Form 8879-TE	IF	"PUBLIC IN S e-file Signat for a Tax E	ISPECTION" ture Authorization xempt Entity	ŀ	OMB No. 1545-0047
			, 2021, and ending	20	0004
			RS. Keep for your records.	, 20	2021
Department of the Treasury Internal Revenue Service	► G	•	379TE for the latest information.		
Name of filer				EIN or SSN	
CHILDR	EN'S LAW CE	NTER, INC.		52-19	61588
Name and title of officer or pe		UDITH SANDALO			
Deut I. Transa (1		XECUTIVE DIRE	CTOR		
Check the box for the retur Form 5330 filers may enter or <b>10a</b> below, and the amo whichever is applicable, bl	r dollars and cents. Fo ount on that line for the	sing this Form 8879-TE and r all other forms, enter who e return being filed with this	d enter the applicable amount, if an ole dollars only. If you check the bo s form was blank, then leave line 1 he return, then enter -0- on the appl	ox on line 1a, 2a, 3 1b, 2b, 3b, 4b, 5b,	3a, 4a, 5a, 6a, 7a, 8a, 9a, 6b, 7b, 8b, 9b, or 10b,
than one line in Part I. 1a Form 990 check h		Total revenue, if any (Er	orm 990, Part VIII, column (A), line <sup>-</sup>	10)	н12 810 088.
			orm 990, Part VIII, column (A), line orm 990-EZ, line 9)		
2a Form 990-EZ che 3a Form 1120-POL c			DL, line 22)		
4a Form 990-PF che			ent income (Form 990-PF, Part V, I		3b 4b
5a Form 8868 check			8, line 3c)		5b
6a Form 990-T check			Part III, line 4)		6b
7a Form 4720 check			art III, line 1)		
8a Form 5227 check			f tax year (Form 5227, Item D)		8b
9a Form 5330 check		<b>Tax due</b> (Form 5330, Pa			9b
10a Form 8038-CP ch	neck here 🕨 🛛	Amount of credit paym	ent requested (Form 8038-CP, Pa	art III, line 22)	10b
Part II Declarat	ion and Signatur	e Authorization of O	fficer or Person Subject to	o Tax	
complete. I further declare intermediate service provid acknowledgement of receip of any refund. If applicable	accompanying sched that the amount in Pa der, transmitter, or elec pt or reason for reject , I authorize the U.S. 1	ules and statements, and, irt I above is the amount sh ctronic return originator (EF on of the transmission, ( <b>b</b> freasury and its designate	entity or I am a person subject , (EIN)	and that I have belief, they are true return. I consent t nd to receive from ssing the return or tronic funds withd	examined a copy of the e, correct, and o allow my the IRS (a) an refund, and (c) the date rawal (direct debit)
financial institution to debi later than 2 business days payment of taxes to receiv	t the entry to this accor prior to the payment ( re confidential information	ount. To revoke a payment settlement) date. I also aut tion necessary to answer ir	I must contact the U.S. Treasury F horize the financial institutions invo quiries and resolve issues related in and, if applicable, the consent to	Financial Agent at olved in the proces to the payment. I	1-888-353-4537 no ssing of the electronic nave selected a
PIN: check one box only			ריקר		61500
<b>X</b> lauthorize <u>RU</u>	BINO AND CO	MPANY, CHARTE		to enter my P	
		ERO firm name			Enter five numbers, but do not enter all zeros
with a state ager	-	rities as part of the IRS Fee	I have indicated within this return t d/State program, I also authorize th		-
return. If I have in IRS Fed/State pr	ndicated within this re rogram, I will enter my		will enter my PIN as my signature of Irn is being filed with a state agence sure consent screen.	y(ies) regulating cl	narities as part of the
Signature of officer or person subject Part III Certifica	tion and Authen			Date	▶ 6/24/2022
ERO's EFIN/PIN. Enter yo number (EFIN) followed by	•	•	52777199 Do not enter all		
-	• •		ne 2021 electronically filed return ir Nodernized e-File (MeF) Informatior		
ERO's signature 🕨 🥂			Date 🕨	6-24-2022	
				- <u></u>	
			Form - See Instructions		
	Do Not Sub	mit This Form to the	IRS Unless Requested To	Do So	
LHA For Privacy act and	Paperwork Reduction	on Act Notice, see instruc	tions.		Form <b>8879-TE</b> (2021)

	n	00		nization Exempt I		ncome Tax	OMB No. 1545-0047
For	n <b>y</b>	90	Under section 501(c), 527, or 494				<sup>is)</sup> <b>2021</b>
Department of the Treasury				ecurity numbers on this form			Open to Public
Interr	nal Reve	nue Service		/Form990 for instructions and		information.	Inspection
			ar year, or tax year beginning	and	ending		
B (	Check if pp <b>l</b> icab	le: C Name of	organization			D Employer identific	cation number
	Addre	ess CHIL	DREN'S LAW CENTER,	INC.			
Doing business as 52–1961588						88	
	Initial return Final return	Number	and street (or P.O. box if mail is not de <b>3RD ST NW, 8TH FLO</b>		Room/suite	E Telephone number 202-467-4	
	termir ated	City or to	own, state or province, country, and	ZIP or foreign postal code		<b>G</b> Gross receipts \$	13,840,440.
	Amen return Applie	WASH	INGTON, DC 20001			H(a) Is this a group re	
	tion pendi		nd address of principal officer: JUD	ITH SANDALOW		for subordinates	
	av.ev	empt status:	AS C ABOVE X 501(c)(3) 501(c) ( )	◄ (insert no.) 4947(a)(1)	or 527	H(b) Are all subordinates in If "No." attach a	cluded? Yes No list. See instructions
			CHILDRENSLAWCENTER			H(c) Group exemption	
		f organization:		ssociation Other ►	L Year		State of legal domicile: DC
	art I	Summary					
	1	Briefly describ	e the organization's mission or most	significant activities: CHIL	dren's	LAW CENTER	WORKS TO
Governance			ERY CHILD IN THE D				
rna	2	Check this box	x 🕨 🔲 if the organization disco	ntinued its operations or dispos	sed of more	than 25% of its net ass	
ove	3		ing members of the governing body				19
യ ഷ	4		ependent voting members of the go				19
es	5		of individuals employed in calendar y				110
<ul> <li>5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)</li> <li>6 Total number of volunteers (estimate if necessary)</li> <li>7 a Total unrelated business revenue from Part VIII, column (C), line 12</li> </ul>						600	
Act							0.
	b	Net unrelated	business taxable income from Form	990-T, Part I, line 11			0.
		Contributions	and avents (Dart )/III line 1h)			Prior Year 4,754,663.	<u>Current Year</u> 6,877,387.
ne	8 9					5,947,954.	5,817,968.
Revenue	10	•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4	and 7d)		27,327.	137,093.
Be	11		(Part VIII, column (A), lines 5, 6d, 8c			43,847.	-22,360.
	12		- add lines 8 through 11 (must equal			10,773,791.	12,810,088.
	13		nilar amounts paid (Part IX, column (			0.	15,000.
	14		to or for members (Part IX, column (A	, , , , , , , , , , , , , , , , , , , ,		0.	0.
s	15	•	compensation, employee benefits (			7,327,813.	7,322,070.
Ise	16a		undraising fees (Part IX, column (A), I			77,100.	79,740.
xpenses	b		ng expenses (Part IX, column (D), lin		79.		
ш	17	Other expense	es (Part IX, column (A), lines 11a-11d	, 11f-24e)		2,305,895.	2,277,919.
	18	Total expense	s. Add lines 13-17 (must equal Part I	X, column (A), line 25)		9,710,808.	9,694,729.
	19	Revenue less	expenses. Subtract line 18 from line	12		1,062,983.	3,115,359.
S OF					Be	ginning of Current Year	End of Year
sset	20	Total assets (F				11,198,810.	14,378,579.
Net Assets	21					2,273,468.	2,327,197.
	22 art II		fund balances. Subtract line 21 from	line 20		8,925,342.	12,051,382.
				including accompanying achedula	o ond stateme	nto and to the heat of mu	Incurled as and balief it is
			declare that I have examined this return Declaration of preparer (other than office				knowledge and bellet, it is
u ue,				er j is based on all information of Wi	men preparel	nas any knowledge.	
Sig	n	Signature	e of officer			Date	
Her				TIVE DIRECTOR			
		Type or p	rint name and title	1 A			
		Print/Type prep		Preparer's signature		Date Check	PTIN
Paic	1	KAY VOL	LANS, CPA	XST		06/24/2022 <sup>17</sup> self-employ	ed P01404047

"PUBLIC INSPECTION"	
<b>Organization Exempt From</b>	In

132001 12-09-21	32001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.								
SEE	SCHEDULE	0 1	FOR	ORGANIZATION MISSION PUBLIC INSPECT	STATEMENT	CONTINUATION			

L

17

Firm's name RUBINO AND COMPANY, CHARTERED

May the IRS discuss this return with the preparer shown above? See instructions

Firm's address 5903 ROCKLEDGE DRIVE, SUITE 300

BETHESDA, MD 20817-1818

Preparer

Use Only

X Yes No Form 990 (2021)

Firm's EIN **52-1186096** 

Phone no. 301 - 564 - 3636

	"PUBLIC INSPECTION"
Form	990 (2021) CHILDREN'S LAW CENTER, INC. 52-1961588 Page 2
	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
-	CHILDREN'S LAW CENTER WORKS TO GIVE EVERY CHILD IN THE DISTRICT OF
	COLUMBIA A SOLID FOUNDATION OF FAMILY, HEALTH, AND EDUCATION. WITH
	APPROXIMATELY 100 PEOPLE ON STAFF, WE ARE THE LARGEST PROVIDER OF FREE
	LEGAL SERVICES IN THE DISTRICT, AND THE ONLY TO FOCUS ON CHILDREN. WE
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	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?
5	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.
4	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
4.0	revenue, if any, for each program service reported. (Code:) (Expenses \$4,037,236. including grants of \$) (Revenue \$ 5,776,490.)
4a	(Code:) (Expenses §4, 037, 236. including grants of §) (Revenue §5, 776, 490.) 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.
	NEEDS TO HELP THEM RECOVER FROM TRADMA AND POT THEM ON A BRIGHTER PATH.
46	(Code: ) (Expenses \$ 1,712,414. including grants of \$ ) (Revenue \$ 45,000.)
4b	(Code:) (Expenses \$1, /12, 414. including grants of \$) (Revenue \$45, 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 MENTRU HEADTH CARE THET NEED TO RECOVER FROM TRADMA:
4c	(Code:) (Expenses \$ 771,074. including grants of \$ 15,000. ) (Revenue \$ )
	SYSTEMIC ADVOCACY - CLC'S POLICY ADVOCACY IS GROUNDED IN THE EXPERIENCE
	CLC HAS GAINED HELPING TENS OF THOUSANDS OF DISTRICT CHILDREN SINCE ITS
	FOUNDING IN 1996. CLC OFFERS CITY-WIDE SOLUTIONS TO THE MAYOR, DISTRICT
	AGENCIES AND THE DC COUNCIL TO BETTER SERVE LOW-INCOME 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 ADVOCATING FOR ADDITIONAL SUPPORT
	DURING THE COVID-19 PANDEMIC, HISTORIC SPECIAL EDUCATION REFORMS,
	PRESSING AGENCIES TO BETTER PREPARE OLDER YOUTH WHO AGE OUT OF FOSTER
	CARE OR IMPROVING BEHAVIORAL HEALTH SERVICES WITHIN DC SCHOOLS CLC'S
	POLICY ADVOCACY DELIVERS REAL RESULTS THAT HAVE IMPROVED HUNDREDS OF
	THOUSANDS OF CHILDREN'S LIVES.
ام //	
4d	
4e	(Expenses \$ 593,446 · including grants of \$ ) (Revenue \$ ) Total program service expenses ► 7,114,170 ·
75	Form 990 (2021)

"PUB	LIC I	NSPE	CTIO	N'
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INC.

