb, di dhe organization file Form 88B-17?       See X       See X       X         cli If "ves", 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       See X       X         D       Organization active a spiment in excess of 575 made party as a contribution and party for goods and services provided to the party X       K       X         D       If "Yes," idicate the number of Forms 8282 filed during the year       Zd       Zd       X         D       D dth e organization oxity, decode a contribution or ganization file parts any function, directly or indirectly, on parsonal benefit contract?       Ye       X         d       If "Yes," indicate the number of Forms 8282 filed during the year?       Ye       X       Zd       Ye       X	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
4a At any time during the calendary pair, did the organization have an Interest II, or a signature or other funncial account/9 cever, a funncial account is a foring country (>).       4a       X         b       If "Yes," enter the name of the foreign country. >>       See instructions for finiting requirements for FinCEH Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       See instructions for finiting requirements for FinCEH Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       See X         b       Uld any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       See X       X         cli If "ves" to bine Sa or Sb, di dhe organization file Form 88B-17?       See X       See X       X         cli If "ves", 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       See X       X         D       Organization active a spiment in excess of 575 made party as a contribution and party for goods and services provided to the party X       K       X         D       If "Yes," idicate the number of Forms 8282 filed during the year       Zd       Zd       X         D       D dth e organization oxity, decode a contribution or ganization file parts any function, directly or indirectly, on parsonal benefit contract?       Ye       X         d       If "Yes," indicate the number of Forms 8282 filed during the year?       Ye       X       Zd       Ye       X	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b. provide an explanation in Schedule O	3b							
b       If 'Yes,' enter the name of the foreign country, 'P         See instructions for filing equirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),       5a         See instructions for filing equirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),       5a         See instructions for filing equirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),       5a       X         b       If 'Yes' to is possible to a prohibited tax shelter transaction?       5c       X         cline in the Sar of S, di the organization file form 88857?       5c       5c       X         cline in the sar of S, di the organization include with every solicitation an express statement that such contributions or gifs were not tax deductible acharable contributions and ere to solicit any contribution stat may crecke deductible contributions and erest to solicit any contribution shat may receive deductible contribution and partly to goods and services provided to the paralitation testew a payment in excess of 57 made parity as a contribution of goods and services provided to the parity of the organization notify the doors of the value of the goods or services provided to the parity of the organization notify the doors core the value of the organization networks any funds, directly or indirectly, on pay premiums on a personal benefit contract?       7c       X         d       If 'Yes, 'indicate the number of Forms 8282 filed during the year?       7a										
See instructions for ling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a Dest the organization near the organization file Form 8286-17       5a       X         5a Dest the organization near nunal gross erecipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normal and party for gross and services provided to the pary?         7 <th></th> <th>financial account in a foreign country (such as a bank account, securities account, or other financial account)?</th> <th>4a</th> <th></th> <th>X</th>		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
5a     Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?     5a     X       b     Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?     5a     X       6a     Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chartable contributions?     5a     X       b     If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions and party for goods and services provided to the part?     7a     X       c     Did the organization notify the doors of the value of the goods or services provided to the part?     7a     X       c     Did the organization notify the doors of the value of the goods or services provided to the part?     7a     X       c     Did the organization notify the doors and services provided?     7a     X       c     Did the organization notify the doors and services provided?     7a     X       c     Did the organization receive an outflow doors     7a     X       d     Did the organization, during the year, any premiums, directly or indirectly, on a personal benefit contract?     7t     X       f     Did the organization makes any taxable distributions on a personal benefit contract?     7t     X       f     Did the organizat	b	If "Yes," enter the name of the foreign country:								
b       Did any taxable party notify the organization that it was or is a party to a prohibited fax shelter transaction?       5b       X         c       If "Yes" to line 6a or 5b, did the organization file Form 8886-17       5c       5c         d       Does the organization have annual gross excepts that are normally greater than \$100,000, and did the organization solicit any contributions include with every solicitation an express statement that such contributions or gifts       6a       X         b       If "Yes," to did the organization include with every solicitation an express statement that such contributions or gifts       6b       7c         7 Organization subat may receive deductible contributions under section 170(c).       7c       X       7c         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7c       X         c       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         f       Did the organization received a contribution of qualified funds to pay premiums on a personal benefit contract?       7c       X         f       If the organization received a contribution of cars, boats, application, advised fund maintained by the sponsoring organization meave ease buickings and time during the yea?       7d       1d         g       If the organization meave way thad, directly or indirectly, to pay premiums directly or advised fund maintaintene by the		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       50       X         cit 17-wes to line 6a or 50, did the organization file Form 888-T7       5c       5c       5c         Ga       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions 1070(c).       6a       X         a       Did the organization neity were wisolicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).       7a       X         a       Did the organization neity the donor of the value of the goods or services provided?       7a       X         b       Dif Yes, ' did the organization and, exchang, or otherwise dispose of tangible personal property for which it was required to file form 8282?       7a       X         d       Dif the organization neity may permiums, directly or indirectly, to pay permiums on a personal benefit contract?       7c       X         f       Did the organization neity may permiums, directly or indirectly, on a personal benefit contract?       7r       X         f       Did the organization make any taxable distributions under section 4966?       9a       9a       9a         gonsoring organization make any taxable distributions under section 4966?	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
Ga       Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       Ga       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).       Bo       Bo         a       Did the organization exchange, or cherwise dispose of tangible personal property for which it was required to file Form 8282?       Ta       X         b       If "Yes," idid the organization and exchange, or cherwise dispose of tangible personal property for which it was required to file Form 8282?       Ta       X         c       Did the organization netive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Te       X         f       Did the organization neceive any funds, directly or indirectly, on a personal benefit contract?       Td       X         f       If the organization neceive any funds, directly ories, boats, airplanes, or other vehicles, did the organization file Form 8393 as required?       Th       X         f       If the organization neceive any funds, directly ories, boats, airplanes, or other vehicles, did the organization file Form 8393 as required?       Th       X         f       If die horganization neceive any funds, directly ories, boats, airplanes, or other vehicles, did the organization file Form 8393 as required?       Th       S	b		5b		Х					
Ga       Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       Ga       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).       Bo       Bo         a       Did the organization exchange, or cherwise dispose of tangible personal property for which it was required to file Form 8282?       Ta       X         b       If "Yes," idid the organization and exchange, or cherwise dispose of tangible personal property for which it was required to file Form 8282?       Ta       X         c       Did the organization netive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Te       X         f       Did the organization neceive any funds, directly or indirectly, on a personal benefit contract?       Td       X         f       If the organization neceive any funds, directly ories, boats, airplanes, or other vehicles, did the organization file Form 8393 as required?       Th       X         f       If the organization neceive any funds, directly ories, boats, airplanes, or other vehicles, did the organization file Form 8393 as required?       Th       X         f       If die horganization neceive any funds, directly ories, boats, airplanes, or other vehicles, did the organization file Form 8393 as required?       Th       S	с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
b       fr "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       66         7       Organizations that may receive deductible contributions under section 170(c).       66         a       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b       fr "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82822?       7c       X         c       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8298 as required?       7h       X         f       If the organization neceive ta contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8298 as required?       7h       X         f       If the organization have excess business holdings at any time during the year?       7g       X         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b	-									
were not tax deductible?     60       7     Organizations that may receive deductible contributions under section 170(c).     7a     X       7     Organization receive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor?     7a     X       7     Did the organization networks dispose of tangible personal property for which it was required to file Form 8282?     7c     X       7     Did the organization networks dispose of tangible personal property for which it was required to file Form 8282?     7c     X       7     Did the organization networks dispose of tangible personal property for which it was required to file Form 8282?     7d     X       7     Did the organization networks dispose of tangible personal property for which it was required?     7d     X       7     Did the organization networks dispose of tangible personal property for which it was required?     7d     X       7     Did the organization networks dispose of tangible property, did the organization factored a contribution of casi-basts, angrinanes, or other vehicles, did the organization factored a contribution of casi-basts, angrinanes, or other vehicles, did the organization factored a contribution of casi-basts, angrinanes, or other vehicles, did the organization factored a contribution of casi-basts, angrinanes, or other vehicles, did the organization factored a contribution of casi-basts, angrinanes, or other vehicles, did the organization factored a contribution of casi-basts, angrinanes, or other vehicles, did the organization factored a contribution of casi-basts, angrinanes, angrina		any contributions that were not tax deductible as charitable contributions?	6a		X					
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a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       X       7f       X         f Did the organization received a contribution of qualified intellectual property for which it was required?       7f       X       X         f If the organization received a contribution of cars, boats, aliptanes, or other vehicles, did the organization file Form 8899 as required?       7g       X       X         g If the organization received a contribution of cars, boats, aliptanes, or other vehicles, did the organization file a Form 1098-C7       7h       X         g Sponsoring organization maintaining door advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 49667       9a		were not tax deductible?	6b							
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X         d       If the organization, during the year, pay premiums, or a personal benefit contract?       7f       X         f       Did the organization, during the year, pay premiums, directly or indirectly or not previous, or a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7h       X         8       Sponsoring organization maintaining door advised funds.       9a       9b       9a       9b         9       Sponsoring organization make a distributions under section 4966?       9a       9b       9a       9b       9a       9b       <	7	Organizations that may receive deductible contributions under section 170(c).								
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       Td       Yd       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       Td       X       Yd       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       Td       X       Yd       X         f       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1089 CP       7h       X         g       Sponsoring organizations maintaining door advised funds.       Did a donor advised funds.       9a       9a       9a       9a       9a       9b       9a       9b       9a       9b       9a       9b	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a							
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d         Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7t       X         g If the organization receive a contribution of qualified intellectual property, did the organization file a Form 1096-C?       7d       7d       X         g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1096-C?       7n       X         Sponsoring organizations maintaining donor advised funds.       Did the sponsoring organization make any taxable distributions under section 4966?       8       9         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         10 dit the sponsoring organizations. Enter:       10a       10b       9b       9b         11 Section 501(c)(7) organizations. Enter:       10a       10b       10b       10b         12 Section 501(c)(2) organizations. Enter:       10a       10b       10b       10b       10b       10b         13 Section 501(c)(12) organizations. Enter:       11b       12a       10b       12a       10b       10c	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х						
d       If "Yes," indicate the number of Forms 8282 filed during the year       Td       Td         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Te       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 8099 as required?       Tf       X         g       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       X         Sponsoring organization maintaining donor advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9b         9       Sponsoring organization make any taxable distributions on divisor, or related person?       9b       9b         10       Section 501(c)(7) organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9b         10       Exection 501(c)(12) organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund maintained by the file organization file a form 900, Part VIII, line 12.       10a       10a         11       Section 501(c)(21) organization fund maintain by the sources against amounts due o	с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7d       X         8       Sponsoring organizations maintaining door advised funds.       Did a form received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?       7h       X         9       Sponsoring organizations maintaining door advised funds.       8       9       9a       9b       9a       9a       9a       9b       9a       9b       9a       9b       9a       9b       9a       9b       9a       9b       9b       9b       9b       9a       9b       9a       9b       9b       9b       9a       9b       9b <t< th=""><th></th><th>to file Form 8282?</th><th>7c</th><th></th><th>X</th></t<>		to file Form 8282?	7c		X					
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 8899 as required?       7g       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       7         8       Sponsoring organizations maintaining door advised funds. Did a donor advised funds.       8       8         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b         10       bid the sponsoring organizations. Enter:       10a       10a       9b         11       Section 501(c)(7) organizations. Enter:       10b       10b       11a       10b         11       Section 501(c)(12) organizations. Enter:       10b       11a       10b       12a         12       Gross income from members or shareholders       11a       10b       12a       12a         13       Section 501(c)(12) organization. Enter:       11b       12a       12a       12a         14       Section 501(c)(2) organization meta amounts due or paid to other sources against       11a       12a       12a       12a       12a         15	d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
g       If the organization received a contribution of qualified intellectual properly, did the organization file Form 8899 as required?       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9a       9a         0       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9b         9       Did the sponsoring organizations. Enter:       10a       10a       9b       9b         11       Section 501(c)(7) organizations. Enter:       10a       10b       11a       12a         12       Gross income from members or shareholders       11a       12a	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.       8         9       Sponsoring organizations maintaining donor advised funds.       8         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organizations maintaining donor advised funds.       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross income from members or shareholders       10b         a       Gross income from members or shareholders       11a         b       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.)       12a         12a       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         13a       Interest the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?       8         9       Sponsoring organization make any taxable distributions under section 4966?       9a         10       the sponsoring organization make a distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a       10a         11       Section 501(c)(12) organizations. Enter:       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       11b         12       Gross income from members or shareholders       11a       10b         13       Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         14       M* (Yes," enter the amount of tax-exempt tharitable frusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         15       Is the organization is licensed to issue qualified health plans in more than one state?       13a         1	g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>					
sponsoring organization have excess business holdings at any time during the year? 8   9 Sponsoring organizations maintaining donor advised funds.   a Did the sponsoring organization make any taxable distributions under section 4966?   b Did the sponsoring organizations. Enter:   a Initiation fees and capital contributions included on Part VIII, line 12   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   11 Section 501(c)(7) organizations. Enter:   a Gross income from members or shareholders   b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   12a Section 501(c)(2) qualified nonprofit health insurance issuers.   13 Section 501(c)(2) qualified nonprofit health insurance issuers.   a Is the organization is capilified health plans in more than one state?   Note. See the instructions for additional information the organization must report on Schedule O.   b Enter the amount of reserves on hand   14a X   b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.   15 X   16 X	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
9       Sponsoring organizations maintaining donor advised funds.       9         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         13       Section 501(c)(22) qualified nonprofit health insurance issuers.       13a       13a         14       Section 501(c)(20) qualified nonprofit health plans in more than one state?       13a       13a         14       Types," enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13a       13a         14a       X       14a       X       14b       15       15       X       16 <t< th=""><th>8</th><th>Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the</th><th></th><th></th><th></th></t<>	8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
a Did the sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter: <ul> <li>a Initiation fees and capital contributions included on Part VIII, line 12</li> <li>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</li> <li>10a</li> <li>10b</li> </ul> 10a           11 Section 501(c)(12) organizations. Enter: <ul> <li>a Gross income from tother sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</li> <li>11b</li> <li>11b</li> <li>11b</li> <li>11c</li> <li>11b</li> <li>12a</li> <li>Section 501(c)(29) qualified nonprofit health insurance issuers.</li> <li>a Is the organization licensed to issue qualified health plans in more than one state?</li> <li>13a</li> <li>Note. See the instructions for additional information the organization must report on Schedule O.</li> <li>b Enter the amount of reserves on hand</li> <li>13a</li> <li>Is the organization receive any payments for indoor tanning services during the tax year?</li> <li>If a X</li> <li>b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O</li> <li>14a</li> <li>X</li> <li>b It organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?</li> <li>If "Yes," see instructions and file Form 4720, Schedu</li></ul>			8							
b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b       11a         a       Gross income from members or shareholders       11a       11b       12a         b       Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         13       Section solicol(29) qualified health plans in more than one state?       13a       13a         14a       Did the organization is licensed to issue qualified health plans       13b       13c       14a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b	9									
10       Section 501(c)(7) organizations. Enter:         a       Initiation fees and capital contributions included on Part VIII, line 12         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities         11       Section 501(c)(12) organizations. Enter:         a       Gross income from members or shareholders         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.         a       Is the organization licensed to issue qualified health plans in more than one state?         Note. See the instructions for additional information the organization must report on Schedule O.         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans         c       Enter the amount of reserves on hand         14a       X         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?         15       Is the organization and file Form 4720, Schedule N.         16       X	a									
a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter:       11a         a 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         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13 Section 501(c)(2)29) qualified nonprofit health insurance issuers.       13a         a 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.       13b         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13c       14a         14a Did the organization subject to these payments? If "No," provide an explanation in Schedule O       14b       14b         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excees parachute payment(s) during the year?<			9b							
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13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       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.       13b         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> 14b       14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X			IZa							
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b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> 14b       14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X	a	•	154							
organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O       14b       14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X	h									
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15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X         16       X	-									
excess parachute payment(s) during the year?										
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 income?			15		x					
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?										
	16		16		Х					

