Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047

2017

Open to Public Inspection

<u> </u>	For the a	2017 cale	ndar year, or tax year beginning , 2017, and en	aing		, 20		
3	Check if a	pplicable:	C Name of organization Rocky Mountain Children's Law Center		D Employe	er identification number		
	Address o	hange	Doing business as			74-2406045		
	Name cha	inge	Number and street (or P.O box if mail is not delivered to street address) Room	n/suite	E Telephone number			
	Initial retu	_	1325 S Colorado Blvd	701		303-692-1165		
	Final return	/terminated	City or town, state or province, country, and ZIP or foreign postal code					
5	Amended		Denver, Co 80222		G Gross re	ceipts \$ 1509434		
╗			F Name and address of principal officer: Rebecca Miller Updike	H(a) is this a	aroup return for s	subordinates? Yes No		
	4-4		1325 S Colorado Blvd, Ste 701 Denver CO 80222			included? Yes No		
	Tax-exem	int status:	✓ 501(c)(3)			list (see instructions)		
<u> </u>	Website:		w childlawcenter org	· **	p exemption			
<u>. </u>			✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of fo		·	of legal domicile: CO		
	art I	Summ		1700	- In Otate	or regar dormente OO		
_			escribe the organization's mission or most significant activities: Th	e Rocky Mount	ain Childre	n's Law Center		
•		_	ns the lives of abused, neglected and at-risk children through compassi					
2			n, and public policy reform.	oriate legal adv	ocacy, cim	ical scivices,		
Activities & Governance			nis box ▶☐ if the organization discontinued its operations or dispos	ad at mana tha	- 0E0/ of			
Ş			·					
Ğ	1		of voting members of the governing body (Part VI, line 1a)			11		
S	1		of independent voting members of the governing body (Part VI, line	1D)		11		
/itie			mber of individuals employed in calendar year 2017 (Part V, line 2a)		. 5	23		
cţi	1		mber of volunteers (estimate if necessary)		. 6	122		
⋖			related business revenue from Part VI(I, column (C), line 12		. 7a	0		
	b	Net unre	elated business taxable income from Form 990-1; (in 34 VFD).	· <u> </u>	. 7b	0		
			16	Prior '		Current Year		
ē			utions and grants (Part VIII, line 1h)	3	1467890	1179624		
盲		_	r service revenue (Fart VIII, line 29)	41713	78344			
Revenue	10	Investm	ent income (Part VIII, column (A), lines 3, 4 , and 7d)	<u> </u>	13542	15517		
4	11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8c (9c) and 11é) .T	57939	141556			
			enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12	<u> </u>	1581084	1415041		
	13	Grants a	and similar amounts paid (Part IX, column (A), lines 1-3)		0	0		
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		0	0		
ģ	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10) [1263329	1222001		
Se	16a	Professi	onal fundraising fees (Part IX, column (A), line 11e)		0	0		
Expenses	. b	Total fur	ndraising expenses (Part IX, column (D), line 25) ▶ 26786	5	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	î		
ũ	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		409022	370193		
			penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1672351	1592194		
	19		e less expenses. Subtract line 18 from line 12		-91267	-177153		
<u></u>	2			Beginning of	Current Year	End of Year		
ssets or	20	Total as	sets (Part X, line 16)		867046	679663		
Ass	21		bilities (Part X, line 26)		55548			
Net As	22		ets or fund balances. Subtract line 21 from line 20		811498			
	art II		ature Block	<u></u>				
_			jury, I declare that I have examined this return, including accompanying schedules and	etatements and to	the best of	my knowledge, and belief it is		
			plete Declaration of preparer (other than officer) is based on all information of which pro			my knowledge and belief, it to		
-		1	Adams Miller of lading		=11	2018		
Si	gn	Sig	inhiture of officer	 	Date ()	2010		
	ere		PERECEA MILLER LAPOINE. SXE		~	TOR		
• • •		Tvr	De or print name and title	curive "	121600	101C		
_		<u> </u>	Type preparer's name Preparer's signature	Date		PTIN		
	aid		- Jest Aller of Charles of Charle		Check	□ m !		
	repare			-l	self-em	hioleg		
U	se Oni	'y	name •		irm's EIN ▶			
1.4	a 4h a . !F		address >	F	hone no			
			ss this return with the preparer shown above? (see instructions) .		· · ·	Yes No		
Fo	r Paperv	vork Red	luction Act Notice, see the separate instructions.	Cat. No 11282Y		Form 990 (2017)		