CHILDREN'S LAW CENTER,

Form	990 (2021) CHILDREN'S LAW CENTER, INC. 52-1961	588	Р	age 3
Pa	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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		
Ũ	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
4		4	x	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	л	
5	Is the organization a section 501(c)(d), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
44	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			<u> </u>
11				
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	l	v	
	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? /f "Yes, " complete Schedule D, Part VII/	11c		Х
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? /f "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12.0		<u> </u>
u U		12b		x
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	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		Х
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. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"			<u> </u>
19		10		x
<b>~</b> ~	complete Schedule G, Part III	19		
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a	<u> </u>	X
	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		<u>.</u> _	
	domestic government on Part IX, column (A), line 1? /f "Yes," complete Schedule I. Parts I and II	21	X	L
132003	3 12-09-21	Form	990	(2021)

INC.

CHILDREN'S LAW CENTER,

Form 990 (2021)

132004 12-09-21

	IV Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
	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			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	~		
	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	204		21
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes." complete			
	Schedule L, Part I	25b		х
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? //			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? /f			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	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
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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
	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
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.5%		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
		36		х
	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		- 23
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	- 07		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Parl		00		
	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 9			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	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** (2021)

	"PUBL	IC I	NSP	ECT	ION"
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Form	990 (2021) CHILDREN'S LAW CENTER, INC.	52-1961	588	P	age <b>5</b>
	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 110			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ıs?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instruction				
3a			3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	-	4a		Х
b	If "Yes," enter the name of the foreign country	,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	、 <i>,</i>	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac		5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?	-	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?	-	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х
			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?		7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
		.,	8		
9	Sponsoring organizations maintaining donor advised funds.				
а			9a		
b			9b		
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а		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		12a		
		12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
-	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu.		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		х
	If "Yes," see the 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?	16		х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	anv			
••	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER, INC.

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 Form 990 (2021)
 CHILDREN'S LAW CENTER, INC.
 52-1901008
 Page

 Part VI
 Governance, Management, and Disclosure.
 For each "Yes" response to lines 2 through 7b below, and for a "No" response

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 19			
	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 on Schedule O.			
b	Enter the number of voting members included on 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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		v	
12a	Did the organization have a written conflict of interest policy? <i>If</i> "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? /f "Yes," describe		v	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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?	45	v	
	The organization's CEO, Executive Director, or top management official	15a	Х	v
b	Other officers or key employees of the organization	15b		<u>X</u>
160				
108	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		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	108		
D.	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		
Sec	tion C. Disclosure	100		
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):	onlv)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X       Own website       Another's website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	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			
-	JUDITH SANDALOW - 202-467-4900			
	501 3RD ST, NW, 8TH FLOOR, WASHINGTON, DC 20001			
132006	§ 12-09-21	Form	990	(2021)

Form 990 (2021)	CHILDREN'S LAW CENTER, INC.	52–1961588 Page 7							
Part VII Compens	ation of Officers, Directors, Trustees, Key Employees, High	est Compensated							
Employees, and Independent Contractors									
Check if Sch	edule O contains a response or note to any line in this Part VII								
Section A. Officers, Di	rectors, Trustees, Key Employees, and Highest Compensated Employees	\$							
1a Complete this table for	or all persons required to be listed. Report compensation for the calendar year	r ending with or within the organization's tax year.							
• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.									