Form **990** (2018)

Form	990 (2018) CHILDREN'S LAW CENTER, INC. 52-1961	588	Pa	age <b>6</b>
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	No" re	spons	e
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a19			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6		_X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			37
_	persons other than the governing body?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	-	v	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	•		х
Sec	organization's mailing address? <i>If</i> "Yes," provide the names and addresses in Schedule O	9		Λ
000	tion 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	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	x	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1 Tu		
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>			
18	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) a	vailab	le
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	rinanci	ai	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►			
	501 3RD ST, NW, 8TH FLOOR, WASHINGTON, DC 20001			
	SAT 202 AT MUL ATT TROOM MADITMOTOM, DC 2000T			

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Form 990 (20		52-1961588	Page 7
Part VII C	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated	
E	Employees, and Independent Contractors		
C	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete	this table for all persons required to be listed. Report compensation for the calendar year ending	with or within the organization's	s tax year.
• List all o	of the organization's current officers, directors, trustees (whether individuals or organizations), rec	pardless of amount of compens	ation.

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 report-able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per	box	not c , unles	Position not check more than one unless person is both an er and a director/trustee)				Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) CREIGHTON MAGID CHAIR	3.00	x		x				0.	0.	0.
(2) MELISSA WILEY	3.00									
TREASURER		x		x				0.	0.	0.
(3) ELIZABETH BAUSCH	3.00								-	
SECRETARY		х		x				0.	0.	0.
(4) ALLISON ALEXANDER	1.00									
DIRECTOR		х						0.	Ο.	0.
(5) MEAGAN BARKETT	1.00									
DIRECTOR		Х						0.	0.	0.
(6) JOHN BENTIVOGLIO	1.00									
DIRECTOR		Х						0.	0.	0.
(7) BRIAN V. BREHENY	1.00									
DIRECTOR		Х						0.	0.	0.
(8) CHIQUITA BROOKS-LASURE	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JILL CAIAZZO	1.00									
DIRECTOR		Х						0.	0.	0.
(10) ANNE P. DAVIS	1.00									_
DIRECTOR		Х						0.	0.	0.
(11) ONA ALSTON DOSUNMU	1.00									_
DIRECTOR		Х						0.	0.	0.
(12) VICKI FOSTER	1.00								•	•
DIRECTOR	1 00	X						0.	0.	0.
(13) MANU GAYATRINATH	1.00								0	0
DIRECTOR	1 00	X						0.	0.	0.
(14) WENDY GOLDBERG	1.00							0	0	0
DIRECTOR	1 00	Х						0.	0.	0.
(15) STEPHANIE P. HALES	1.00	x						0	0	0
DIRECTOR (16) LESLIE KIERNAN	1.00	^				-		0.	0.	0.
(16) LESLIE KIERNAN DIRECTOR	L.00	x						0.	0.	0.
(17) FREDERICK L. KLEIN	1.00	^						0.	0.	0.
DIRECTOR	L.00	x						0.	0.	0.
DIVICION	1	Δ		I		1		0.	0.	. 000