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Form	990	(2017)	

Page 2

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: The Rocky Mountain Children's Law Center transforms the lives of abused, neglected and at-risk children through
	compassionate legal advocacy, cilnical services, education, and public policy reform
	policy reterm
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O
•	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	Services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 289018 including grants of \$ 0) (Revenue \$ 19005)
	Caregivers of Children at Risk. When children have consistent attachments to caring adults, they do better in school, form healthier
	relationships and have more positive developmental outcomes. Thousands of children in Colorado are living with grandparents,
	aunts, uncles, siblings, foster families and other non-relative caregivers because their parents are unable to provide them with a
	safe home The Children's Law Center Caregiver Advocacy Program assists nonparent caregivers in accessing resources and
	navigating the court system to promote security and stability in a child's life and remove obstacles to necessary health care and
	educational services
4b	(Code:) (Expenses \$ 283279 including grants of \$ 162427) (Revenue \$ 0)
	Children Exposed to Domestic Violence. Child victims exposed to domestic violence have greater rates of behavioral, social and
	emotional problems, cognitive delays, and long-term psychological effects The Children's Law Center Domestic Violence Program
	trains and oversees volunteer attorneys to provide guardian ad litem teams ensuring the best interests of each child when a case
	is filed in Denver's Civil Protection Order Court
	·
4c	(Code) (Expenses \$ 171817 including grants of \$ 70090) (Revenue \$ 0)
	Youth Empowerment: Oftentimes, despite good intentions, the child welfare system treats youth in its care as "outsiders" to the
	process The Children's Law Center Youth Empowerment Program facilitates a vibrant youth-led, peer-driven, grassroots advocacy
	group of young people, ages 15 to 25, who have previously experienced or are currently in foster care. Through empowering foster
	youth to be strong leaders, amplifying their voices to educate policymakers, and creating opportunities for connection and influence,
	these young people effect the foster care system at both the state and national levels
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 499494 including grants of \$ 17500) (Revenue \$ 59339)
4e	Total program service expenses ► 1243608

Form 990 (2017) Page 3 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 1 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 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 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a 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 c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e

12 a	Did the organization obtain	separate,	, independe	nt audited	d financial	statements fe	or the tax ye	ear? If "Yes,"	' complete
	Schedule D, Parts XI and X	H							
b	Was the organization incl	uded in c	onsolidated	. indeper	ndent auc	dited financial	statement	s for the tax	vear? If

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .

"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13

14 a Did the organization maintain an office, employees, or agents outside of the United States?

Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.

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)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

11f

12a

12b

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14a

14b

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Part IV	△ L L-U - 4		0 1 1 1 1 1 1
154: 14 M NY M	I DOCKHET	OT MODILING	SCHOOLINGS (CONTINUED)
	GIICCKIISL	oi negulieu	Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		_
LL	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d 25a		,
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		V
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		V
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		7
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	, ,	1 4d	1.64
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		V
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		v
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
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		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		V
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	v	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		For	_m 990	(2017)

Form 99	0 (2017)		,	age 5
Part	Charle if School do O contains a year and a great to great the last the Book V			
	Check it 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 14			- 1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	- 1	•`	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		\vdash
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 23			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		\vdash
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		,
b	If "Ves" enter the name of the foreign country.	70	_	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	- 1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		
-	gifts were not tax deductible?	6b		ļ
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a	~	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			
		7c		'
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	~
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1	-
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	 	+-
10	Section 501(c)(7) organizations. Enter:	East.	7,5	
а	Initiation fees and capital contributions included on Part VIII, line 12	4-40		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1 :		1.
11	Section 501(c)(12) organizations. Enter:	٠١.,	"	1
а	Gross income from members or shareholders	-	*.	,
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	 . ,		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	3 ~	1.5	1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	S. S. S. S.	3.5	37.0
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which	李		3
	the organization is licensed to issue qualified health plans	W. S	1	37.