Enter -0 in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(7)       TRACY GOODMAN       40.00       X       115,045.       0.       22,638.         DIRECTOR, HEALTHY TOGETHER PROGRAM       2.00       X       X       0.       0.       0.         (8)       CREIGHTON MAGID       2.00       X       X       0.       0.       0.         CHAIR       X       X       0.       0.       0.       0.       0.         TREASURER       2.00       X       X       0.       0.       0.       0.         (10)       ELIZABETH BAUSCH       2.00       X       X       0.       0.       0.         SECRETARY       X       X       0.       0.       0.       0.       0.         (11)       ALLISON L. ALEXANDER       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.		or any related	uiya	IIIZa	uon	COII	iper	Sale	ed any current officer, di	rector, or trustee.	
And Re and the     Average hours per vecks (stary)     Celevative development (stary)     Televative (stary)     Televative (stary) <thtelevative (stary)     Televative (stary)</thtelevative 	(A)	(B)							(D)	(E)	(F)
hours per week week (Bit any Income and an Grand and Antiback (Bit any Income and Antiback Income and Antiback (Bit any Income and Antiback Income and Antiback Income and Antiback Income and Antiback (C)hours for the organization (Bit any Income and Antiback (C)anount of other other organization and related organization (Bit any Income and Antiback (C)anount of other other organization and related organization (Bit and Relation and Antiback (C)anount of other other organization and related organization (Bit and Relation and Antiback (C)anount of other other (C)anount of other organization and related organization (Bit and Relation and Antiback (C)anount of other organization (Bit and Relation and Antiback (C)anount of other organization (Bit and Relation and Antiback (C)anount of other organization (Bit and Relation and Relation and Relation and Relation and Antiback (C)anount of other organization (Bit and Relation and Relation (C)anount of other and Relation and Rel	Name and title	Average	(do					one	Reportable	Reportable	Estimated
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below         mee         mee </td <td></td> <td>week</td> <td>-</td> <td>cer ar</td> <td>dad</td> <td>recto</td> <td>r/trus</td> <td>tee)</td> <td></td> <td></td> <td></td>		week	-	cer ar	dad	recto	r/trus	tee)			
below         mee         mee </td <td></td> <td></td> <td>rector</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td>			rector						-		
below         mee         mee </td <td></td> <td></td> <td>or di</td> <td>8</td> <td></td> <td></td> <td>ated</td> <td></td> <td></td> <td></td> <td></td>			or di	8			ated				
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(1) JUDITH SANDALOW         40.00         x         183,012.         0.         25,001.           EXECUTIVE DIRECTOR         40.00         x         174,962.         0.         28,304.           (3) BREINA-YVETE D'AMELDA         40.00         x         147,755.         0.         23,850.           (4) SHARA GREER         40.00         x         147,755.         0.         23,850.           (4) SHARA GREER         40.00         x         137,610.         0.         24,079.           (5) DARTELLE CONNALL         40.00         x         125,067.         0.         16,107.           (6) JENECTOR, URADIAN AD LITEM PROGRAM         40.00         x         121,041.         0.         22,859.           (7) TRACY GOODMAN         40.00         x         115,045.         0.         22,638.           (8) CREIGHTON MAGID         2.00         x         x         0.         0.         0.           (10) ELIZABETH BAUSCH         2.00         x         x         0.         0.         0.           SCRETARY         X         X         0.         0.         0.         0.         0.           ILEACTOR, IRELENY         1.00         X         X         0.         0. </td <td></td> <td>0</td> <td>Jal tru</td> <td>iona</td> <td></td> <td>ploye</td> <td>com ee</td> <td></td> <td>1099-NEC)</td> <td></td> <td></td>		0	Jal tru	iona		ploye	com ee		1099-NEC)		
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POLICY DIRECTOR         X         137,610.         0.         24,079.           (5) DANIELLE CORNWALL         40.00         X         125,067.         0.         16,107.           (6) JENNIFER MORRIS         40.00         X         121,041.         0.         22,859.           (7) TRACY GOOMAN         40.00         X         115,045.         0.         22,638.           (8) CREIGHTON MAGID         2.00         X         115,045.         0.         22,638.           (9) MEAGAN BARKET         2.00         X         X         0.         0.         0.           SECRETARY         2.00         X         X         0.         0.         0.           SECRETARY         2.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (11) ALLISON L. ALEXANDER         1.00         X         0.         0.         0.         0.           (12) BRIAN V. BREHENY         1.00         X         0.         0.         0.         0.           (13) CHIQUITA BROKS-LASURE         1.00         X         0.         0.         0.         0.		40.00	1						,,		,
(5) DANIELLE CORNWALL       40.00       X       125,067.       0.       16,107.         (6) JENNIFER MORRIS       40.00       X       121,041.       0.       22,859.         (7) TRACY GOODMAN       40.00       X       115,045.       0.       22,638.         (7) TRACY GOODMAN       40.00       X       115,045.       0.       22,638.         (8) CREIGHTON MAGID       2.00       X       X       0.       0.       0.         (9) MEAGAN BARKETT       2.00       X       X       0.       0.       0.       0.         TREASURER       X       X       0. <td< td=""><td></td><td></td><td>1</td><td></td><td></td><td></td><td>х</td><td></td><td>137,610.</td><td>0.</td><td>24,079.</td></td<>			1				х		137,610.	0.	24,079.
CHIEF OF STAFF         X         125,067.         0.         16,107.           (6) JENNIFER MORRIS         40.00         X         121,041.         0.         22,859.           (7) TRACY GOODMAN         40.00         X         121,041.         0.         22,638.           (7) TRACY GOODMAN         40.00         X         115,045.         0.         22,638.           (8) CREIGHTON MAGID         2.00         X         X         0.         0.         0.           CHAIR         X         X         0.         0.         0.         0.         0.           CHAIR         X         X         0.         0.         0.         0.         0.         0.         0.           CHAIR         X         X         0.	(5) DANIELLE CORNWALL	40.00	t	t							
(6)         JENNIFER MORRIS         40.00         X         121,041.         0.         22,859.           (7)         TRACY GOODMAN         40.00         X         115,045.         0.         22,638.           (7)         TRACY GOODMAN         40.00         X         115,045.         0.         22,638.           (8)         CEREGHTON MAGID         2.00         X         X         0.         0.         0.           (9)         MEAGAN BARKET         2.00         X         X         0.         0.         0.           (10)         ELIZABETH BAUSCH         2.00         X         X         0.         0.         0.           (11)         ALLISON L. ALEXANDER         1.00         X         0.         0.         0.         0.           (12)         BRIAN V. BREHENY         1.00         X         0.         0.         0.         0.         0.           (13)         CHQUITA BROKS-LASURE         1.00         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.	CHIEF OF STAFF						х		125,067.	0.	16,107.
(7)       TRACY GOODMAN       40.00       X       115,045.       0.22,638.         (8)       CREIGHTON MAGID       2.00       X       X       0.0.0.0.         (9)       MEAGAN BARKETT       2.00       X       X       0.0.0.0.         (9)       MEAGAN BARKETT       2.00       X       X       0.0.0.0.         TREASURER       X       X       0.0.0.0.       0.0.0.         (10)       ELIZABETH BAUSCH       2.00       X       X       0.0.0.0.         SECRETARY       X       X       0.0.0.0.       0.0.0.         (11)       ALLISON L. ALEXANDER       1.00       X       X       0.0.0.0.         DIRECTOR       X       X       0.0.0.0.       0.0.0.       0.0.         (12)       BRIAN V. BRHENY       1.00       X       0.0.0.0.       0.0.0.         DIRECTOR       X       0.0.0.0.0.0.       0.0.0.0.       0.0.0.       0.0.0.       0.0.0.         (13)       CHAID       1.00       X       0.0.0.0.0.0.       0.0.0.0.       0.0.0.0.         DIRECTOR       X       0.0.0.0.0.0.0.0.0.       0.0.0.0.0.0.       0.0.0.0.0.       0.0.0.0.         (14)       TRAEVENA BYRD       1.00	(6) JENNIFER MORRIS	40.00									
DIRECTOR, HEALTHY TOGETHER PROGRAM         X         115,045.         0.         22,638.           (8) CREIGHTON MAGID         2.00         X         X         0.         0.         0.           CHAIR         X         X         X         0.         0.         0.         0.           (9) MEAGAN BARKETT         2.00         X         X         0.         0.         0.         0.           TREASURER         X         X         0.         0.         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.         0.           OIRECTOR         X         X         0.         0.         0.         0.         0.           (11) ALLISON L. ALEXANDER         1.00         X         0.         <	DIRECTOR, GUARDIAN AD LITEM PROGRAM						Х		121,041.	0.	22,859.
(8) CREIGHTON MAGID       2.00       X       X       X       0.       0.       0.         CHAIR       X       X       X       0.       0.       0.       0.         (9) MEAGAN BARKETT       2.00       X       X       X       0.       0.       0.         TREASURER       X       X       X       0.       0.       0.       0.         (10) ELIZABETH BAUSCH       2.00       X       X       X       0.       0.       0.         SECRETARY       X       X       X       0.       0.       0.       0.         (11) ALLISON L. ALEXANDER       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (12) BRIAN V. BREHENY       1.00       X       0.       0.       0.       0.       0.       0.       0.         (13) CHIQUITA BROOKS-LASURE       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. </td <td>(7) TRACY GOODMAN</td> <td>40.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(7) TRACY GOODMAN	40.00									
CHAIR         X         X         X         X         X         0. <td>DIRECTOR, HEALTHY TOGETHER PROGRAM</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td>115,045.</td> <td>0.</td> <td>22,638.</td>	DIRECTOR, HEALTHY TOGETHER PROGRAM						Х		115,045.	0.	22,638.
(9) MEAGAN BARKETT       2.00       X       X       X       0.       0.       0.         TREASURER       X       X       X       0.       0.       0.       0.         (10) ELIZABETH BAUSCH       2.00       X       X       0.       0.       0.       0.         SECRETARY       X       X       0.       0.       0.       0.       0.         (11) ALLISON L. ALEXANDER       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.	(8) CREIGHTON MAGID	2.00									
TREASURER         X         X         X         X         X         0.         0	CHAIR		Х		Х				0.	0.	0.
(10) ELIZABETH BAUSCH       2.00       X       X       X       0.       0.       0.         SECRETARY       X       X       X       0.       0.       0.       0.         (11) ALLISON L. ALEXANDER       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       1.00       X       0.       0.       0.       0.         (12) BRIAN V. BREHENY       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.	(9) MEAGAN BARKETT	2.00									
SECRETARY         X         X         X         X         0.	TREASURER		Х		Х				0.	0.	0.
(11) ALLISON L. ALEXANDER       1.00       X       0.       0.       0.         DIRECTOR       X       1.00       X       0.       0.       0.         (12) BRIAN V. BREHENY       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (13) CHIQUITA BROOKS-LASURE       1.00       X       0.       0.       0.       0.         DIRECTOR (END 2021)       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.       0.         (15) ANNE P. DAVIS       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <td< td=""><td>(10) ELIZABETH BAUSCH</td><td>2.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	(10) ELIZABETH BAUSCH	2.00									
DIRECTOR       X       0       0.       0.       0.         (12) BRIAN V. BREHENY       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (13) CHIQUITA BROOKS-LASURE       1.00       X       0.       0.       0.       0.         DIRECTOR (END 2021)       X       0.       0.       0.       0.       0.         (14) TRAEVENA BYRD       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (15) ANNE P. DAVIS       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (16) MIGUEL EATON       1.00       X       0.       0.       0.       0.       0.         (17) MANU GAYATRINATH       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0. <td>SECRETARY</td> <td></td> <td>Х</td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	SECRETARY		Х		Х				0.	0.	0.
(12) BRIAN V. BREHENY       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (13) CHIQUITA BROOKS-LASURE       1.00       X       0.       0.       0.       0.         DIRECTOR (END 2021)       X       0.       0.       0.       0.       0.       0.         (14) TRAEVENA BYRD       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (15) ANNE P. DAVIS       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (16) MIGUEL EATON       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         0.17) MANU GAYATRINATH       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.	(11) ALLISON L. ALEXANDER	1.00									
DIRECTOR       X       0       0.       0.       0.       0.         (13) CHIQUITA BROOKS-LASURE       1.00       X       0       0. <td>DIRECTOR</td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	DIRECTOR		Х						0.	0.	0.
(13) CHIQUITA BROOKS-LASURE       1.00       X       0.       0.       0.       0.         DIRECTOR (END 2021)       X       1.00       X       0.       0.       0.       0.         (14) TRAEVENA BYRD       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (15) ANNE P. DAVIS       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (16) MIGUEL EATON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (17) MANU GAYATRINATH       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.	(12) BRIAN V. BREHENY	1.00									
DIRECTOR (END 2021)       X       0       0.       0.       0.       0.         (14) TRAEVENA BYRD       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         (15) ANNE P. DAVIS       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         (16) MIGUEL EATON       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.	DIRECTOR		Х						0.	0.	0.
(14) TRAEVENA BYRD       1.00       X       0.       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.       0.         (15) ANNE P. DAVIS       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.	(13) CHIQUITA BROOKS-LASURE	1.00									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR (END 2021)</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR (END 2021)		Х						0.	0.	0.
(15) ANNE P. DAVIS       1.00       X       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (16) MIGUEL EATON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.		1.00									
DIRECTOR         X         0. <t< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			Х						0.	0.	0.
(16) MIGUEL EATON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       1.00       X       0.       0.       0.       0.         (17) MANU GAYATRINATH       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.		1.00									_
DIRECTOR         X         0. <t< td=""><td></td><td></td><td>Х</td><td> </td><td></td><td></td><td> </td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			Х						0.	0.	0.
(17) MANU GAYATRINATH 1.00 X 0. 0. 0.		1.00								-	_
DIRECTOR X 0. 0. 0.			Х						0.	0.	0.
		1.00	I							-	
	DIRECTOR		Х						0.	0.	Eorm <b>990</b> (2021)

132007 12-09-21

Form 990 (2021) CHILDREN'S LAW CENTER, INC.

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,			ghes	st C	ompensated Employee	s (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do			sitior more	ן than o	one	Reportable	Reportable			stimate	
	hours per	box,	unles	ss pe	rson	is both pr/trus	n an	compensation	compensatio			nount	of
	week (list any		ai					- from	from related			other	tion
	hours for	directo				-		the organization	organization (W-2/1099-MIS			pensa om th	
	related	e or c	stee			Isated		(W-2/1099-MISC/	1099-NEC)	50/		anizat	
	organizations	truste	al tru:		yee	Inper		1099-NEC)			•	d re <b>l</b> at	
	below	ndividual trustee or director	nstitutional trustee	er	key employee	est cc oyee	ler	,			orga	anizati	ons
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former						
(18) STEPHANIE P. HALES	1.00												
DIRECTOR		Х						0.		0.			0.
(19) CARA JAMES	1.00												
DIRECTOR		Х						0.		0.			0.
(20) FREDERICK L. KLEIN	1.00												•
DIRECTOR (END 2021)	1	Х						0.		0.			0.
(21) MIKE LABSON	1.00									~			•
DIRECTOR	1 0 0	Χ					_	0.		0.			0.
(22) CLAIRE M. MADDOX	1.00	37						0		~			•
DIRECTOR (END 2021)	1.00	Χ						0.		0.			0.
(23) DANIEL A. MASUR DIRECTOR	1.00	х						0.		Ο.			0
(24) MIKE MCNAMARA	1.00	Λ			-		-	0.		0.			0.
DIRECTOR	1.00	х						0.		Ο.			0.
(25) EVAN MILLER	1.00							0.		••			<u> </u>
DIRECTOR (END 2021)	1.00	х						0.		Ο.			Ο.
(26) ROBERT OURISMAN	1.00	23		-						••			<u> </u>
DIRECTOR	1000	х						ο.		Ο.			0.
1b Subtotal								1,004,492.		0.	16	2,8	38.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)	· · · ·							1,004,492.		0.	16	2,8	38.
2 Total number of individuals (including but n	ot limited to th	ose	iste	d at	oove	e) wh	o re	eceived more than \$100,0	000 of reportable	;			
compensation from the organization													8
												Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	ey e	empl	loye	e, or	' hig	hest compensated empl	oyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		Х
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensa	ation	and	oth	ner compensation from th	ne organization				
and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4	Х	
5 Did any person listed on line 1a receive or a	ccrue compen	satio	on fr	om	any	unre	elate	ed organization or individ	ual for services				
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ich i	pers	son .					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest con	•	•								pensat	tion fro	om	
the organization. Report compensation for t	he calendar ye	ear e	ndin	ng w	/ith c	or wi	thir		ear.				
(A) Name and business	address							<b>(B)</b> Description of s	ervices	С	<b>))</b> ompe		n
YOUR PART-TIME CONTROLLER		W7 27	L.M	יייד	I			Description of s		0	ompo	Ibalio	
STREET SUITE 1200, PHILAD						2		ACCOUNTING SH	RVICES		18	2,4	00.
DIREET DOTTE 1200, THILAD		<u> </u>	<u>n</u>	<u> </u>	<u> </u>	2		ACCOUNTING DI	JILVICED		10.	4, =	00.
2 Total number of independent contractors (ir	ncluding but no	ot lin	nitec	d to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz					1	1							
SEE PART VII, SECTION	A CONT	IN	UA	ΤĪ	ON	S	ΗĒ	ETS			Form	990 (	2021)