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Form 990 (2018)

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Name and stile         Average week (Bit arr) week (Bit arr) hours for related backforms at the bound of compensation provide and atackforms at the provide and atackforms at the organization (W2/1009-MISC)         Reportable regarization (W2/1009-MISC)         Estimated compensation from relation (W2/1009-MISC)         Estimated compensation from relation (W2/1009-MISC)         Estimated compensation from relation and related organizations           (18) MIXEL LABGON         1.000         X         0.         0.         0.         0.           (13) CLAIRE K, MADDOX         1.000         X         0.         0.         0.         0.           (13) CLAIRE K, MADDOX         1.000         X         0.         0.         0.         0.           (12) DANIEL A. MASUR         1.000         X         0.         0.         0.         0.           (13) FARM MILLER         1.000         X         0.         0.         0.         0.           (14) TBROORDE D. BRACK         1.000         X         0.         0.         0.         0.           (12) TANDEL R. DARGORD         1.000         X         0.         0.         0.         0.           DIRECTOR         1.000         X         0.         0.         0.         0.           DIRECTOR         1.000         X         0.	Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
Week (Bit are)         Week (Bit are)         Or and a teach-tower (Bit are)         Toom (W2/1099-MISC)         Conter- organization (W2/1099-MISC)         Other organization (W2/1099-MISC)         Other organization (W2/1099-MISC)         Other organization and related organization           (18) MIXE LABSON         1.00         X         0.         0.         0.         0.           DIRACTOR         0.0         X         0.         0.         0.         0.           C(2) DANTE A, MADDOX         1.000         X         0.         0.         0.         0.           DIRACTOR         0.0         X         0.         0.         0.         0.         0.           DIRACTOR         0.0         X         0.			not ch	Pos neck i	ition more	than o		Reportable	Reportable		Estima		
(1a) MEXE LASSON       1.00       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		(list any hours for related organizations below							the organization	organizations	1	compens from t organiza and rela	ation he ation ated
(13)       CLARRE N. MADDOX       1.00       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(18) MIKE LABSON	,		<u> </u>	Ó	¥	Ξ	Æ	0	0			0
DIRECTOR       X       0.       0.       0.       0.         (20) DANIEL A, MASUR       1.000       X       0.       0.       0.       0.         (21) DENTEL A, MASUR       1.000       X       0.       0.       0.       0.       0.         (21) EVAN NILLER       1.000       X       0.		1 00	Δ						0.	0	•		<u> </u>
(20) DAVIEL A. MASUR       1.00       X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		1.00	x						0.	0			0.
DIRECTOR X 0. 0. 0. 0. (21) EVAN NILLER 1.00 X 0. 0. 0. DIRECTOR 1.00 X 0. 0. 0. (23) MINUTER F. RODRIGUEZ 1.00 X 0. 0. 0. (23) SINONE ROSS 1.00 X 0. 0. 0. (24) THEODER D. SEGAL 1.00 X 0. 0. 0. DIRECTOR 0. 0. 0. 0. (25) JOINE L. 21X0LAK 1.00 X 0. 0. 0. (26) JULTEN SANDALOW 40.00 X 0. 0. 0. (26) JULTEN SANDALOW 40.00 X 1. 184,524. 0. 16,937. 1b Sub-total 0. 0. 0. 0. (26) JULTEN SANDALOW 40.00 X 1. 184,524. 0. 16,937. 1b Sub-total 0. 0. 0. 0. (27) Total number of individual finducing but not limited to those listed above) who received more than \$100,000 of compensation from the organization and related organization grater than \$100,000 // Yrsg. Complete Schedule J for such individual 5 Did any person listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organization grater than \$100,000 // Yrsg. Complete Schedule J for such individual for services 5 // X 1. 100 // X 1.		1.00									-		
(21) EVAN MILLER       1.00       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	DIRECTOR		x						0.	0			0.
DIRBETOR       X       0.       0.       0.       0.       0.         (22) MIGUEL E, RODRIGUEZ       1.00       X       0.       0.       0.       0.       0.         (23) MIGUEL E, RODRIGUEZ       1.00       X       0.		1.00									-		
(12)       MIOUEL E. RODRIGUEZ       1.00       X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	DIRECTOR		х						0.	0			0.
DIFRECTOR       X       0       0       0       0         (23) SIMONE ROSS       1.00       X       0       0       0       0         DIRECTOR       0       0       0       0       0       0       0         DIRECTOR       0       0       0       0       0       0       0       0         DIRECTOR       1.00       X       0<	(22) MIGUEL E. RODRIGUEZ	1.00											
(23) SHONE ROSS       1.00       X       0.0.0.0.         DIRECTOR       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	DIRECTOR		х						0.	0			0.
(24) THEODORE D. SEGAL       1.00       X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(23) SIMONE ROSS	1.00											
DIRECTOR       X       0.       0.       0.       0.         (25) JOANNE L. ZIMUZAK       1.00       X       0.       0.       0.       0.         (26) JUDITH SANDALOW       40.00       X       184,524.       0.       16,937.         (26) JUDITH SANDALOW       40.00       X       184,524.       0.       16,937.         (26) JUDITH SANDALOW       184,524.       0.       16,937.       645,735.       0.       71,391.         (27) Total from continuation sheets to Part VII, Section A       184,524.       0.       88,328.       0.       88,328.         (2) Total from continuation sheets to Part VII, Section A       830,259.       0.       88,328.       0.       16,937.         (3) Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3       X         (4) K       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       3       X         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services       5       X         Section B. Independent Contractors       Individual Jore suc	DIRECTOR		х						0.	0	•		0.
(25) JOANNE L. ZIMOLZAK       1.00       X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(24) THEODORE D. SEGAL	1.00											
DIRECTOR       X       0.       0.       0.       0.         (26) JUDITH SANDALOW       40.00       X       184,524.       0.       16,937.         C Total from continuation sheets to Part VII, Section A       184,524.       0.       16,937.         c Total form continuation sheets to Part VII, Section A       645,735.       0.       71,391.         d Total (add lines th and tc)       88,328.       2       30,259.       0.       88,328.         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ist any former officer, director, or trustee, key employee, or highest compensation from the organization and related organization and related organization individual       4       X         4       For any individual listed on line 1a, is the sum of reportable compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such individual       4       X         5       Did any person listed on line 1a receive or accrue compensation from many unrelated organization or individual for services       5       X         Section B. Independent Contractors       5       X         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the orga	DIRECTOR		Х						0.	0	•		0.
(26) JUDITH SANDALOW       40.00       X       184,524.       0.       16,937.         1b Sub-total       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation sheets to Part VII, Section A       Image: Sub-total from continuation from from from from from from from from	(25) JOANNE L. ZIMOLZAK	1.00											
EXECUTIVE DIRECTOR       X       184,524.       0.       16,937.         1b Sub-total       ►       184,524.       0.       16,937.         c Total from continuation sheets to Part VII, Section A       ►       645,735.       0.       71,391.         d Total (add lines th and 1c)       ►       830,259.       0.       88,328.         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization       6         3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3       X         4 For any individual listed on line 1a, is the sum of reportable compensation and related organizations greater than \$150,000? If "Yes," complete Schedule J for such person       4       X         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5       X         2 Ection B. Independent Contractors       (A)       (B)       (C)         Nome and business address       NONE       Description of services       Compensation         1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation       (C)       (C)	DIRECTOR		Х						0.	0	•		0.
1b       Sub-total       184,524.       0.       16,937.         c       Total from continuation sheets to Part VII, Section A       830,259.       0.       71,391.         d       Total (add lines 1b and 1c)       830,259.       0.       88,328.         2       Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization       6         3       Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3       X         4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       3       X         5       Did any person listed on line 1a, is the sum of reportable compensation and other compensation or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5       X         Section B. Independent Contractors       Independent contractors       Image: Compensation for the organization if from the organization if from the organization for the calendar year ending with or within the organization's tax year.       C         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation for the calendar year ending with or within the o	(26) JUDITH SANDALOW	40.00											
c Total from continuation sheets to Part VII, Section A <ul> <li> <b>645</b>, 735.             </li></ul> <li> <b>0</b>, 71, 391.             </li> <li> <b>830</b>, 259.  <li> <b>0</b>, 88, 328.         </li>             2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ist any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual                    4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual               <b>4</b> X                5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services             rendered to the organization? If "Yes," complete Schedule J for such individual                1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from             the organization. Report compensation for the calendar year ending with or within the organization's tax year.                (A)              (B)              (C)              Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation</li>	EXECUTIVE DIRECTOR				Х						_		
d Total (add lines 1b and 1c) <ul> <li></li></ul>											_		
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable     compensation from the organization     f	c Total from continuation sheets to Part VI	, Section A									_		
compensation from the organization       6         3       Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3       X         4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       4       X         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5       X         Section B. Independent Contractors       1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.       (C)         1       Complete this table for your five highest address       NONE       Description of services       Compensation         (A)       (B)       (C)       Compensation       Compensation       Compensation         1       Contractors       Independent contractors (including but not limited to those listed above) who received more than       C)         2       Total number of independent contractors (including but not limited to those listed above) who received more than       Independent taddress											•	88,3	328.
3       Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3       X         4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual for services       4       X         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services       4       X         5       X         Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization of services       5       X         Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.       (A)         (A)       NONE       Description of services       Compensation         (A)       NONE       Description of services       Compensation         2       Total number of independent contractors (including but not limited to those listed above) who received more than       2		ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable			~
3       Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3       X         4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       4       X         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5       X         Section B. Independent Contractors       5       X         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.         (A)       (B)       (C)         None       Description of services       Compensation         1       None       Image: Compensation of services       Image: Compensation         2       Total number of independent contractors (including but not limited to those listed above) who received more than       Image: Compensation	compensation from the organization												
1       1       3       X         4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual											п	Yes	No
4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       4       X         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5       X         Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.       (C)         (A)       (B)       (C)         Name and business address       NONE       Description of services       Compensation         2       Total number of independent contractors (including but not limited to those listed above) who received more than       2       Total number of independent contractors (including but not limited to those listed above) who received more than       2	<b>c i</b>	-				•	•		•				
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       4       X         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services       5       X         Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.       (A)       (B)       (C)         Name and business address       NONE       Description of services       Complete Schedule J for such above, who received more than         2       Total number of independent contractors (including but not limited to those listed above) who received more than       U       I											- H	3	
5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If</i> "Yes," <i>complete Schedule J for such person</i> 5       X         Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.       (A)       (B)       (C)         Name and business address       NONE       Description of services       Compensation         1       One of the person of services       Compensation       Compensation         (A)       (B)       (C)       Compensation         1       Name and business address       NONE       Description of services       Compensation         1       Contractors (including but not limited to those listed above) who received more than       1       Image: Contractor of the pendent contractors (including but not limited to those listed above) who received more than	-	-		-						-			
rendered to the organization? If "Yes," complete Schedule J for such person       5       X         Section B. Independent Contractors       1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.       (A)       (B)       (C)         Name and business address       NONE       Description of services       Compensation         Image: Complete the complete to the calendar year ending with or within the organization's tax year.       Image: Compensation for the calendar year ending with or within the organization's tax year.       Image: Compensation for the calendar year ending with or within the organization's tax year.         Image: Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.       Image: Compensation for the calendar year ending with or within the organization's tax year.         Image: Complete the		,		'							· F	4 X	
Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.         (A)       (B)       (C)         Name and business address       NONE       Description of services       Compensation         0       0       0       0       CO         0       0       0       0       0       0         0       0       0       0       0       0         0       0       0       0       0       0       0         0       0       0       0       0       0       0       0         0 <td></td> <td>_</td> <td>v</td>												_	v
1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization's tax year.         (A)       (B)       (C)         Name and business address       NONE       Description of services       Compensation         (B)       (C)       Compensation       Compensation       Compensation         (B)       (C)       (C)       Compensation       Compensation         (B)       (C)       (C)       (C)       (C)       (C)         (C)       (C)       (C)		plete Schedule	e J fo	or su	ich r	oers	on .				.	5	_ A
the organization. Report compensation for the calendar year ending with or within the organization's tax year.         (A)       (B)       (C)         Name and business address       NONE       Description of services       Compensation         Image: Compensation of the calendar year ending with or within the organization's tax year.       Image: Compensation       Compensation         Image: Compensation of services       Image: Compensation of services       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation of services       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation of services       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation       Image: Compensation       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation       Image: Compensation       Image: Compensation       Image: Compensation         Image: Compensation of services       Image: Compensation       Image: Compensation       Image: Compensation		mooncotod ind	lana	ndor	+ oc	ntra	ooto	o th	at reacived more than <sup>¢</sup>	100 000 of compos	ooti	on from	
(A) Name and business address       (B) Description of services       (C) Compensation         Image: Compensation       Image: Compensation       Image: Compensation         Image: Compensat											Isati	on ironi	
Name and business address     NONE     Description of services     Compensation		ine calendar ye	ai e	nuin	y w							(C)	
Total number of independent contractors (including but not limited to those listed above) who received more than		address	NC	ONE	2					ervices	Сс		on
					_								
		•	ot lin	nited	l to f	_	-	ted	above) who received mo	ore than			