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand

14a

14b

13c

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ons.
Section	on A. Governing Body and Management	<u>··</u>	 :	
<u>Decrit</u>	A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar	}		
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 11	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	1	~
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		/ _
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1		
	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during) 1	1	
	the year by the following:			
a	The governing body?	8a	V	
р	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		1	1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	<u> 9</u>	odo	
36011	on b. Policies (This decilon b requests information about policies not required by the internal Never	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	 	1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		 	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b)
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1	ł	
	describe in Schedule O how this was done	12c	_	
13	Did the organization have a written whistleblower policy?	13	~	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	~	ļ.,
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?		<u> </u> -	-
a	The organization's CEO, Executive Director, or top management official	15a		+
b	Other officers or key employees of the organization	15b	+	1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		1	
,,,,	with a taxable entity during the year?	16a	-	-
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100	+	+
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		1	j
	organization's exempt status with respect to such arrangements?	16b	1-	1
Sect	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires and 6104 requires an	n 501	(c)(3)	s only
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	polic	y, and
20	financial 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 re-	ecord	s: ▶	

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Form	200	mn.	17

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	in not any related	u orga	anıza			ompe	nsa	ted any curren	t officer, director	, or trustee.
(A)	(B)			(C Posi	-			(D)	(E)	(F)
Name and Title	Average hours per week (list any	box, office	not check more than of unless person is both er and a director/truste			is both or/trust	an ee)	J	(E) Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) James Markus										
Chair	4	1		~		1		0	o	<u> </u>
(2) Ashley E. Calhoun							Γ			
Director	2	'			ļ	1	1	0	o	(
(3) Kelly Condon				ļ			Γ			
Director	2	'						0	o	1
(4) Holly Hall-Perry										
Director	2	~	1	1	\)	Ì	0	0	
(5) Thomas W Henderson					1					
Director	2	~			Į.			0	0	
(6) Judy Laspada		T								
Director	2	\ \rightarrow \ \rightarrow \ \rightarrow \ \rightarrow \ \rightarrow \ \rightarrow \rightarrow \ \rightarrow \ \rightarrow \ \rightarrow \rightarrow \ \rightarrow \rightarrow \ \rightarrow \rightarrow \rightarrow \rightarrow \rightarrow \ \rightarrow \r				j		0	0	_
(7) Laura Love		T								
Director	2	1					ł	0	0	
(8) Anna Reinert							T			
Director	2				1		1	c	o	
(9) Ron Rizzuto, Ph D										
Director	2	1		1	1	1) o	0	1
(10) Henry Schloss					T	T				
Director	2	1					1	\ c	o	ļ
(11) Erika Whitmore										
Director	2	\ \		1	İ		1	c	o	
(12) Rebecca Miller Updike		Γ				T	Τ			
Executive Director	40	7		1	1		1	124098	s o	İ
(13) Randall Fons			1	T			1			
Deputy Executive Director	40	1		1		1		82917	· o	
(14)		+-	\top	†	1	T	1-	T	1	

	(A) Name and title	(B) Average hours per week (list any	box, office	ot che unless er and	s pei	ntion more rson irect	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation (related		Estin	nated	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-Mi		organ and r	nsatior i the ization elated zations	
(15)														
(16)						-				 				
(17)		<u> </u>			_	-					-			
(18)						-		-				 -		
			-			-		_			_			
(20)		†	-			-		-						
		 			_			_						
		<u> </u>			 	_	<u> </u>	L					-	
(22)		<u> </u>	<u> </u>											
(23)		ļ												
(24)			1											
(25)			<u> </u>	 	-		-			 				
1b	Sub-total			•	<u>. </u>	<u>. </u>	· ·	>	207015		_			
d d	Total from continuation sheets to Part Total (add lines 1b and 1c)	-				:		▶	207015	il				
2	Total number of individuals (including bureportable compensation from the organ	it not limite						e) v	vho received m	ore than \$10	00,000	of		
3	Did the organization list any former o employee on line 1a? If "Yes," complete							emį	ployee, or high	hest compe	nsated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations andividual	e sum of re	porta	ble	cor	npe	nsatio					4		1
5	Did any person listed on line 1a receive for services rendered to the organization									zation or ind		5		V
	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Re year.													ax
	(A) Name and business ad	dress							(B) Description of	services	C	(C) ompens	ation	
								+						
								#						
2	Total number of independent contract received more than \$100,000 of compen							o t	hose listed at	oove) who	mark to	, , , , , , , , , , , , , , , , , , ,		ر میری