132008 12-09-21

Form 990 CHILDREN'S LAW CENTER, INC. 52-1961588											
Form 990       CHILDREN'S LAW CENTER, INC.       52-1961588         Part VII       Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
		nplo	yee			lighe	est (				
	(B)				C)			(D) Deseutable	(E) Deneutable	(F)	
Name and title	Average hours	(c)			ition	appl	hλ	Reportable compensation	Reportable compensation	Estimated amount of	
	per			a 🛛	liiai	app	y)	from	from related	other	
	week					/ee		the	organizations	compensation	
	(list any	actor				iold m		organization	(W-2/1099-MISC)	from the	
	hours for	or dir	e			ated e		(W-2/1099-MISC)		organization	
	related	ustee	truste		e	pensa				and related	
	organizations be <b>l</b> ow	ual tri	iona		ploye	t com				organizations	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(27) MIGUEL E. RODRIGUEZ	1.00	-	_	0	×	Ŧ	Ľ.				
DIRECTOR	1.00	х						0.	0.	0.	
(28) SIMONE ROSS	1.00	Λ						0.	0.	0.	
DIRECTOR	1.00	х						0.	0.	0	
(29) MELISSA WILEY	1.00	^						0.	0.	0.	
(29) MELISSA WILEY DIRECTOR	T.00	х						0.	0.	0.	
(30) JOANNE L. ZIMOLZAK	1.00	^						0.	0.	0.	
DIRECTOR	T.00	x						0.	0.	0.	
DIRECTOR		Δ						0.	0.	0.	
										<u> </u>	
										<u> </u>	
		-									
				1			-				
Total to Part VII, Section A, line 1c											

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER, INC.

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			2021) CHILDREN'S LA	W CENTER,	INC.		52-1961	588 Page <b>9</b>
Ра	rt V							
			Check if Schedule O contains a response	or note to any line	in this Part VIII (A)	(B)	(C)	
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
<i>(</i> 0, <i>u</i> )		-		32,568.				3000013 312 314
ants			Federated campaigns     1a       Membership dues     1b	52,500.				
Gr.			· · · · · · · · · · · · · · · · · · ·	1,583,660.				
Contributions, Gifts, Grants and Other Similar Amounts			• • • • • • • • • • • • • • • • • • •	1,303,000.				
Gil			<b>3</b>	1,366,607.				
Sin',			Government grants (contributions) <b>1e</b>	1,000,007.				
utic			All other contributions, gifts, grants, and	3,894,552.				
otb		~	similar amounts not included above <b>1f</b> Noncash contributions included in lines 1a-1f <b>1g \$</b>	117,510.				
ino'		-	Noncash contributions included in lines 1a-1f <b>1g</b> <b>Total,</b> Add lines 1a-1f	<u> </u>	6,877,387.			
a C		n	Total, Add lines Ta-11	Business Code	0,011,001.			
	2	2	DC COURT CONTRACT	541100	5,772,968.	5,772,968.		
Program Service Revenue	_	a b			•,••=,••••	-,,		
Ser		c						
ver Ver		d						
gra Be		e						
Pro			All other program service revenue	900099	45,000.	45,000.		
			Total. Add lines 2a-2f		5,817,968.	· · ·		
	3		Investment income (including dividends, inter-	est, and				
			other similar amounts)		116,085.			116,085.
	4		Income from investment of tax-exempt bond					
	5		Royalties	►				
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
	I	b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory <b>7a</b> 1,025,478.					
	I	b	Less: cost or other basis					
an			and sales expenses <b>7b</b> 1,004,470.					
ven		с	Gain or (loss)					
Re		d	Net gain or (loss)		21,008.			21,008.
Other Revenue	8	а	Gross income from fundraising events (not					
đ			including \$ 1,583,660. of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8t		05 000			05 000
			Net income or (loss) from fundraising events	<b>▶</b>	-25,882.			-25,882.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
			Less: direct expenses 9t					
			Net income or (loss) from gaming activities	· · · · · · · · · · · · · · · · · · ·				
	10	d	Gross sales of inventory, less returns					
		h	and allowances 10					
			Less: cost of goods sold <u>10</u>					
		U	Net income or (loss) from sales of inventory _	Business Code				
sn	11	2	OTHER INCOME	900099	3,522.	3,522.		
neo	113	a b			-,000.	5,522.	1	1
Miscellaneous Revenue		с С		<u>├</u>				
Be			All other revenue					
Σ			Total. Add lines 11a-11d		3,522.			
	12		Total revenue. See instructions		12,810,088.	5,821,490.	0.	111,211.
				····· F				

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"PUBLIC INSPECTION
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<u>52-1961588 Page 10</u>

# Form 990 (2021) CHILDREN'S LAW CENTER, Part IX Statement of Functional Expenses

INC.

	Check if Schedule O contains a respons			(C)	L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	15,000.	15,000.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	411,912.	169,957.	28,582.	212 272
~	trustees, and key employees	411,912.	109,957.	20,302.	213,373
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7		5,198,366.	4,105,963.	819,279.	273,124
7 8	Other salaries and wages Pension plan accruals and contributions (include	5,150,500+	±,±05,505•	010,2100	213,124
0	section 401(k) and 403(b) employer contributions)	156,318.	122,921.	25,222.	8,175
9	Other employee benefits	1,085,866.	839,798.	174,480.	71,588
0	Payroll taxes	469,608.	362,036.	68,305.	39,267
1	Fees for services (nonemployees):	10570001	001,0000		
'a	Management				
b	Legal				
	Accounting	230,837.		230,837.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	79,740.			79,740
	Investment management fees	11,537.		11,537.	
	Other. (If line 11g amount exceeds 10% of line 25,				
Ŭ	column (A), amount, list line 11g expenses on Sch 0.)	51,845.	6,098.	19,259.	26,488
2	Advertising and promotion				
3	Office expenses	142,118.	106,429.	25,066.	10,623
4	Information technology	336,293.	256,236.	51,391.	28,666
5	Royalties				
6	Occupancy	926,497.	704,387.	145,880.	76,230
7	Travel	23,023.	19,030.	3,990.	3
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials $\dots$	- 1 - 1 1		11.22	
9	Conferences, conventions, and meetings	51,261.	30,171.	11,395.	9,695
0	Interest				
21	Payments to affiliates	050 455	101 015		
2	Depreciation, depletion, and amortization	252,453.	191,865.	39,765.	20,823
3	Insurance	49,590.	38,442.	6,999.	4,149
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	DUES & MEMBERSHIPS	84,414.	75,761.	7,422.	1,231
a b	CLIENT COSTS	35,703.	20,332.	,,======	15,371
	RECRUITING & TRAINING	29,085.	10,509.	18,551.	25
d	LITIGATION EXPENSE	23,831.	23,831.		
	All other expenses	29,432.	15,404.	13,320.	708
5	Total functional expenses. Add lines 1 through 24e	9,694,729.	7,114,170.	1,701,280.	879,279
26	Joint costs. Complete this line only if the organization		,, <b>_</b> , <b>_</b> , <b>_</b> , <b>_</b> ,	,,,	, _ , _ , _ ,
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Fift if following SOP 98-2 (ASC 958-720)				

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Form 990 (2021)

	16	Total assets. Add lines 1 through 15 (must equal line 33)	11,198,810.	16	14,378,579.
	17	Accounts payable and accrued expenses	296,143.	17	310,552.
	18	Grants payable		18	
	19	Deferred revenue	117,020.	19	326,721.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ş	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or $35\%$			
iabi		controlled entity or family member of any of these persons		22	
Ξ	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	1,860,305.		
	26	Total liabilities. Add lines 17 through 25	2,273,468.	26	2,327,197.
		Organizations that follow FASB ASC 958, check here 🕨 🗴			
ces		and complete lines 27, 28, 32, and 33.			
an	27	Net assets without donor restrictions	7,461,504.	27	9,980,025.
Ва	28	Net assets with donor restrictions	1,463,838.	28	2,071,357.
pur		Organizations that do not follow FASB ASC 958, check here 🕨 📃			
гFц		and complete lines 29 through 33.			
s o	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	8,925,342.	32	12,051,382.
-	33	Total liabilities and net assets/fund balances	11,198,810.	33	14,378,579.

2,634,241.

1,520,833.

## "PUBLIC INSPECTION"

CHILDREN'S LAW CENTER, INC.

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Accounts receivable, net

Notes and loans receivable, net

Investments - publicly traded securities

Investments - other securities. See Part IV, line 11

Investments - program-related. See Part IV, line 11

Intangible assets

Other assets. See Part IV, line 11

10a

Loans and other receivables from any current or former officer, director,

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)

Inventories for sale or use

Prepaid expenses and deferred charges

trustee, key employee, creator or founder, substantial contributor, or 35%

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(B)

End of year

6,008,524.

1,860,625.

1,289,414.

1,542,727.

301,984.

1,113,408.

2,261,897.

Form 990 (2021)

(A)

Beginning of year

5,596,558.

2,015,255.

1,479,233.

203,450.

610,859.

1,293,455.