Form 990 CHILDREN	'S LAW C	EN	ITE	R,	I	NC	•		52-196	1588
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, ai	nd H	lighe	est (	Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(F)	
Name and title	Average hours per	(c	heck I		ition that		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) WENDY A. PHIPPS	40.00							100 110		
CHIEF OPERATING OFFICER	40.00			X				129,440.	0.	5,240
(28) BRIAN D. SHOOK	40.00				37			1 - 4 - 2 1 - 7	0	22 261
DEVELOPMENT DIRECTOR (29) SHARRA GREER	40.00				X			154,317.	0.	22,361
POLICY DIRECTOR						x		121,939.	0.	18,235
(30) CHRISTINE M. SMITH	40.00									
LEGAL DIRECTOR						х		129,620.	0.	8,180.
(31) JENNIFER MORRIS PROGRAM DIRECTOR	40.00					x		110,419.	0.	17,375.
			-							
		·								
		]								
Fotal to Part VII, Section A, line 1c								645,735.		71,391

Form 990 (2018) CHILDREN'S LAW CENTER				, INC. 52-19615			588 Page 9		
	rt V				-				
			Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
						(A) Total revenue	<b>(B)</b> Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
S S	1	а	Federated campaigns	1a	37,904.				
Contributions, Gifts, Grants and Other Similar Amounts	-		Membership dues						
ي ق			Fundraising events		1,265,426.				
fts, r A			Related organizations						
, Gi		e Government grants (contributions) 1e							
Sins			All other contributions, gifts, gran						
utio		•	similar amounts not included abor		4,113,672.				
trib Otl		~	Noncash contributions included in lines						
)on		-	Total. Add lines 1a-1f			5,417,002.			
0 0			Total. Add lines 1a-11		Business Code	•,-=+,••==•			
	•	_	DC COURT CONTRACT		541100	5,772,953.	5,772,953.		
rice	2				541100	5,112,555.	5,112,555.		
erv ue		b							
n S /en		C							
jrar Re∖		d							
Program Service Revenue		е							
а.			All other program service reve			F 770 0F2			
		g	Total. Add lines 2a-2f			5,772,953.			
	3		Investment income (including			47 570			47 570
	_		other similar amounts)			47,572.			47,572.
	4		Income from investment of tax		F				
	5		Royalties						
				(i) Real	(ii) Personal				
			Gross rents						
			Less: rental expenses						
			Rental income or (loss)						
		d	Net rental income or (loss)	·····	🕨				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory	1,157,546.					
		b	Less: cost or other basis						
			and sales expenses	1,146,794.					
		С	Gain or (loss)	10,752.					
		d	Net gain or (loss)		····· •	10,752.			10,752.
e	8	а	Gross income from fundraising	0					
nue			including \$ 1,265	,426. of					
leve			contributions reported on line	,					
ъF			Part IV, line 18						
Other Revenue			Less: direct expenses		73,586.				
0		С	Net income or (loss) from func	raising events	····· ►	-51,616.			-51,616.
	9	а	Gross income from gaming ac						
			Part IV, line 19						
		b	Less: direct expenses	b					
			Net income or (loss) from gam		🕨				
	10	а	Gross sales of inventory, less	returns					
			and allowances						
		b	Less: cost of goods sold	b					
		с	Net income or (loss) from sale	s of inventory	<b>&gt;</b>				
			Miscellaneous Revenu	e	Business Code				
	11	а	MISCELLANEOUS REVENUE		900099	18,000.	18,000.		
		b							
		с							
			All other revenue						
			Total. Add lines 11a-11d		►	18,000.			
	12		Total revenue. See instructions			11,214,663.	5,790,953.	0.	6,708.

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER, INC. 52-1961588 Page 10 Form 990 (2018) Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses **(D)** Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b, expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 510,968. 246,981. 114,392. 149,595. trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 219,966. Other salaries and wages 4,983,687. 4,614,845. 148,876. 7 8 Pension plan accruals and contributions (include 158,390. 136,172. 18,153. 4,065. section 401(k) and 403(b) employer contributions) <u>918,1</u>44. <u>57,17</u>6. 819,725. 41,243. Other employee benefits 9 428,121. 382,603. 24,270. 21,248. 10 Payroll taxes 11 Fees for services (non-employees): а Management b Legal 4,002. 37,959. 32,093. 1,864. Accounting С Lobbying d 73,890. 73,890. Professional fundraising services. See Part IV, line 17 е f Investment management fees Other. (If line 11g amount exceeds 10% of line 25, α 141,518. 37,094. 31,406. 73,018. column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion 12 177,014. 127,323. 41,521. 8,170. 13 Office expenses 167,821. 127,261. 28,303. 12,257. 14 Information technology Royalties 15 818,471. 52,876. 920,122. 48,775. 16 Occupancy 107,955. 105,623. 1,238. 1,094. 17 Travel Payments of travel or entertainment expenses 18

for any federal, state, or local public officials .... 9,021. 1,526. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 293,214. 266,109. Depreciation, depletion, and amortization 22 46,853. 44,976. 23 Insurance Other expenses. Itemize expenses not covered 24 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 0.) 59,460. 56,692. DUES & MEMBERSHIPS а BAD DEBT EXPENSES 55,113. h 41,309. 41,309. LITIGATION EXPENSE С 20,081. 12,003. d RECRUITING & TRAINING 58,565. 2.094. e All other expenses 9,209,205. 7,872,900. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

832010 12-31-18

Check here if following SOP 98-2 (ASC 958-720)

7,359.

13,728.

1,027.

6,937.

13,217.

627,310.

947.

136.

930.

13,377.

1,741.

1,141.

43,254.

708,995.

55,113.

CHILDREN'S LAW CENTER, INC.