Form 9	90 (2017	n						Page 9
Part	VIII	Statement of Reve						
	•	Chèck if Schedule O	contains a	response or note to	o any line in this (A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
Grants	1a b	Federated campaigns Membership dues		1a l		revenue		512-514
ا≱يج	C	Fundraising events .	[1c		,		
ns, Gi Simila	d e	Related organizations Government grants (cont	tributions)	1d 1e 231499	•			
Contributions, Gif and Other Similar	f	All other contributions, gift and similar amounts not incline	uded above	1f 948125				
Con	g h	Noncash contributions include Total. Add lines 1a-1f			1179624	- 1	*	
Program Service Revenue	2a	Program Income	••••	Business Code 541110	78344	78344		
vice R	c							
am Ser	d e						-	
Progr	f g	All other program serv Total. Add lines 2a-2f	! . <u></u>		78344			
	3	Investment income (and other similar amo		ividends, interest,	15517			15517
	4 5	Income from investment Royalties	of tax-exem	ot bond proceeds				
	6a	Gross rents	(i) Real	(ii) Personal	, s		``````````````````````````````````````	A
	b b	Less: rental expenses Rental income or (loss)			يو ده دم يو ده دم يو ده دم يو ده دم يو ده دم يو ده دم يو ده ده دم يو ده دم يو ده دم يو ده دم يو ده دم يو ده دم		- 37 - 37	
	d 7a	Net rental income or (Gross amount from sales of	loss) (i) Secunties			33 235	The state of the s	, , , ,
	ь	assets other than inventory Less: cost or other basis						
1	С	and sales expenses . Gain or (loss)						
	d	Net gain or (loss)			The said of the	Ye	5.175.51.51.51	11 Eq. 45 2 2 5
Other Revenue	8a	Gross income from fu events (not including \$						
her R		of contributions reported See Part IV, line 18		a 227674				
ŏ	b b	Less: direct expenses Net income or (loss) fi	rom fundrais	b 94393 sing events . ▶	133281	A CONTRACTOR OF THE PARTY OF TH	A STATE OF THE STA	133281
	9a	·					A A A A A A A A A A A A A A A A A A A	2.12
	b b	Less: direct expenses Net income or (loss) fi	rom gaming		A Section		1.7.	
	10a	Gross sales of in returns and allowance	-	ss a	1+ 2			
	b c	Less: cost of goods s Net income or (loss) fi			*, * , *	1 7 1		
		Miscellaneous R		Business Code				
	11a b	Miscellaneous Income			8275	8275		
	c d	All other revenue						
	e	Total. Add lines 11a-			8275	. 20 - 4 Pr &		
	12	Total revenue. See in			1415041	<u> </u>	***	148798

Part IX Statement of Functional Expenses

o no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(c) (c)	(D)
	, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants' and other assistance to domestic organizations and domestic governments. See Part IV, line 21			• 1/2 - 1	
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			1 11	
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	207015	157349	14497	3516
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	875975	688257	40561	14715
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	13361	11427	612	132
9	Other employee benefits	37132	29709	1591	583
10	Payroll taxes	88518	73131	3915	1147
11	Fees for services (non-employees):				
а	Management				
b	Legal [
C	Accounting	11595	6244	333	501
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		<u>`</u>	<u> </u>	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	101247	62489	3299	3545
12	Advertising and promotion				
13	Office expenses	14313	12165	574	157
14	Information technology	23111	19569	1220	232
15	Royalties				
16	Occupancy	96200	81770	5455	897
17	Travel	11359	10083	211	106
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	1560	1484	29	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	27623	23480		257
23	Insurance	16564	11043	4429	109
24	Other expenses. Itemize expenses not covered	, y , 2			*
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column	* 1			
	(A) amount, list line 24e expenses on Schedule O.)	S ₁ S			,
_	Client Costs	23359	23277	0	<u>- حرحانه و حمدا</u> ا
a b	Training Costs - Staff	17261	16993		20
C	Training Costs - Community	6902	4021	 	24
d	Bank Fees	3796	478		178
e	All other expenses	15303	10639	 	41!
25	Total functional expenses. Add lines 1 through 24e	1592194			2678
26	Joint costs. Complete this line only if the	13/2174	1273000	00,21	2010
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)			,	

Form 990 (2017) Page 11 Part X **Balance Sheet** Chèck if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Savings and temporary cash investments Pledges and grants receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. Inventories for sale or use Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b **b** Less: accumulated depreciation 10c Investments—publicly traded securities Investments—other securities. See Part IV, line 11 . Investments—program-related. See Part IV, line 11 . . . Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors. trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X **25** Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds .