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4

5

6

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10c

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Form 990 (2021) Part X

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Assets

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

controlled entity or family member of any of these persons

**10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D

b Less: accumulated depreciation 10b

Form	1 990 (2021) CHILDREN'S LAW CENTER, INC.	52-1	961588	Pag	ge <b>12</b>					
	rt XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI									
1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,810	, 0	88.					
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,694							
3										
4										
5										
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 on Schedule O)	9			0.					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,									
	column (B))									
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII		1							
				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 on Schedule	0.			l					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a								
	separate basis, consolidated basis, or both:									
	Separate basis Consolidated basis Both consolidated and separate basis									
b	Were the organization's financial statements audited by an independent accountant?		2b	Х						
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,								
	consolidated basis, or both:									
	X Separate basis Consolidated basis Both consolidated and separate basis									
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,									
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х						
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule 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	g <b>l</b> e Audit			1					
	Act and OMB Circular A-133?		<u>3a</u>		Х					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			1					

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

3b Form 990 (2021)

			"PUBLIC INSPEC	CTION"							
SCHEDULE A	P	ublic Cha		OMB No. 1545-0047							
(Form 990)			ization is a section 501					2021			
			17(a)(1) nonexempt cha								
Department of the Treasury Internal Revenue Service			Attach to Form 990 or F			formation		Open to Public Inspection			
Name of the organizati		30 10 www.irs.gov	/Form990 for instruction	ons and th	le latest li	normation.	Employer	identification number			
indine er tre er gamzat		REN'S LAW	CENTER, INC	-				2-1961588			
Part I Reason	for Public Cl	narity Status.	All organizations must c	• complete th	nis part.) S	ee instructior		<u> 1901900</u>			
The organization is not a											
	-		n of churches described	•		I)(A)(i).					
			Attach Schedule E (Forn								
3 🗌 A hospital or	a cooperative he	ospital service orga	nization described in s	ection 170	(b)(1)(A)(ii	ii).					
4 A medical res	search organizat	ion operated in cor	junction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,			
city, and stat	e:										
5 🗌 An organizati	on operated for	the benefit of a col	lege or university owned	l or operate	ed by a go	overnmental u	nit describe	ed in			
section 170	<b>(b)(1)(A)(iv).</b> (Co	mplete Part II.)									
	te, or local gove	rnment or governm	ental unit described in	section 17	′0(b)(1)(A)	(v).					
-	•		ntial part of its support fi	rom a gove	ernmental	unit or from th	ne general p	oublic described in			
	<b>b)(1)(A)(vi)</b> . (Cor										
			1)(A)(vi). (Complete Par								
•	•		in section 170(b)(1)(A)(	• •			•	•			
-	or a non-land-gra	ant college of agricu	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or			
university:	on that normally	receives (1) more t	than 22 1/20/ of its sum	ort from o	ontribution	a mambarah	in face on	d aroon ronginta from			
-	-		than 33 1/3% of its supp				-				
	•	· -	t to certain exceptions; a (less section 511 tax) fro					•			
	509(a)(2). (Com			in busines	ises acqui		anization a	inter ourie 50, 1975.			
			vely to test for public sa	fetv See	section 50	)9(a)( <u>4</u> )					
	•			•			rrv out the	purposes of one or			
0	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on										
			supporting organization								
	-		upervised, or controlled				-	aivina			
••		-	ularly appoint or elect a	•	-						
organizatio	n. You must co	mplete Part IV, Se	ctions A and B.								
b 🗌 Type II. A s	supporting orgar	nization supervised	or controlled in connect	tion with its	s supporte	d organizatio	n(s), by hav	ring			
control or r	nanagement of t	he supporting orga	nization vested in the sa	ame perso	ns that co	ntro <b>l</b> or mana	ge the supp	ported			
organizatio	n(s). You must	complete Part IV, S	Sections A and C.								
c 📃 Type III fur	nctionally integr	rated. A supporting	g organization operated	in connect	ion with, a	and functiona	ly integrate	d with,			
its support	ed organization(	s) (see instructions)	You must complete l	Part IV, Se	ctions A,	D, and E.					
d 🔄 Type III no	n-functionally i	ntegrated. A supp	orting organization oper	ated in cor	nnection w	ith its suppo	ted organiz	zation(s)			
	, ,		ation genera <b>ll</b> y must sat			•	an attentiv	eness			
·			plete Part IV, Sections								
	•		vritten determination fro			Туре I, Туре	II, Type III				
•	•		nally integrated supporti		ation.						
f Enter the number			d organization(a)								
(i) Name of supp		about the supported (ii) EIN	(iii) Type of organization	(iv) is the orga	nization listed	(v) Amount o	f monetary	(vi) Amount of other			
organization	ı		(described on lines 1-10 above (see instructions))	in your governi Yes	No No	support (see i	structions)	support (see instructions)			
			above (see instructions))								
Total								<u> </u>			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132021 01-04-22

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# Schedule A (Form 990) 2021 CHILDREN'S LAW CENTER, INC. 52-1961 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2890164.	5438972.	1194805.	4754663.	6877387.	21155991.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2890164.	5438972.	1194805.	4754663.	6877387.	21155991.
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)						2819294.
6	Public support, Subtract line 5 from line 4.						18336697.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	2890164.	5438972.	1194805.	4754663.	6877387.	21155991.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	30,846.	47,572.	25,639.	23,051.	116,085.	243,193.
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.)	136,305.	21,970.		74,976.	3,522.	236,773.
11	Total support. Add lines 7 through 10						21635957.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 26	,145,831.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stop	bhere					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2021 (I	ine 6, co <b>l</b> umn (f), d	ivided by line 11, c	column (f))		14	<b>84.7</b> 5 %
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	92.74 %
16a	33 1/3% support test - 2021. If the c	organization did no	t check the box or	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				<b>X</b>
b	33 1/3% support test - 2020. If the o	-					
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
<b>1</b> 7a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	<b>re.</b> Exp <b>l</b> ain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on <b>l</b> ine	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, cheo	ck this box and <b>st</b>	<b>op here.</b> Exp <b>l</b> ain ii	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s <b>&gt;</b>

## Schedule A (Form 990) 2021 CHILDREN'S LAW CENTER, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	olow, ploade com					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ł	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6					(2) = - = -	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
I	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain		1	1	1	1	
	or loss from the sale of capital						
12	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)		1			1	
	First 5 years, If the Form 990 is for th	e organization's fi	irst second third	fourth or fifth tax	Vear as a section F	L (01(c)(3) organization	
		0					·
Se	ction C. Computation of Publi						
	Public support percentage for 2021 (			column (fi)		15	%
	Public support percentage from 2020		•			16	%
	ction D. Computation of Invest						
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from	-				18	%
	a 33 1/3% support tests - 2021. If the						
	more than 33 1/3%, check this box a						
ł	<b>33 1/3% support tests - 2020.</b> If the	-	-				
-	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization		•	•		•	
	23 01-04-22						A (Form 990) 2021

Sections A, D, and E, If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)			
A. All Supporting Organizations			<u> </u>
I of the executation's supported executations listed by some in the executation's source in a		Yes	No
I of the organization's supported organizations listed by name in the organization's governing			
ments? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by	-		
or purpose, describe the designation. If historic and continuing relationship, explain.	1		
ne organization have any supported organization that does not have an IRS determination of status			
r section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported	0		
ization was described in section 509(a)(1) or (2).	2		
ne organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If</i> "Yes," answer	3a		
<i>3b and 3c below.</i> ne organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	38		
ied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the			
	3b		
ization made the determination. ne organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	30		
bses? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
any supported organization not organized in the United States ("foreign supported organization")? If			
and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
ne organization have ultimate control and discretion in deciding whether to make grants to the foreign			
orted organization have distinct control and discretion in deciding whether to make grants to the foreign			
te being controlled or supervised by or in connection with its supported organizations.	4b		
the organization support any foreign supported organization that does not have an IRS determination	-15		
r sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used			
sure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
sure that all support to the loneigh supported organization was used exclusively for section (ro(c)(z)(D)	4c		
ne organization add, substitute, or remove any supported organizations during the tax year? If "Yes."			
er lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			
pers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
e authority under the organization's organizing document authorizing such action; and (iv) how the action			
accomplished (such as by amendment to the organizing document).	5a		
I or Type II only. Was any added or substituted supported organization part of a class already			
nated in the organization's organizing document?	5b		
titutions only. Was the substitution the result of an event beyond the organization's control?	5c		
ne organization provide support (whether in the form of grants or the provision of services or facilities) to			
ne other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
fited by one or more of its supported organizations, or (iii) other supporting organizations that also			
ort or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
VI.	6		
ne organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
efined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
d to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
ne organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?			
s," complete Part I of Schedule L (Form 990).	8		
the organization controlled directly or indirectly at any time during the tax year by one or more			
alified persons, as defined in section 4946 (other than foundation managers and organizations described			
ction 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
ne or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which			
upporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			
assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
the organization subject to the excess business holdings rules of section 4943 because of section			
(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
orting organizations)? If "Yes," answer line 10b below.	10a		
ne organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
mine whether the organization had excess business holdings.)	10b		
21 S	chedule A (Form	n 990)	2021

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER, INC.

Schedule A (Form 990) 2021 Part IV Supporting Organizations

> (Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete . ند م nd E If obookod b 10d Dort nloto Contic . . . nd c alata Dart V/

#### Section /

- 1 Are a docur class
- 2 Did th under organ
- 3a Did th lines
- b Did th satisf organ
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- b Did th suppo despi
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- 10a Was 4943 suppo
  - b Did th deterr

132024 01-04-2

"PUBLIC INSPECTION"

"F	"PUBLIC INSPECTION						
CHILDREN'S	LAW	CENTER,	INC.				

Schedule A (Form 990) 2021

132025 01-04-22

Pai	TIV 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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
Ŭ	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Vee	Na
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, 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)? /f "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
			<b>X</b>	NI
			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			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, 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 Part VI 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. <i>Complete</i> <b>line 2</b> <i>below.</i>			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see in	otruction		
2	Activities Test, Answer lines 2a and 2b below.	struction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	
а				
	the supported organization(s) to which the organization was responsive? <i>If</i> "Yes," <i>then in</i> <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, 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			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	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 Part VI the role played by the organization in this regard.	3b		

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER,

INC.

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Check here if the organization satisfied the Integral Part Test as a qualifying tru All other Type III non-functionally integrated supporting organizations must cor	ust on		
All other Type III per functionally integrated supporting organizations must app		Nov. 20, 1970 ( <i>explain in</i> F	Part VI). See instructions.
	nplete	Sections A through E	
ction A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optiona <b>l</b> )	
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3.	4		
Depreciation and depletion	5		
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		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ction B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optiona <b>l</b> )
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d.	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035.	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
ction C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
Enter 0.85 of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, column A)	3		
Enter greater of line 2 or line 3.	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
Check here if the current year is the organization's first as a non-functionally in	tegrate	ed Type III supporting organ	nization (see
instructions).	0		,

Schedule A (Form 990) 2021

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## Schedule A (Form 990) 2021 CHILDREN'S LAW CENTER, INC.

Fai		a)(b) Supporting Orga	inzations (continu	uea)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ns	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Schedule A (Form 990) 2021
Part VI Supplement

CHILDREN'S LAW CENTER, INC.

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Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE A, PART II:

CLC PREVIOUSLY CHANGED ITS YEAR END ACCOUNTING PERIOD: TAX YEARS 2017 &

2018 ARE FOR FOR THE FISCAL YEARS ENDING 9/30/2018 AND 9/30/2019,

RESPECTIVELY. TAX YEAR 2019 IS REPORTED ON A SHORT YEAR FOR THE THREE

MONTHS ENDING 12/31/2019. TAX YEAR 2020 AND 2021 ARE REPORTED ON THE

FULL CALENDAR YEARS.