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	2,170,886.	1	3,058,705.
	2	Savings and temporary cash investments	1,962,022.	2	1,989,010.
	3	Pledges and grants receivable, net	864,205.	3	1,044,013.
	4	Accounts receivable, net	594,933.	4	1,574,671
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ß		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
×	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	202,589.	9	195,925.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 2,718,973.			
	b	Less: accumulated depreciation 10b 1,102,735.	1,909,453.	10c	1,616,238.
	11	Investments - publicly traded securities	531,927.	11	536,195.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	101,074.	15	88,128.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,337,089.	16	10,102,885.
	17	Accounts payable and accrued expenses	323,309.	17	359,746.
	18	Grants payable	111 050	18	
	19	Deferred revenue	111,250.	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
Liak	~~	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	2,150,209.	25	2,036,555.
	26	Schedule D Total liabilities. Add lines 17 through 25	2,584,768.	25	2,396,301.
	20	Organizations that follow SFAS 117 (ASC 958), check here ► X and	2,301,,001	20	2,550,501
		complete lines 27 through 29, and lines 33 and 34.			
ces	27	Unrestricted net assets	4,853,025.	27	5,601,414.
lan	28	Temporarily restricted net assets	899,296.	28	2,105,170.
Ba	29	Permanently restricted net assets	<b>,</b>	29	
n		Organizations that do not follow SFAS 117 (ASC 958), check here			
Ē		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ΪŻ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se	33	Total net assets or fund balances	5,752,321.	33	7,706,584.
	34	Total liabilities and net assets/fund balances	8,337,089.	34	10,102,885.
					Form <b>990</b> (2018

Form 990 (2018)

Form	990 (2018) CHILDREN'S LAW CENTER, INC.	52-	-1961588	Pag	<sub>ae</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,214	,66	53.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,209	, 20	05.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,005	, 45	58.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,752	, 32	21.
5	Net unrealized gains (losses) on investments	5	-20	,08	36.
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	-31	,10	)9.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	7,706	, 58	34.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc	lit		
	Act and OMB Circular A-133?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	it 🛛		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

OMB No. 1545-0047

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. ► Go

to	www.irs.	.gov/Form99	0 fo	r instructions	and the	e latest	information.
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2018	
Open to Public Inspection	

### Name of the organization

Nam	Name of the organization Employer identification number								
		CHIL	DREN'S LAW	CENTER, INC	•				2-1961588
Pa	tΙ	Reason for Public (	Charity Status (/	All organizations must co	omplete th	is part.) Se	e instructions	8.	
The o	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	)(A)(i).		
2		A school described in section	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 99	90-EZ).)			
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
	city, and state:								
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	Х	An organization that norma	lly receives a substa	ntial part of its support fi	om a gove	ernmental	unit or from th	ne general p	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
		university:							
10		An organization that norma							
		activities related to its exem							-
		income and unrelated busir		(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	fter June 30, 1975.
		See section 509(a)(2). (Cor	• •						
11		An organization organized a	•		•				_
12		An organization organized a	•		•		-	•	•
		more publicly supported or	-						check the box in
-		lines 12a through 12d that	• •					-	-i. i.e
а		<b>Type I.</b> A supporting orga	-		• • • •	-			
		the supported organization			majority c	of the direc	tors or truste	es of the sl	ipporting
		organization. You must o	-				el eveneration	n (n) huuhau	
b		<b>Type II.</b> A supporting org	-				•		-
		control or management o			ame perso	ns that coi	ntroi or manag	ye the supp	Joned
•		organization(s). You mus Type III functionally inte			in connoct	tion with a	and functional	ly intograte	d with
С		its supported organization						ly integrate	o with,
d		<b>Type III non-functionally</b>	. , .	•	-		-	ted organiz	ration(s)
u	L	that is not functionally int						-	
		requirement (see instructi			•		-	anattentit	
е		Check this box if the orga						II Type III	
•		functionally integrated, or					, , , , , , , , , , , , , , , , , , , ,	n, rype n	
f	Ente	er the number of supported of			.g o.gu				
		vide the following information	•						
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed na document?	(v) Amount of	fmonetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

#### Schedule A (Form 990 or 990-EZ) 2018 CHILDREN'S LAW CENTER, INC. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) 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 3661400. 3496583. 2890164. 5417002.18324410. include any "unusual grants.") 2859261 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 2890164. 5417002.18324410. 2859261. 3661400. 3496583. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 18324410. 6 Public support. Subtract line 5 from line 4. Section B. Total Support

Calendar year (or fiscal year beginning in) 🕨		(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2859261.	3661400.	3496583.	2890164.	5417002.	18324410.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6,219.	17,381.	19,274.	30,846.	47,572.	121,292.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	59,214.	75,725.		136,305.	18,000.	289,244.
11							18734946.
12	Gross receipts from related activities,	etc. (see instructio	ins)			12 31	,780,071.
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectior	501(c)(3)	
	organization, check this box and stop	here			-		
See	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2018 (li	ine 6, column (f) di	vided by line 11, co	olumn (f))		14	97.81 %
15	Public support percentage from 2017	Schedule A, Part	II, line 14			15	99.38 %
	33 1/3% support test - 2018. If the c						x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				►X
b	33 1/3% support test - 2017. If the c	organization did no	t check a box on li	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2018. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	is box and <b>stop h</b>	ere. Explain in Pa	t VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a p	bublicly supported	organization		
b	10% -facts-and-circumstances test	- 2017. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circur	nstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	e
	organization meets the "facts-and-circ	umstances" test. 7	The organization q	ualifies as a public	ly supported orgar	nization	
18	Private foundation. If the organizatio	n did not check a l	<u>oox on line 13, 16a</u>	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s <b>&gt;</b>
_							

Schedule A (Form 990 or 990-EZ) 2018

# Schedule A (Form 990 or 990-EZ) 2018 CHILDREN'S LAW CENTER, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

52-1961588 Page 3

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513				_		
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						
6	Total. Add lines 1 through 5		1		1		
	Amounts included on lines 1, 2, and						
h	3 received from disqualified persons Amounts included on lines 2 and 3 received						
2	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		•				
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) org	janization,
	check this box and stop here						
Sec	ction C. Computation of Public	c Support Pe	rcentage				
15	Public support percentage for 2018 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2017					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20	18 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
18						18	%
19a	33 1/3% support tests - 2018. If the	-					ine 17 is not
	more than 33 1/3%, check this box an						▶∟
b	33 1/3% support tests - 2017. If the	•					·
_	line 18 is not more than 33 1/3%, chec						tion
20	Private foundation. If the organizatio	<u>n did not check a</u>	box on line 14, 19	a, or 19b, check tl			·····
83202	23 10-11-18				Sch	edule A (Forn	n 990 or 990-EZ) 2018

#### Schedule A (Form 990 or 990-EZ) 2018 CHILDREN'S LAW CENTER, INC.

#### 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.)

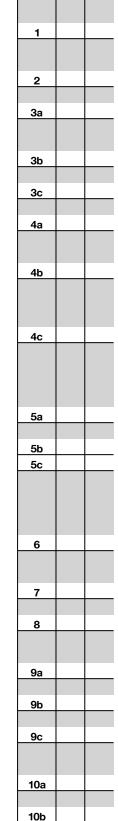
#### Section A. All Supporting Organizations

- 1 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.)

832024 10-11-18

Yes

No



Sche	dule A (Form 990 or 990 EZ) 2018 CHILDREN'S LAW CENTER, INC. 52-19	6158	8 Pa	age <b>5</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	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)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	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. tion B. Type I Supporting Organizations	11c		
360	tion B. Type I Supporting Organizations		Vac	Na
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	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			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in <b>Part VI</b> how			
	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			
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (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. <i>Complete</i> <b>line 3</b> <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions		
2	Activities Test. Answer (a) and (b) below.		Yes	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	0-		
h	that these activities constituted substantially all of its activities.	2a		
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	20		
з а				
u	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a		
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 <b>Part VI</b> the role played by the organization in this regard.	3b		

"PUBLIC INSPECTION"

Schedule A (Form 990 or 990-EZ) 2018

#### 52-1961588 Page 6

# Schedule A (Form 990 or 990 EZ) 2018 CHILDREN'S LAW CENTER, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	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			
	factors (explain in detail in <b>Part VI</b> ):			
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-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

Sche Par	dule A (Form 990 or 990-EZ) 2018 CHILDREN'S LA	W CENTER, INC . (a)(3) Supporting Orga		2-1961588 Page 7
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 2018	CHILDR	EN'S	LAW	CENTER,	INC.	52-1961588 <sub>Pag</sub>	e 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	mation. Pro , 2, 3b, 3c, 4b lines 2 and 3;	ovide the , 4c, 5a, 6 Part IV, S	explana 3, 9a, 9b Section E	tions required b , 9c, 11a, 11b, E, lines 1c, 2a, 2	by Part II, line 10; and 11c; Part IV, 2b, 3a, and 3b; Pa	Part II, line 17a or 17b; Part III, line 12; Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V, art for any additional information.	
	(See Instructions.)							
								—

## Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service

SCHEDULE C

(Form 990 or 990-EZ)

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

<ul> <li>Section</li> </ul>	n 501(c	;)(4), (5), o	r (6) organizatio	ons: Complete Part II	Ι.