Form 990 (2017)

		Pa	ge 12
	· ·	<u></u>	_ <u> </u>
			5041
			2194
			7153
_		81	1498
			0
		63	34345
			_
_	• •	· ·	
		Yes	No
		-	
	2a		~
	-		

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 2 Total expenses (must equal Part IX, column (A), line 25) 2 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 5 6 7 R 8 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990:
Cash Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . 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: Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis 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 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b Form 990 (2017)

Form 990 (2017)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** Rocky Mountain Children's Law Center 74-2406045 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3/% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts. grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 2367799 2464866 2457361 1467890 1179624 9937540 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 2367799 2457361 1467890 1179624 9937540 2464866 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 0 Public support. Subtract line 5 from line 4 9937540 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (e) 2017 (f) Total (c) 2015 (d) 2016 2367799 Amounts from line 4 2464866 2457361 1467890 1179624 9937540 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 19456 20803 683 13542 15517 70001 Net income from unrelated business activities, whether or not the business is regularly carried on 48010 48010 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 10055551 12 287787 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 98 83 % Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f) 14 Public support percentage from 2016 Schedule A, Part II, line 14 15 15 97.50 331/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here, Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	on A. Public Support				_ _		
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")			Ĭ,			
2	Gross receipts from admissions, merchandise			1			
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose			, i			
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		_	yl Li	·		
4	Tax revenues levied for the			1		1	
	organization's benefit and either paid to			4		ļ	
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the			1			ì
	organization without charge						
6	Total. Add lines 1 through 5		<u> </u>	<u> </u>	/	-	
7a	Amounts included on lines 1, 2, and 3					1	ļ
	received from disqualified persons .			<u> </u>		ļ	
b	Amounts included on lines 2 and 3				l	Į	
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					1	1
_		}		1 /1	 	 	}
С 8	Add lines 7a and 7b	ī-	,	1			+
•	line 6.)		· ,		, i		
Secti	on B. Total Support	<u> </u>		<u>l</u>	<u> </u>	<u> </u>	
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c)\2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		/				1
10a	Gross income from interest, dividends,			1			
	payments received on securities loans, rents,		/	,			
	royalties, and income from similar sources .		1	\\	1		<u> </u>
b	Unrelated business taxable income (less		/			1	
	section 511 taxes) from businesses	1	ľ	1	}		1
	acquired after June 30, 1975	/		<u> </u>	<u> </u>		
C	Add lines 10a and 10b						ļ
11	Net income from unrelated business				J		
	activities not included in line 10b, whether				5		:
	or not the business is regularly carried on	/	 	ļ	<u> </u>	 	
12	Other income. Do not include gain or	1 /	1		1\		
	loss from the sale of capital assets (Explain in Part VI.)	/		1	1		
13	Total support. (Add lines 9, 10c, 11,	\ /	 	 	 	 	 -
70	and 12.)	1 /		}	\		1
14	First five years. If the Form 990 is for t	he/organizatio	n's first, seco	nd, third, fourt	h. or fifth tax v	vear as a sect	ion 501(c)(3)
	organization, check this box and stop he						
Sect	ion C. Computation of Public Suppo			· · · · · · · · · · · · · · · · · · ·			
15	Public support percentage for 2017 (line	8, column (f) d	livided by line	13, column (f))		. 15	%
16	Public support percentage from 2016 Sc	hedule A, Part	III, line 15 .			. \16	%
Sect	ion D. Computation of Investment Ir						
17	Investment income percentage for 2017					. 17	%
18	Investment income percentage from 201					. 18	%
19a							
	17 is not more than 331/3%, check this/box		_				
b	• • • • • • • • • • • • • • • • • • • •						
	line 18 is not more than 331/3%, check this	=	_	•	•		
20	Private foundation. If the organization of	iid not check a	box on line 1	4. 19a. or 19b.	check this bo	x and see inst	ructions 🕨 🗌