		"PUBLIC II	SPECTION"						
SCHEDULE C	Pc	OMB No. 1545-0047							
(Form 990)	For Org	2021							
Department of the Treasury		if the organization is described			0-EZ.	Open to Public			
Internal Revenue Service	Þ	to to www.irs.gov/Form990 for i	nstructions and the I	atest information.		Inspection			
<ul> <li>Section 501(c)(3) org</li> <li>Section 501(c) (other</li> </ul>	<ul> <li>f the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then</li> <li>Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.</li> <li>Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.</li> </ul>								
Section 527 organization analytics	•	•	m 000 EZ Dort VI lir	a 47 (Labbying Astivit	iaa) tha	-			
		Form 990, Part IV, line 4, or For nave filed Form 5768 (election und							
		nave NOT filed Form 5768 (election							
Tax) (See separate inst	ructions), then	Form 990, Part IV, line 5 (Proxy	Tax) (See separate ir	nstructions) or Form 99	90-EZ, P	art V, line 35c (Proxy			
	, or (6) organizat	ions: Complete Part III.			malayor	identification number			
Name of organization	CHILDRE	N'S LAW CENTER, I	NC			identification number 2-1961588			
Part I-A Comple	ete if the org	anization is exempt under	section 501(c) o	or is a section 527					
2 Political campaign a	activity expendit	ation's direct and indirect political ures gn activities			▶\$				
Part I-B Comple	to if the org	onization is exempt under							
		anization is exempt under incurred by the organization under			►\$				
	•	incurred by organization managers							
	-	n 4955 tax, did it file Form 4720 fc				Yes No			
4a Was a correction m						Yes No			
b If "Yes," describe in	Part IV.								
		anization is exempt under							
		l by the filing organization for sect			▶\$				
		ization's funds contributed to othe	-		▶\$				
	on expenditures	. Add lines 1 and 2. Enter here and	d on Form 1120-POL,		► \$				
		1120-POL for this year?				Yes No			
5 Enter the names, ac made payments. Fo contributions receiv	Idresses and em r each organizat ed that were pro	nployer identification number (EIN) tion listed, enter the amount paid to pmptly and directly delivered to a s additional space is needed, provid	of all section 527 poli from the filing organiza separate political orga	itical organizations to w ation's funds. Also enter nization, such as a sepa	hich the t r the amo	ount of political			
<b>(a)</b> Name		(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds. If none, enter	s con 0 p de	e) Amount of political tributions received and promptly and directly elivered to a separate political organization. If none, enter -0-			
For Paperwork Reducti	on Act Notice, s	see the Instructions for Form 99	0 or 990-EZ.		Scheo	lule C (Form 990) 2021			

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	"Pl	JBLIC INSPECT	ION"		
Schedule C (Form 990) 2021	CHILDREN'S I	LAW CENTER,	INC.	52-1	961588 Page 2
Part II-A Complete if the org	anization is exem	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
section 501(h)).					
			Part IV each affiliated	group member's name	e, address, E <b>I</b> N,
	e of excess lobbying e				
B Check      if the filing organization	tion checked box A an	d "limited control" pro	visions apply.	(-) <b>Filin</b> -	
Limit (The term "expend)	(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influ	ence public opinion (g	rassroots lobbying)		161.	
<b>b</b> Total lobbying expenditures to influ	ience a legislative body	y (direct lobbying)		42,245.	
c Total lobbying expenditures (add lir	nes 1a and 1b)			42,406.	
d Other exempt purpose expenditure				9,652,323.	
e Total exempt purpose expenditures				9,694,729.	
f Lobbying nontaxable amount. Ente		following table in both	n columns.	634,736.	
If the amount on line 1e, column (a) o		oying nontaxable amo	ount is:		
Not over \$500,000		he amount on line 1e.	<b>4</b> 700.000		
Over \$500,000 but not over \$1,000		0 plus 15% of the exce			
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exce			
Over \$1,500,000 but not over \$17, Over \$17.000.000	<u>\$223,00</u> \$1,000,0	0 plus 5% of the exces	S Over \$1,500,000.		
Over \$17,000,000	φ1,000,0				
g Grassroots nontaxable amount (en	ter 25% of line 1f)			158,684.	
h Subtract line 1g from line 1a. If zero				0.	
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.	
j If there is an amount other than zer	ro on either line 1h or li	ne 1i, did the organiza	tion file Form 4720		
reporting section 4911 tax for this	year?				Yes No
(Some organizations th	nat made a section 50	raging Period Under )1(h) election do not h ite instructions for lin	nave to complete all o	f the five columns be	low.
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	( <b>d</b> ) 2021	(e) Total
2a Lobbying nontaxable amount	614,285.	274,617.	636,533.	634,736.	2,160,171.
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>					3,240,257.
c Total lobbying expenditures	10,865.	10,151.	41,606.	42,406.	105,028.
d Grassroots nontaxable amount	153,571.	68,654.	159,133.	158,684.	540,042.
e Grassroots ceiling amount					,
(150% of line 2d, column (e))					810,063.
f Grassroots lobbying expenditures	1,095.	1,026.		161.	2,282.

Schedule C (Form 990) 2021

#### CHILDREN'S LAW CENTER, INC.

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)		
of the lobbying activity.	Yes	No	Amo	ount	
<ol> <li>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:</li> <li>a Volunteers?</li> </ol>					
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> <li>c Media advertisements?</li> </ul>					
<ul> <li>d Mailings to members, legislators, or the public?</li> <li>e Publications, or published or broadcast statements?</li> <li>f Grants to other organizations for lobbying purposes?</li> </ul>					
<ul> <li>g Direct contact with legislators, their staffs, government officials, or a legislative body?</li> <li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li> <li>i Other activities?</li> </ul>					
<ul> <li>j Total. Add lines 1c through 1i</li> <li>2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</li> <li>b If "Yes," enter the amount of any tax incurred under section 4912</li> </ul>					
<ul> <li>c If "Yes," enter the amount of any tax incurred by organization managers under section 4912</li> <li>d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?</li> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section</li> </ul>	n 501(c)(	ō), or sec	tion		
501(c)(6).		-			
			Yes	No	
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> </ol>					
<ul> <li>3 Did the organization make only influese lobbying expenditures of \$2,000 of less?</li> <li>3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the</li> </ul>					
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	n 501(c)(! "No" OR	5), or sec (b) Part I		3, is	
<ol> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ol>		1			
expenses for which the section 527(f) tax was paid). a Current year					
b Carryover from last year					
<ul> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ul>					
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political				
<ul> <li>expenditure next year?</li> <li>Taxable amount of lobbying and political expenditures. See instructions</li> </ul>		4			
Part IV Supplemental Information					

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

SCI	HEDULE D		LIC INSPECTION" I Financial Statements		OMB No. 1545-0047
(Forn	n 990)	Complete if the organization of the organizati	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2021
	ment of the Treasury Revenue Service		Attach to Form 990. 90 for instructions and the latest information.		Inspection
Nam	e of the organizat	ion CHILDREN'S LAW CEN'	TER, INC.	Emp	bloyer identification number 52-1961588
Par	t I Organiza		d Funds or Other Similar Funds or Ac	cour	
		on answered "Yes" on Form 990, Part IV, lin			
			(a) Donor advised funds	<b>b)</b> Fun	ds and other accounts
1	Total number at e	nd of year			
2		of contributions to (during year)			
3		of grants from (during year)			
4	Aggregate value a	at end of year			
5			writing that the assets held in donor advised fund	ls	
	are the organization	on's property, subject to the organization's	exclusive legal control?		Yes 🗌 No
6	Did the organizati	on inform a <b>ll</b> grantees, donors, and donor a	dvisors in writing that grant funds can be used o	nly	
	for charitable purp	poses and not for the benefit of the donor o	r donor advisor, or for any other purpose conferr	ing	
	impermissible priv				Yes No
Par			ganization answered "Yes" on Form 990, Part IV,	line 7.	
1		servation easements he <b>l</b> d by the organization			
		n of land for public use (for example, recrea	·	-	•
	—	of natural habitat	Preservation of a certi	fied his	storic structure
		n of open space			
2		<b>5 1</b>	ied conservation contribution in the form of a co	nserva	
	day of the tax yea				Held at the End of the Tax Year
а				2a	
b	•			2b	
С			ucture included in (a)	2c	
d			fter 7/25/06, and not on a historic structure		
-				2d	
3		vation easements modified, transferred, rel	eased, extinguished, or terminated by the organi	zation	during the tax
	year	where property subject to concernation and	ement is leasted		
4 5		where property subject to conservation eas ation have a written policy regarding the per			
5	•	forcement of the conservation easements it			Yes No
6			holds? handling of violations, and enforcing conservatio		
Ŭ				11 0000	anity the year
7	Amount of expense	ses incurred in monitoring inspecting hand	ling of violations, and enforcing conservation eas	semen	ts during the year
	► \$			50111011	
8	· · ·	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)(B)	(i)	
				.,	Yes No
9			on easements in its revenue and expense statem		
	balance sheet, an	d include, if applicable, the text of the footn	ote to the organization's financial statements that	at desc	ribes the
		counting for conservation easements.	-		
Par	t III Organiza	ations Maintaining Collections of	Art, Historical Treasures, or Other S	imila	r Assets.
	Complete i	if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and bala	ance sł	neet works
	of art, historical tr	easures, or other similar assets held for pub	lic exhibition, education, or research in furtherar	nce of p	public
	service, provide in	Part XIII the text of the footnote to its finar	cial statements that describes these items.		
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balance	sheet	works of
	art, historical treas	sures, or other similar assets held for public	exhibition, education, or research in furtherance	of pul	olic service,
	•	ing amounts relating to these items:			
					\$
	.,				\$
2	0	,	asures, or other similar assets for financial gain, p	orovide	9
	-	unts required to be reported under FASB A	-		
а					\$
-					\$
	-	eduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2021
132051	10-28-21				