Nan	ne of orga	nization				Emplo	oyer identification number	
			52-1961588					
Pa	art I-A	Complete if the org	N'S LAW CENTER, IN anization is exempt under	section 501(c) or	r is a section 52	7 org	anization.	
2 3	Political Voluntee	campaign activity expendit r hours for political campai	gn activities					
Pa	art I-B	Complete if the org	anization is exempt under					
1		<b>,</b>	incurred by the organization under	section 4955		. ►\$.		
2			incurred by organization managers					
3			n 4955 tax, did it file Form 4720 for					
							Yes No	
	olf "Yes,"	describe in Part IV.	anization is exempt under	anotion E01/a) a	waant aaatian E	01/-)	(0)	
					-			
1		• •	by the filing organization for section	-		▶\$.		
2		00	ization's funds contributed to othe	0				
						▶\$.		
3		•	. Add lines 1 and 2. Enter here and			<b>.</b> .		
4			1120-POL for this year?				Yes No	
5		•	ployer identification number (EIN)	•	•			
		• •	tion listed, enter the amount paid fr				-	
	contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.							
	political	· · · · · · · · · · · · · · · · · · ·	, ,					
		(a) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0	

OMB No. 1545-0047

2018

**Open to Public** 

Inspection

Schedule C (Form 990 or 990-EZ) 2018	CHILDI	REN'S 1	LAW CENTER,	INC.	52-1	961588 Page 2
Part II-A Complete if the org section 501(h)).	anizatio	n is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
				Part IV each affiliated	group member's name	e, address, EIN,
		, ,	d "limited control" pro	visions apply.		
Limi		oying Exper eans amou	nditures nts paid or incurred.)		<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influ	Jence publ	ic opinion (a	irass roots lobbving)		1,095.	
<b>b</b> Total lobbying expenditures to influ	•				9,770.	
c Total lobbying expenditures (add li					10,865.	
d Other exempt purpose expenditure					9,274,832.	
e Total exempt purpose expenditure					9,285,697.	
f Lobbying nontaxable amount. Ente	er the amou	unt from the			614,285.	
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable amo	ount is:		
Not over \$500,000		20% of t	he amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exces	s over \$1,500,000.		
Over \$17,000,000		\$1,000,0	000.			
g Grassroots nontaxable amount (en	iter 25% of	line 1f)			153,571.	
h Subtract line 1g from line 1a. If zer	o or less, e	nter -0			0.	
i Subtract line 1f from line 1c. If zero	o or less, er	nter -0			0.	
j If there is an amount other than ze		r line 1h or l	ine 1i, did the organiza	tion file Form 4720	F	
reporting section 4911 tax for this						Yes No
(Some organizations t	hat made a	a section 50	raging Period Under 01(h) election do not h ate instructions for lin	nave to complete all o	of the five columns be	low.
	Lobb	oying Exper	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> Total
2a Lobbying nontaxable amount	544	4,668.	567,006.	671,437.	614,285.	2,397,396.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))						3,596,094.
c Total lobbying expenditures	14	4,290.	13,407.	44,318.	10,865.	82,880.
d Grassroots nontaxable amount	14:	3,038.	141,752.	167,859.	153,571.	606,220.
e Grassroots ceiling amount		,				,
(150% of line 2d, column (e))						909,330.
f Grassroots lobbying expenditures				1,332.	1,095.	2,427.

1,095. 2,427. Schedule C (Form 990 or 990-EZ) 2018

#### 52-1961588 Page 3

# Schedule C (Form 990 or 990-EZ) 2018 CHILDREN'S LAW CENTER, INC. 52-19615 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			_	
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5),	or sec		Na
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till $\mathbf{P}$ Complete if the organization is example under specific $\mathbf{FO1}(\mathbf{A})$ as the second seco		3	tion	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (c) BOTH Part III A lines 1 and 2 are ensured.				2 in
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."	'NO," OR (D	) Part	111-A, 1116	3, 18
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
	Total		2c		
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A, li	ines 1 a	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

		"PUE	BLIC INSPECTION"				
SC	HEDULE D	Supplementa	al Financial Statements		⊢	OMB No. 154	45-0047
(Forr	n 990)	Complete if the orga Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			20	<u>IX</u>
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the latest informatio	n.		Open to Inspection	
	e of the organizati				ployer ic	dentificatior	number
_		CHILDREN'S LAW CENT		_		-19615	
Pa		-	d Funds or Other Similar Funds or <i>i</i>	Accour	its. Co	omplete if th	е
	organizatio	on answered "Yes" on Form 990, Part IV, line		(12) [			-+-
	<b>T</b>		(a) Donor advised funds	(D) Fur	los ano (	other accour	nts
1		nd of year					
2 3		of contributions to (during year)					
3 4		at end of year					
5			writing that the assets held in donor advised fu	inds			
•	-		exclusive legal control?		Г	Yes	
6			dvisors in writing that grant funds can be used				
			r donor advisor, or for any other purpose conf				
					[	Yes	No
Pa	rt II Conserv	ation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part	IV, line 7			
1	Purpose(s) of cons	servation easements held by the organization	on (check all that apply).				
	Preservation	n of land for public use (e.g., recreation or e	ducation)	ally impor	tant land	d area	
	Protection of	of natural habitat	Preservation of a certified	historic	structure	Э	
	Preservation	n of open space					
2	•	• •	ied conservation contribution in the form of a	conserva	tion eas	ement on th	e last
	day of the tax yea				Held at	the End of the	e Tax Year
а					<u> </u>		
b					<b> </b>		
c			ucture included in (a)	<u>2c</u>	<u> </u>		
d			after 7/25/06, and not on a historic structure				
~						h a 4au	
3		vation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	anization	during t	ne tax	
4	year	where property subject to conservation eas	compation located				
5		ation have a written policy regarding the peri					
Ŭ	•	forcement of the conservation easements it			Г	Yes	
6	,		handling of violations, and enforcing conserva				
-	•						
7	Amount of expense	ses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easemen	ts during	g the year	
	▶\$						
8	Does each conser	vation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)	(B)(i)			
	and section 170(h	)(4)(B)(ii)?			[	Yes	No
9	In Part XIII, descri	be how the organization reports conservation	on easements in its revenue and expense state	ement, ar	nd balan	ce sheet, an	d
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for						
	conservation ease			<u></u>			
Pai		-	Art, Historical Treasures, or Other	Simila	r Asse	etS.	
		if the organization answered "Yes" on Form					
1a			C 958), not to report in its revenue statement				
		· · ·	hibition, education, or research in furtherance	ot public	service,	provide, in F	art XIII,
		thote to its financial statements that describ		I -			
b	-		C 958), to report in its revenue statement and				
	treasures, or other relating to these it		ducation, or research in furtherance of public s	ervice, p	rovide th	tollowing	amounts
	TERMODIO TO TOESE IT	eus					

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2018
b	Assets included in Form 990, Part X		\$
а	Revenue included on Form 990, Part VIII, line 1		\$
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro-	ovid	e
	(ii) Assets included in Form 990, Part X		\$
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	relating to these items:		

832051 10-29-18

Sche	dule D (Form 990) 2018 CHILDRE	N'S LAW CEI	NTER	, INC.			52-1	961588	B Page 2
	t III Organizations Maintaining C				asures, or (	Other S			
3	Using the organization's acquisition, accessi	on, and other record	s, checł	any of the f	following that a	re a signi	ficant use of its	s collection	items
	(check all that apply):								
а	Public exhibition	d	ı 🛄	Loan or exc	hange program	าร			
b	Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explair	n how th	ey further th	ne organization	's exempt	purpose in Pa	art XIII.	
5	During the year, did the organization solicit of	or receive donations of	of art, hi	storical treas	sures, or other	similar as	sets		
	to be sold to raise funds rather than to be ma							Yes	No No
Par	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered "Y	es" on Fo	orm 990, Part I	V, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for	contributions	s or other asse	ts not incl	luded		
	on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able:					
								Amount	
С	Beginning balance						1c		
d	Additions during the year						1d		
	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on F						?[	Yes	No
b	If "Yes," explain the arrangement in Part XIII.								
Par	<b>T V Endowment Funds.</b> Complete	if the organization an	swered	"Yes" on Fo	orm 990, Part IV	/, line 10.			
		(a) Current year	(b) F	Prior year	(c) Two years	back (d)	Three years bad	ck <b>(e)</b> Four	years back
1a	Beginning of year balance								
b	Contributions								
с	Net investment earnings, gains, and losses								
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curr		e (line 1)	n column (a)	)) held as:				
- a	Board designated or quasi-endowment	•	%	y, oolanni (a)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
b	Permanent endowment	%							
	Temporarily restricted endowment								
U	The percentages on lines 2a, 2b, and 2c sho								
20	Are there endowment funds not in the posse	-	tion the	t are hold ar	ad administoro	t for the c	rappization		
Ja		ssion of the organize		a ale neio ai			nganization	Г	Yes No
	by: (i) unrelated organizations							3a(i)	
	(i) unrelated organizations								
<b>L</b>	(ii) related organizations								
	If "Yes" on line 3a(ii), are the related organiza							3b	
4 Par	t VI Land, Buildings, and Equipm		wmenti	unas.					
1 41	Complete if the organization answere		) Dart IV	/ lino 110 S	CO Form 000	Dart V lin/	- 10		
		(a) Cost or o						(d) Bool	
	Description of property	basis (investr			or other (other)	. ,	umulated ciation	( <b>a)</b> Book	( value
<b>.</b>	Land	``	nong	Dabib		depre	olation		
	Land								
	Buildings			1 70	5 0/5	10	1,289.	1 201	2 756
	Leasehold improvements				5,045.		0,745.		3,756.
	Equipment				2,432.				L,687.
	Other				1,496.		0,701.		),795.
l otal	. Add lines 1a through 1e. (Column (d) must e	oual Form 990 Part	X colun	nn (R) line 1	0с)		🕨 📘	<b>Τ,</b> ΟΙ(	5,238.

Schedule D (Form 990) 2018

			ED 1061E00 - 5
Schedule D (Form 990) 2018 CHILDREN'S	LAW CENTER,	INC.	52-1961588 Page 3
Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11b. See Form 990, Pa	rt X, line 12.
(a) Description of security or category (including name of security)	(b) Book value		ation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of Valu	ation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d See Form 990 Pa	rt X line 15
	Description	, inte 110. dee 1 onn 300, 1 a	(b) Book value
(1)	I		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	e 15.)		
Part X Other Liabilities.			<u> </u>
Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11e or 11f. See Form 9	90, Part X, line 25.
1. (a) Description of liability		(b) Book value	

1. (a) Description of nability	(b) DOOK value
(1) Federal income taxes	
(2) DEFERRED RENT	838,943.
(3) DEFERRED TENANT IMPROVEMENT ALL	1,197,612.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	▶ 2,036,555.

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

Sche	dule D (Form 990) 2018 CHILDREN'S LAW CENTER, INC	•		52-	1961588 Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Re	turn.	
	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	11,635,878.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-20,086.		
b	Donated services and use of facilities	2b	447,534.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	427,448.
3	Subtract line 2e from line 1			3	11,208,430.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	6,233.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	6,233.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	11,214,663.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem		Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			1	
1	Total expenses and losses per audited financial statements			1	9,650,506.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	447,534.	_	
b	Prior year adjustments	2b		_	
С	Other losses	2c		_	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	447,534.
3	Subtract line 2e from line 1			3	9,202,972.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	6,233.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	6,233.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	9,209,205.
Pa	rt XIII Supplemental Information.				

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

PART X, LINE 2:

CLC IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE

INTERNAL REVENUE CODE AND THE APPLICABLE INCOME TAX REGULATIONS OF THE

DISTRICT OF COLUMBIA. CLC IS NOT A PRIVATE FOUNDATION AND IS EXEMPT FROM

TAXES ON INCOME OTHER THAN UNRELATED BUSINESS INCOME.

CLC'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL

AND STATE TAXING AUTHORITIES. CLC IS NOT AWARE OF ANY ACTIVITIES THAT

WOULD JEOPARDIZE ITS TAX-EXEMPT STATUS. INCOME TAX RETURNS FOR THE YEARS

ENDED SEPTEMBER 30, 2019, 2018 AND 2017 REMAIN OPEN TO EXAMINATION BY THE

TAXING JURISDICTIONS.

Schedule D	(Form 990) 2018 CHILD Supplemental Information	REN'S LAW CENTE	ER, INC.	52-1961588 Page 5
Part XIII	Supplemental Information (	continued)		

SCHEDULE G	Suppleme	ntal Information Regardin	g Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990 or 990-EZ) C		e organization answered "Yes" o organization entered more than \$				or 19, or if the	2018
Department of the Treasury		Attach to Form 99					Open to Public
Internal Revenue Service	► Go	to www.irs.gov/Form990 for ins	tructior	s and	the latest informati		Inspection
Name of the organization	CHILDRE	N'S LAW CENTER, I	NC.				r identification number 961588
		Complete if the organization answ		'es" or	n Form 990, Part IV, I	line 17. Form 99	0-EZ filers are not
required to con							
	0	ed funds through any of the follow	0				
a X Mail solicitations				•	overnment grants		
<b>b</b> X Internet and em				-	nment grants		
c X Phone solicitatio		g 🔀 Speci	al fundra	aising	events		
d X In-person solicit							
Ŭ		or oral agreement with any individu	•	Ũ			Yes No
	-	art VII) or entity in connection with	•		•		
compensated at least	•	viduals or entities (fundraisers) purs	uant to	agreer	ments under which the	ne tunoraiser is	to be
	\$5,000 by the						
(i) Name and address of	individual		(iii	Did	(iv) Gross receipts	(v) Amount p	
or entity (fundrais		(ii) Activity	have o	ustody htrol of	from activity	to (or retained fundraiser	to (or retained by)
<b>,</b> (			contrib	utions?		listed in col.	(i) organization
ELEVATE - 806 7TH STR	EET, NW,	GRANT WRITING &	Yes	No			
#301, WASHINGTON, DC	20001	ADMINISTRATION		x	٥.	73,8	390. 0.
			_				
Total			<u></u>			73,8	
<ol> <li>List all states in which t or licensing.</li> </ol>	ne organizatio	on is registered or licensed to solici	contrib	utions	or has been notified	I IT IS exempt fro	m registration
DC, MD, VA							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2018

		le G (Form 990 or 990-EZ) 2018 CHILDRE				1961588 Page 2
Pa	ιτι	II Fundraising Events. Complete if the of fundraising event contributions and gree				
			(a) Event #1 ANNUAL BENEFIT (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	1,287,396.			1,287,396.
	2	Less: Contributions	1,265,426.			1,265,426.
	3	Gross income (line 1 minus line 2)	21,970.			21,970.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	64,850.			64,850.
rect Ex	7	Food and beverages	1,530.			1,530.
Dire		Entertainment Other direct expenses Direct expense summary. Add lines 4 through	7,206. 9 in column (d)		•	7,206. 73,586. -51,616.
Pa	rt I	Net income summary. Subtract line 10 from li <b>Gaming.</b> Complete if the organization		990, Part IV, line 19, or i		51,010.
		\$15,000 on Form 990-EZ, line 6a.	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		►	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
	ls t	ter the state(s) in which the organization condu the organization licensed to conduct gaming a No," explain:	ctivities in each of these			Yes No
		ere any of the organization's gaming licenses re 'Yes," explain:			/ear?	Yes No

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

Sch	nedule G (Form 990 or 990-EZ) 2018 CHILDREN'S LAW CENTER, INC. 52-1	961	588	Pac	ge <b>3</b>
	Does the organization conduct gaming activities with nonmembers?		Yes		No
	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		No
	Indicate the percentage of gaming activity conducted in:				
	a The organization's facility	13a			%
	a An outside facility	13b			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	Name				
	Address 🕨				
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes		No
ł	o If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount				
	of gaming revenue retained by the third party ▶\$				
Ċ	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				
17	Mandatory distributions:				
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?		Yes		No
ł	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the				
Pa	organization's own exempt activities during the tax year <b>s</b> <b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	- III lin	0.0	ah 10	1h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	165 9, 3	50, 10	D,
	····, ···, ···, ····, ····				

Schedule G	a (Form 990 or 990-EZ)	CHILDREN'S	LAW	CENTER,	INC.	52-1961588	Page 4
Part IV	Supplemental Infor	mation (continued)					

		"	PUBLIC INSPECTION"						
SCI	HEDULE J	Comp	ensation Information		OMB No. 15	45-004	7		
(Fo	rm 990)	For certain Officers, D ► Complete if the organiza		<b>2018</b>					
	tment of the Treasury	Co to youry iro gov/E	Attach to Form 990.		Open to Public Inspection				
	al Revenue Service e of the organization		orm990 for instructions and the latest information.	Employer ide	-		nber		
	0	CHILDREN'S LAW	CENTER, INC.	52-19					
Pa	rt I Question	s Regarding Compensation	· · · · · · · · · · · · · · · · · · ·	<u> </u>					
						Yes	No		
1a	Check the appropri	iate box(es) if the organization provide	d any of the following to or for a person listed on Form	990,					
	Part VII, Section A,	line 1a. Complete Part III to provide a	ny relevant information regarding these items.						
	First-class or o	charter travel	Housing allowance or residence for perso	onal use					
	Travel for com	ipanions	Payments for business use of personal re	sidence					
	Tax indemnific	cation and gross-up payments	Health or social club dues or initiation fee	:S					
	Discretionary	spending account	Personal services (such as maid, chauffe	ur, chef)					
b	If any of the boxes	on line 1a are checked, did the organi	zation follow a written policy regarding payment or						
	reimbursement or p	provision of all of the expenses describ	bed above? If "No," complete Part III to explain		1b				
2	Did the organizatio	n require substantiation prior to reimb	ursing or allowing expenses incurred by all directors,						
	trustees, and office	rs, including the CEO/Executive Direc	tor, regarding the items checked on line 1a?		2				
3			ion used to establish the compensation of the organiza						
			ck any boxes for methods used by a related organizati	on to					
	· · ·	ation of the CEO/Executive Director, b							
	X Compensatior		X Written employment contract						
		compensation consultant	Compensation survey or study						
	X Form 990 of o	ther organizations	X Approval by the board or compensation o	committee					
4	During the year did	1 any person listed on Form 990 Part	VII, Section A, line 1a, with respect to the filing						
•	organization or a re								
а		ce payment or change-of-control paym	ent?		4a		Х		
			nonqualified retirement plan?				Х		
			compensation arrangement?				Х		
			the applicable amounts for each item in Part III.						
	Only section 501(c	c)(3), 501(c)(4), and 501(c)(29) organi	zations must complete lines 5-9.						
5	For persons listed of	on Form 990, Part VII, Section A, line <sup>-</sup>	a, did the organization pay or accrue any compensation	วท					
	contingent on the r	evenues of:							
а	The organization?				5a		X		
	Any related organiz				5b		X		
	If "Yes" on line 5a o	or 5b, describe in Part III.							
6			a, did the organization pay or accrue any compensation	วท					
	contingent on the r								
а	The organization?				6a		X		
	Any related organiz	zation?			6b		<u>X</u>		
		or 6b, describe in Part III.							
7			a, did the organization provide any nonfixed payments						
			III		7		<u> </u>		
8			or accrued pursuant to a contract that was subject to t	ne					
					8		<u> </u>		
9			uttable presumption procedure described in						
	Regulations section	n 53.4958-6(c)?			9		0040		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2018

#### Schedule J (Form 990) 2018

CHILDREN'S LAW CENTER, INC.