	dule D (Form 990) 2021 CHILDRE	N'S LAW CE	NTER	, INC.			52-	<u>-196158</u>	<mark>8</mark> Р	age <b>2</b>
Pai	rt III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Other S	Similar As	sets <sub>(cont</sub>	inued)	
3	Using the organization's acquisition, accession	on, and other record	s, checł	any of the f	fo <b>ll</b> owing that	make sign	ificant use o	f its		
	collection items (check all that apply):			-	-	-				
а	Public exhibition	c	1 I	Loan or exc	hange progra	am				
b										
с	Preservation for future generations									
4	Provide a description of the organization's co	ections and explain	n how th	nev further th	ne organizatio	n's exemp	t purpose in	Part XIII		
5	During the year, did the organization solicit o									
•	to be sold to raise funds rather than to be ma							Yes		No
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Par			organizatio	in anomorou		51111 000, 1 ui			
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for	contribution	s or other ass	sets not inc	uded			
ia	on Form 990, Part X?		-					Yes		No
h	If "Yes," explain the arrangement in Part XIII	and complete the fel	llowing t	ablo:						
D			lowing t	aule.				Amou	nt	
	Designing belower							7 41100		
c	Beginning balance						1c			
a	Additions during the year						1d			
e	Distributions during the year						<u>1e</u>			
T	Ending balance						1f			
	Did the organization include an amount on Fo	, ,	'				· · · · · · · · · · · · · · · · · · ·	L Yes		
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i									
Fai	rt V Endowment Funds. Complete i				_					haali
		(a) Current year	- (a)	Prior year	(c) Two year	S DACK (C	) Three years	Dack (e) FUI	ur years	Dack
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1o	g, co <b>l</b> umn (a)	)) he <b>l</b> d as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held ar	nd administer	ed for the	organization			
	by:	-					-		Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations									
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on S	chedule R?				3b		
4	Describe in Part XIII the intended uses of the									
-	rt VI Land, Buildings, and Equipm									
	Complete if the organization answered		), Part <b>I</b> \	/, <b>l</b> ine 11a. S	ee Form 990	, Part X, <b>l</b> in	e 10.			
	Description of property	(a) Cost or c			or other		umulated	(d) Bo	ok valu	
	Description of property	basis (investr			(other)	• •	eciation	(u) Do		
10	Land		7		,					
	Land							-		
b	Buildings			1 70	5,045.	7-	74,903.	1,01	0 1	42
	Leasehold improvements				9,563.		L8,808.		<u>.0,1</u> .0,7	
	Equipment									
	Other				9,633.	42	27,122.		$\frac{12,5}{24}$	
rota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990. Part	X. colun	nn ( <u>B). line 1</u>	<u>0c.)</u>			1,11		
							Sche	edule D (For	m 990	) 2021

## Schedule D (Form 990) 2021 CHILDREN'S LAW CENTER, INC. Part VII Investments - Other Securities.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related. Complete if the organization answered "Yes" c	n Form 990 Part IV line	11c. See Form 990. Part X. line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of vear market value
(1)	(w) = 0000 Value		
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	n Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)	•		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(1)			
(8)			
(8) (9)	15)		
(8) (9) iotal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.			
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Decorriging of lightlite			(b) Book value
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" c (a) Description of liability			<b>(b)</b> Book value
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" construction of liability (1) Federal income taxes			
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT	n Form 990, Part IV, line		818,932
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED TENANT IMPROVEMEN	n Form 990, Part IV, line		818,932
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED TENANT IMPROVEMEN (4)	n Form 990, Part IV, line		818,932
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED TENANT IMPROVEMEN (4) (5)	n Form 990, Part IV, line		818,932
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" construction of liability (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED RENT (4) (5) (6)	n Form 990, Part IV, line		818,932
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED RENT (3) DEFERRED TENANT IMPROVEMEN (4) (5) (6) (7)	n Form 990, Part IV, line		
(8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED RENT (3) DEFERRED TENANT IMPROVEMEN (4) (5) (6) (7) (8)	n Form 990, Part IV, line		818,932
(8) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) DEFERRED RENT (3) DEFERRED TENANT IMPROVEMEN (4) (5) (6) (7)	n Form 990, Part IV, line		818,932

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .... X

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER, INC.

Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per Re <sup>.</sup>	turn.	<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	13,210,813.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	10,681.		
b	Donated services and use of facilities	2b	401,581.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	412,262.
3	Subtract line 2e from line 1			3	12,798,551.
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	11,537.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	11,537.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	12,810,088.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten		Expenses per F	etur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				
1	Total expenses and losses per audited financial statements			1	10,084,773.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		404 504		
а	Donated services and use of facilities		401,581.		
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)				404 504
е	Add lines 2a through 2d			2e	401,581.
3	Subtract line 2e from line 1			3	9,683,192.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	11 505		
а	Investment expenses not included on Form 990, Part VIII, line 7b		11,537.		
b	Other (Describe in Part XIII.)	4b			44 505
С	Add lines 4a and 4b			4c	11,537.
5	Total expenses. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 18.</i> ) <b>t XIII Supplemental Information.</b>			5	9,694,729.

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:

Schedule D (Form 990) 2021

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 IN 2020, 2019 AND 2018, REMAIN OPEN TO EXAMINATION BY THE TAXING

JURISDICTIONS.

	Schedule D (Form 990) 202
132055 10-28-21	

CHILDREN'S LAW CENTER, INC.

52-1961588 Page 5

 Schedule D (Form 990) 2021
 CHILDREN'S

 Part XIII
 Supplemental Information (continued)

SCHEDULE G	Suppleme	"PUBLIC INSF ntal Information Regarding				ctiv	ities	ON	/IB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19,	or if the		2021
Department of the Treasury Internal Revenue Service	•	Attach to Form 990							Open to Public
Name of the organization		to www.irs.gov/Form990 for instr	uction	s and	the latest information	on.	Employer		tification number
		N'S LAW CENTER, IN	с.				52-190		
		Complete if the organization answe		es" or	ı Form 990, Part IV, I	ine 1	7. Form 990	)-EZ f	ilers are not
a X Mail solicitat b X Internet and c X Phone solici d X In-person so 2 a Did the organization key employees list	ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	f X Solicitar g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover lising d ling of ona <b>l</b> fl	overnment grants nment grants events ficers, directors, trus indraising services?		X		No
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have c or con contribu	aiser ustody itrol of	(iv) Gross receipts from activity	tò (o	Amount pai or retained b fundraiser ted in co <b>l. (i</b>	р <b>у</b> )	(vi) Amount paid to (or retained by) organization
ELEVATE - 806 7TH S		GRANT WRITING &	Yes	No					
#301, WASHINGTON, I	DC 20001	ADMINISTRATION		X	0.		79,74	10.	0.
Total				►			79,74	10.	
or licensing.	ch the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is	exempt from	n regi	istration
DC, MD, VA									

 ${\sf LHA}~{\sf For}$  Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

#### "PUBLIC INSPECTION" CHILDREN'S LAW CENTER, INC.

			N'S LAW CENT			1961588 Page 2
Pa	art I	<b>9 Complete II ti</b>				
		of fundraising event contributions and gr	(a) Event #1	-EZ, lines 1 and 6b. List e	(c) Other events	s greater than \$5,000.
			ANNUAL	(b) Event #2	NONE	(d) Total events
			BENEFIT		NONE	(add co <b>l. (a)</b> through
			(event type)	(event type)	(total number)	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue			1,583,660.			1,583,660.
Be	1	Gross receipts	1,303,000.			I, J05,000.
	2	Looo: Contributions	1,583,660.			1,583,660.
	2	Less: Contributions	1,505,000			1,505,000.
	2	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	·	ouon p				
	5	Noncash prizes				
SS	-					
ense	6	Rent/facility costs				
Direct Expenses						
t U	7	Food and beverages				
Dire		<b>U</b>				
	8	Entertainment				
	9	Other direct expenses				25,882.
	10	Direct expense summary. Add lines 4 through			<b>&gt;</b>	25,882.
	11	Net income summary. Subtract line 10 from I				-25,882.
Pa	art I	<b>Gaming.</b> Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
υ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
nu			()3	bingo/progressive bingo	(0) 0	co <b>l. (a)</b> through co <b>l. (c)</b> )
Revenue						
	1	Gross revenue				
ŝ	2	Cash prizes				
Direct Expenses						
ž	3	Noncash prizes				
ш т	_					
Dire	4	Rent/facility costs				
_	_					
	5	Other direct expenses	Yes %		Yes %	
				Yes%		
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summany. Add lines 2 through	h 5 in column (d)		•	
	7	Direct expense summary. Add lines 2 through			▶	
	8	Net gaming income summary. Subtract line 7	from line 1 column (d)		▶	
	0	Net gaming income summary. Subtract line /				
9	Ent	ter the state(s) in which the organization condu	icte gaming activities.			
-		the organization licensed to conduct gaming a		states?		Yes No
		No," explain:				
N						
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	erminated during the tax v	/ear?	Yes No
		Yes," explain:			·····	
-		· · ·				

132082 10-21-21

	"PUBLIC INSPECTION"		
Sche	dule G (Form 990) 2021 CHILDREN'S LAW CENTER, INC. 52	-196158	8 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	5 🗌 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	s 🛄 No
	Indicate the percentage of gaming activity conducted in:	1 1	
	The organization's facility		%
	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	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	s 🗌 No
	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 <b>&gt;</b> \$		
	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:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	5 🗌 No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	 )	
	organization's own exempt activities during the tax year 🕨 💲		
Par		Part III, lines 9	9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
PAR	RT I, LINE 2B, COLUMN (V):		
GRA	ANT WRITING & ADMINISTRATION		

Schedule G (Form 990)	CHILDREN'S LAW CENTER, INC. ormation (continued)	52-1961588 Page 4
Part IV Supplemental Infe	ormation (continued)	
-		
		Schedule G (Form 990)

"PUBLIC INSPECTION"

			J.	"PUBLIC INSPECTION"	CTION"			
SCHEDULE I (Form 990)		G GO Comple	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States <sup>Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.</sup>	Is and Other Assistance to Organizations, ments, and Individuals in the United State he organization answered "Yes" on Form 990, Part IV, line 21 o	ce to Organi s in the Unit on Form 990, Par	zations, ed States t IV, line 21 or 22.		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service			Go to www.irs	<ul> <li>Attach to Form 990.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>	n 990 <u>.</u> · the latest inform	ation.		Open to Public Inspection
Name of the organization	on CHILDREN'S	S LAW CENTER	TER, INC.					Employer identification number 52-1961588
Part I General In	<b>General Information on Grants and Assistance</b>	nd Assistance						
1 Does the organiz	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants o	or assistance, the g	jrantees' eligibility	for the grants or assis	tance, and the selectio	
criteria used to a	criteria used to award the grants or assistance?	tance?						X Yes
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monitc	ring the use of grant fi	unds in the United	States.			
Part II Grants and recipient th	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	<b>Domestic Organiz</b> 55,000. Part II can t	ations and Domestic be duplicated if additio	Governments. Co	omplete if the orga ed.	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
<b>1 (a)</b> Name and ad or gov	1 (a) Name and address of organization or government	(b) EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BORIS HENSON FOUNDATION	DATION							FOR MENTAL HEALTH
2049 CENTURY PARK E STE 1400	E STE 1400							PROGRAMS IN THE DC
LOS ANGELES, CA 90067	0067	82-3814846	501(C)(3)	15,000.	0.			COMMUNITY
2 Enter total numbe	Enter total number of section 501(c)(3) and government organizati	nd government org	anizations listed in the line 1 table	line 1 table				1.
3 Enter total numbe	Enter total number of other organizations listed in the line 1 table	is listed in the line 1	table					• 0 •
LHA For Paperwork	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructio	ins for Form 990.					Schedule I (Form 990) 2021