52-1961588 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	in column (B) reported as deferred on prior Form 990	
(1) JUDITH SANDALOW	(i)	164,524.	20,000.	0.	5,615.	11,322.	201,461.	0.	
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) BRIAN D. SHOOK	(i)	154,317.	0.	0.	4,817.	17,544.	176,678.	0.	
DEVELOPMENT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2018

Schedule J	(Form 990)	2018	CHILDREN'S	LAW	CENTER,	INC.
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52-1961588 Page 3

#### Part III Supplemental Information

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

Schedule J (Form 990) 2018

#### SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Open to Public Inspection

Employer identification number

52-1961588

Name of the	organization
-------------	--------------

	► Go to www.irs.gov/Form990 for instructions and the latest information.							
CI	HILDREN'	S	LAW	CENTER,	INC.			

Par	tI	Types	s of Property									
				(a)	(b)	(c)			(0			
				Check if	Number of contributions or	Noncash contri amounts repor			Method of c		•	_
				applicable		Form 990, Part VI		non	cash contrik	oution ar	nounts	5
1	Art -	Works of	art									
2			treasures									
3			l interests									
4			blications									
5			nousehold goods									
6			r vehicles									
7			nes									
8		lectual pro										
9		•	blicly traded	X	8	125	,113.	FMV				
10			osely held stock		<b>u</b>		/ = = 3 •					
			rtnership, LLC, or									
10												
			scellaneous									
13			ervation contribution -									
		oric struct										
14			ervation contribution - Other									
15			Residential									
16			Commercial									
17			Other									
18												
19			y									
20			dical supplies									
21												
22			acts									
23			cimens									
24			artifacts				0.0.4			_ ~		
25	Othe		( <u>TOYS</u> )	X	384	92	,284.	EST.	PURCH	ASE 1	PRIC	<u> </u>
26	Othe	er 🕨	( )									
27	Othe	er 🕨	( )									
28		er 🕨	(				. I					
29			rms 8283 received by the organiz		•						•	
	for w	which the o	organization completed Form 828	33, Part IV, I	Donee Acknowledg	ement	29				0	
											Yes	No
30a			ar, did the organization receive by		• • • • •		-		t it			
			at least three years from the date		l contribution, and	which isn't require	ed to be us	sed for				
			ses for the entire holding period?	•						30a		X
b			ibe the arrangement in Part II.									
31		-	nization have a gift acceptance p	-	-	•		tions?		31		<u>X</u>
32a	Does	s the orga	nization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell	noncash					
		ributions?								32a		X
			ibe in Part II.									
33		-	tion didn't report an amount in c	olumn (c) fo	a type of property	for which column	(a) is cheo	cked,				
		ribe in Pa										
LHA	Fo	r Paperw	ork Reduction Act Notice, see	the Instruct	tions for Form 990	).			Schedule	M (Forn	n 990)	2018

# Schedule M (Form 990) 2018 CHILDREN'S LAW CENTER, INC.

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### SCHEDULE M, PART I, COLUMN (B):

#### REPORTING THE NUMBER OF CONTRIBUTIONS

Supplemental Information to Form 990 or 990-EZ

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.



CHILDREN'S LAW CENTER, INC.

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

FAMILY, HEALTH, AND EDUCATION.

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

MORE THAN 5,000 CHILDREN AND FAMILIES EACH YEAR. WE USE THIS EXPERTISE,

GAINED FROM OUR DIRECT SERVICE, TO ADVOCATE FOR CHANGES IN THE

DISTRICT'S LAWS, POLICIES, AND PROGRAMS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

WHETHER THROUGH ADOPTION, CUSTODY OR GUARDIANSHIP.

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

POLICY WORK AND ADVOCACY - CLC'S POLICY ADVOCACY IS GROUNDED IN THE

EXPERIENCE CLC HAS GAINED HELPING TENS OF THOUSANDS OF DISTRICT

CHILDREN SINCE OUR FOUNDING IN 1996. CLC OFFERS CITY-WIDE SOLUTIONS TO

THE MAYOR, DISTRICT AGENCIES, AND THE DC COUNCIL TO BETTER SERVE

VULNERABLE CHILDREN. CLC WORKS TO IMPROVE LAWS, POLICIES AND PRACTICE,

AND ALSO SECURE MEDIA COVERAGE ABOUT THE DISTRICT'S SUCCESSES AND

FAILURES IN MEETING CHILDREN'S NEEDS. WHETHER IT IS PRESSING AGENCIES

TO BETTER PREPARE OLDER YOUTH WHO AGE OUT OF FOSTER CARE, IMPROVING

SPECIAL EDUCATION WITHIN DC SCHOOLS, OR ENSURING PEDIATRICIANS SCREEN

FOR CHILDREN'S MENTAL HEALTH NEEDS - CLC'S POLICY ADVOCACY DELIVERS

REAL RESULTS THAT IMPROVE ALL CHILDREN'S LIVES.

EXPENSES \$ 689,288. INCLUDING GRANTS OF \$ 0. REVENUE \$ 330,611.

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

Name of the organization Employer identification number 52-1961588 CHILDREN'S LAW CENTER, INC. THE FORM 990 IS REVIEWED INTERNALLY BY THE FINANCE MANAGER, THE CONTROLLER AND THE EXECUTIVE DIRECTOR. AFTER THIS REVIEW, THE FORM 990 IS DISTRIBUTED ELECTRONICALLY TO THE MEMBERS OF THE BOARD OF DIRECTORS.

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

Schedule O (Form 990 or 990-EZ) (2018)

EACH MEMBER OF THE BOARD OF DIRECTORS COMPLETES AN ANNUAL FORM WHICH IS

REVIEWED BY THE EXECUTIVE DIRECTOR, CHIEF OPERATING OFFICER, AND THE BOARD CHAIR.

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

THE BOARD'S COMPENSATION COMMITTEE REVIEWS COMPARABLE DATA OF OTHER NONPROFIT ORGANIZATIONS AND MAKES RECOMMENDATIONS WHICH ARE DISCUSSED AND APPROVED BY THE FULL BOARD OF DIRECTORS. THIS PROCESS IS FOR EXECUTIVE DIRECTOR ONLY. FOR OTHER STAFF, A MARKET-INFORMED ANALYSIS IS CONDUCTED TRIENNIALLY FOR ALL POSITIONS. BASED ON THAT ANALYSIS, THE LEADERSHIP TEAM DEVELOPS A SALARY SCALE FOR ALL POSITIONS AND THE EXECUTIVE DIRECTOR DETERMINES KEY EMPLOYEE SALARIES.

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

CLC PROVIDES A COPY OF ITS RECENT AUDIT AND FORM 990 ON ITS WEBSITE. CLC ALSO MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY REQUESTS MADE TO ITS CHIEF DEVELOPMENT OFFICER AND PROVIDES HIS E-MAIL ADDRESS AND PHONE NUMBER. THE 990 IS AVAILABLE TO ALL ON GUIDESTAR.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PROVISION FOR FEDERAL INCOME TAX

-31,109.

### Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

(Rev. January 2019)

Form **8868** 

File a	sonarato	application	for each	return	

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.* 

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number						
Type or	pe or Name of exempt organization or other filer, see instructions.					Employer identification number (EIN) or		
print								
File by the	CHILDREN'S LAW CENTER, INC.		52-1961588					
due date fo filing your return. See	501 3RD ST NW 8TH FLOOR	Social security number (SSN)						
instruction		oreign addi	ress, see instructions.					
Enter th	e Return Code for the return that this application is for (file	e a separa	te application for each return)			01		
Application			Application			Return		
Is For			ls For			Code		
Form 990 or Form 990-EZ			Form 990-T (corporation)	07				
Form 990-BL			Form 1041-A	08				
Form 47	20 (individual)	03	Form 4720 (other than individual)	09				
Form 99	0-PF	04	Form 5227	10				
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11				
Form 99	0-T (trust other than above)	06	Form 8870			12		
<ul> <li>If the</li> <li>If this</li> <li>box</li> <li>1</li> <li>1</li> <li>1</li> <li>th</li> <li></li> </ul>	ohone No. ▶       202-467-4900         organization does not have an office or place of business         a is for a Group Return, enter the organization's four digit 0         . If it is for part of the group, check this box ▶         equest an automatic 6-month extension of time until         e organization named above. The extension is for the organization is for the organization named above. The extension is for the organization the organization named above. The extension is for the organization of time until         •	Group Exe and atta AUGU anization's	mption Number (GEN), . ch a list with the names and EINs of <u>ST 15, 2020</u> , to file return for: d ending <u>SEP 30, 2019</u>	If this is fo all memb	r the whole o ers the exter npt organizat 	group, check this		
	this application is for Forms 990-BL, 990-PF, 990-T, 4720, ny nonrefundable credits. See instructions.	or 6069, e	enter the tentative tax, less	3a	\$	0.		
b If	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and					
es	estimated tax payments made. Include any prior year overpayment allowed as a credit.					0.		
c Balance due. Subtract line 3b from line 3a. Include your paym								
using EFTPS (Electronic Federal Tax Payment System). See		<u>instructio</u>	nstructions.		\$	0.		
instructi	: If you are going to make an electronic funds withdrawal ons. For Privacy Act and Paperwork Reduction Act Notice,			453-EO an		9-EO for payment 3868 (Rev. 1-2019)		