132101 10-26-21

Schedule I (Form 990) 2021       CHILDREN'S LAW       ENTER,       INC.         Part III       Grants and Other Assistance to Domestic Individuals.       Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	CENTER, Complete if the	"PUBLIC INSPECTION" INC.	ECTION" ered "Yes" on Form 9	90, Part IV, line 22.	52-1961588 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. PART I LINE 2:	uired in Part I, lin	ne 2; Part III, column	ı (b); and any other ac	ditional information.	
ANIZATION MONITORS THE USE	OF GRANT	FUNDS THRC	GRANT FUNDS THROUGH REGULAR	ж	
CONVERSATIONS WITH THE GRANTEE AND	AWARENESS		OF MENTAL HEALTH PROGRAM	ROGRAM	
ACTIVITIES IN THE WASHINGTON DC AREA	5A .				
132102 10-26-21					Schedule I (Form 990) 2021

		"PUBLIC INSPECTION"							
SC	HEDULE J	Compensation Information		OMB No.	1545 <b>-</b> 004	47			
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		っつ	<b>91</b>	I			
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20		l			
Dopa	tment of the Treasury	Attach to Form 990,		Open to	Publ	ic			
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe					
Nam	ne of the organizatior	1		identificatio		nber			
_		CHILDREN'S LAW CENTER, INC.	52-1	L96158	8				
Pa	rt I Question	s Regarding Compensation							
					Yes	No			
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form S	990,						
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or c	harter travel Housing allowance or residence for persor	nal use						
	Travel for com	panions Payments for business use of personal res	sidence						
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fees	\$						
	Discretionary s	spending account Personal services (such as maid, chauffeu	r, chef)						
b	-	on line 1a are checked, did the organization follow a written policy regarding payment or							
				<u>1b</u>		<u> </u>			
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		2					
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?								
3		iy, of the following the organization used to establish the compensation of the organization's							
		ctor. Check all that apply. Do not check any boxes for methods used by a related organization	on to						
		ation of the CEO/Executive Director, but explain in Part III.							
	X Compensation								
	Independent compensation consultant       Compensation survey or study         X       Form 990 of other organizations       X         Approval by the board or compensation committee								
	<b>L</b> Form 990 of o	ther organizations [X] Approval by the board or compensation co	ommittee						
	During the year did	any never listed on Farm 000. Dout //II. Castion A. line 1a, with respect to the filing							
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
~	organization or a re	e payment or change-of-control payment?		4a		x			
b		eive payment from a supplemental nonqualified retirement plan?				X			
	-	eive payment from an equity-based compensation arrangement?				X			
U	•	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n						
	contingent on the re								
а	The organization?			5a		Х			
b	Any related organiz					Х			
	, ,	r 5b, describe in Part <b>III.</b>							
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n						
	contingent on the n	et earnings of:							
а	The organization?	-		6a		Х			
		ation?				Х			
		r 6b, describe in Part <b>III.</b>							
7	•	n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments							
	not described on lir	es 5 and 6? If "Yes," describe in Part III		7		X			
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th							
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		Х			
9	If "Yes" on line 8, d	d the organization also follow the rebuttable presumption procedure described in							
	Regulations section		<u></u>	9		L			
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forr	n 990)	2021			

Schedule J (Form 990) 2021 CHILDREN 'S	)RE	LAW	CENTER, INC.	ENC.	52-1961588	588		Pade 2
s, Trustee	mplo	yees, and Highest C	compensated Empl	oyees. Use duplica	Compensated Employees. Use duplicate copies if additional space is needed	pace 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.	orm S	oorted on Schedule J 990, Part VII.	l, report compensati	on from the organiza	ation on row (i) and fror	n related organizations	s, described in the instr	uctions, on row (ii).
Note: The sum of columns (B)(i)-(iii) for each listed individual must equal	ed inc	dividual must equal th	ie total amount of Fo	orm 990, Part VII, Se	ection A, line 1a, applic	able column (D) and (E	the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	ridual.
		(B) Breakdown of W	W-2 and/or 1099-MISC and/or 1099-NEC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JUDITH SANDALOW	Ξ	183,012.	0.	.0	5,490.	19,511.	208,013.	.0
EXECUTIVE DIRECTOR	( <u>ii</u>		0.	0.		0.		0.
(2) BRIAN D. SHOOK	Ξ	174,962.	.0	.00	5,249.	23,055.	203,266.	.00
CITER DEVELOFMENT OFFICER	<u>=</u> :	117 766			• N 1 2 2	10 117	171 60	
<u> 14</u>	88	-	.0.	.0	<u>-</u>		/ T / T	.0
(4) SHARRA GREER	Ξ	137,610.	•0	•0	4,128.	19,951.	161,689.	•0
POLICY DIRECTOR	: (j)	• 0	.0	.0	.0	.0	•0	.0
	Ξ							
	≘							
	Ξ							
	(ii)							
	Ξ							
	<u>(</u>							
	Ξ							
	(ii)							
	(i)							
	(ii)							
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	Ξ							
	<u>(</u>							
	Ξ							
	(ii)							
	Ξ							
	(ii)							
							Schedu	Schedule J (Form 990) 2021

CHILDREN'S LAW CENTER, INC. Schedule J (Form 990) 2021

132112 11-02-21

# "PUBLIC INSPECTION"

Page 3											990) 2021
52-1961588	plete this part for any additional information.										Schedule J (Form 990) 2021
Schedule J (Form 990) 2021 CHILDREN'S LAW CENTER, INC.	Part III Supplemental Information 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. 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.										

132113 11-02-21

#### SCHEDULE M (Form 990)

Name of the organization

#### "PUBLIC INSPECTION" Noncash Contributions

OMB No. 1545-0047

(	
	Complete if the orga
Department of the Treasury	Attach to Form 990.
Internal Revenue Service	► Go to www.irs.gov/

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

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

2021
Open to Public Inspection

Employer identification number					
52-1961588					

CHILDREN'S LAW CENTER, INC.
Part | Types of Property

		<b>(a)</b> Check if	<b>(b)</b> Number of	(c) Noncash contribution	(d) Method of de	0	
		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ition amou	nts
1	Art - Works of art			,			
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	Х	15	102,106.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts			1 - 1 - 1			
25	Other $\blacktriangleright$ ( <u>TOYS</u> )	X	48	15,404.	EST. PURCHA	SE PR	ICE
26	Other ( )						
27	Other ( )						
28	Other ()						
29	Number of Forms 8283 received by the organized	-					
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			<u> </u>
~~	<b>_</b>					Ye	s No
30a	During the year, did the organization receive by	-		-			
	must hold for at least three years from the date					00-	x
	exempt purposes for the entire holding period'	<i>،</i>				30a	
	If "Yes," describe the arrangement in Part II.	aaliay that re	quiros the review	of any popotopdard contribut	iono?	31	x
	31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?						^
32a	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash						x
L.	contributions?					32a	^
	If "Yes," describe in Part II. If the organization didn't report an amount in c	olumn (o) fo	r a type of property	(for which column (a) is chose	wod		
33	describe in Part II.		a type of property	TO WHICH COMMITTING A) IS CHEC	neu,		
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990	).	Schedule N	1 (Form 99	0) 2021

52-1961588 Page 2

Schedule M (Form 990) 2021 CHILDREN'S LAW CENTER, INC. Part II Supplemental Information. Provide the information required by I

**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):

THE AMOUNT REPORTED IN COLUMN (B) REPRESENTS THE NUMBER OF

CONTRIBUTIONS.

132142 11-17-21

"PUBLIC INSPECTION"

SCHEDULE O (Form 990)

"PUBLIC INSPECTION"

Supplemental Information to Form 990 or 990-EZ . Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ Go to www.irs.gov/Form990 for the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

CHILDREN'S LAW CENTER, INC.

Employer identification number 52-1961588

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

FAMILY, HEALTH, AND EDUCATION.

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

HELP 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 4D, OTHER PROGRAM SERVICES:

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,

WHETHER THROUGH ADOPTION, CUSTODY OR GUARDIANSHIP.

EXPENSES \$ 593,446. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE FORM 990 IS REVIEWED INTERNALLY BY THE CONTROLLER AND THE EXECUTIVE

Schedule O (Form 990) 2021 Name of the organization

CHILDREN'S LAW CENTER, INC.

Page 2 Employer identification number 52-1961588

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:

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

REVIEWED BY THE EXECUTIVE DIRECTOR 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 UPON REQUEST. THE 990 IS

AVAILABLE TO ALL ON GUIDESTAR.

Form **8868** (Rev. January 2022)

#### "PUBLIC INSPECTION"

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

-	-	-	
File a	senarate	annlication f	or each return.
	Separate	application	

► 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.

Type or	or         Name of exempt organization or other filer, see instructions.         Tage					axpayer identification number (TIN)		
print	CHILDREN'S LAW CENTER, INC.				52-1961588			
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, se 501 3RD ST NW, 8TH FLOOR	ions.		52 19	01300			
instructions.	WASHINGTON, DC 20001	C						
Enter the	Return Code for the return that this application is for (file	a separa	te application for each return)			01		
Applicat	ion	Return	Application			Return		
ls For		Code	Is For		Code			
Form 990	) or Form 990-EZ	01	Form 1041-A			08		
Form 472	20 (individua <b>l</b> )	03	Form 4720 (other than individual)			09		
Form 990	)-PF	04	Form 5227			10		
Form 990	Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069					11		
Form 990	D-T (trust other than above)	06	Form 8870			12		
Form 990	D-T (corporation) JUDITH SANDALOW	07						
• If the • If this box 1 I re the 2 If tt	he tax year entered in line 1 is for less than 12 months, ch	Aroup Exe and atta NOVEI Inization's , an neck reaso	mption Number (GEN), I <u>ch a list with the names and TINs of</u> <u>MBER 15, 2022</u> , to file return for: d ending on: Initial return	f this is fo all memb	r the whole of ers the exter opt organization	group, check this nsion is for.		
<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.				3a	\$	0.		
	his application is for Forms 990-PF, 990-T, 4720, or 6069.	enter any	refundable credits and		Ψ			
	mated tax payments made. Include any prior year overpayment allowed as a credit.				\$	0.		
<ul> <li><b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by</li> </ul>			3b					
using EFTPS (Electronic Federal Tax Payment System). See ins			· · · ·	3c	\$	0.		
Caution: instruction	If you are going to make an electronic funds withdrawal	(direct del	bit) with this Form 8868, see Form 84	453-TE and		)-TE for payment <b>8868</b> (Rev. 1-2022)		