Part IV Supporting Organizations

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

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part I	art V.			
Secti	on A. All Supporting Organizations				
_			Yes	No	
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by				
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1			
2	Did the organization have any supported organization that does not have an IRS determination of status			<u> </u>	
-	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	1		1 1	
	organization was described in section 509(a)(1) or (2).	2		ļ	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer				
	(b) and (c) below.	3a			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and				
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the				
	organization made the determination.	3b		ļ	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)				
40	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If	3c		 -	
4a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4			
b		4a	<u>.</u>	 ,	
	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion				
	despite being controlled or supervised by or in connection with its supported organizations.				
С	Did the organization support any foreign supported organization that does not have an IRS determination	7.	٠	<u> </u>	
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	2,50	` .e.	1	
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	, ', ', '	***	·	
	purposes.	4c			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	1.3	灣	3	
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN				
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (ii) the authority under the organization's organizing document authorizing such action; and (iv) how the action	1		.	
	was accomplished (such as by amendment to the organizing document).	·	27.	-	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a	/ T.,,;	 	
	designated in the organization's organizing document?	5b		-	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	 	\dagger	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		13.6	 	
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	3		1	
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00	4		
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		32.4		
•	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	 	 	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7 55	Y #2	-	
0-		8	1.5	 	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described				
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	ļ	-	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	34	5	+	
-	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b]	-	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	250		 	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	J	1	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	138	3,	1-	
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			ř *,	
	supporting organizations)? If "Yes," answer 10b below.	10a	L_		
h	Did the organization have any excess business holdings in the tay year? (Use Schedule C. Form 4720 to	3000	e	1	

determine whether the organization had excess business holdings.)

10b

Part I	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	.]]	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations		1	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			ļ
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	,	1.3	Į
	controlled the organization's activities. If the organization had more than one supported organization,	-	_	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	(ĺ	
	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	_		1
	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	L	L
Section	on C. Type II Supporting Organizations		1	- -
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		,	
	the supported organization(s).	1	 	
Section	on D. All Type III Supporting Organizations		·	L
			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	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 in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	\	_	
	supported organizations played in this regard.	3	<u> </u>	L
Secti	on 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	inst r u	ıction	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	,		4'1
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see II	ารเกนด	uons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1		1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	}	}	
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined	1		1
	that these activities constituted substantially all of its activities.	2a		-
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	28	+	+
IJ	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		1	
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	'
	activities but for the organization's involvement.	2b	-	-
3	Parent of Supported Organizations. Answer (a) and (b) below.			T :
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1		
	trustees of each of the supported organizations? Provide details in Part VI.	3a	1	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-	_	-
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	36	· I	1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	trus izati	st on Nov. 20, 1970 (explair ons must complete Section	in Part VI). See ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	_	
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
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):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		- 70 - 45 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	· · · · · · · · · · · · · · · · · · ·	
2 Enter 85% of line 1.	2	The same of the sa	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	1000 ATT 1000 TO THE REAL PROPERTY.	
4 Enter greater of line 2 or line 3.	4	2. 16 型 C. 17 20 10 10 10 10 10 10 10 10 10 10 10 10 10	
5 Income tax imposed in prior year	5	The state of the state of	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	6	m' m	
emergency temporary reduction (see instructions).	1 -	Annual and Transport	L
7 Check here if the current year is the organization's first as a non-functional instructions).	ııy ın	regrated Type III supporting	g organization (see

Part		Supporting Organiz	ations (continued)	
	on D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish e			
	Amounts paid to perform activity that directly furthers exer organizations, in excess of income from activity	mpt purposes of suppor	ted	
	Administrative expenses paid to accomplish exempt purpo			
	Amounts paid to acquire exempt-use assets	ээээ э. өнрролон өлди.	112410110	
	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resi	nonsive	
•	(provide details in Part VI). See instructions.	Taro organization to roo	portare o	
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		· · · · · · · · · · · · · · · · · · ·	
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017	¥40.	A	, ", , , , , , , , , , , , , , , , , ,
а				
b	From 2013	The State of	张考、数学的 " 。"	128-326- 120-
С	From 2014	2 - 4 - 1 - 4 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	ر الله الله الله الله الله الله الله الل	
d	From 2015			4 / 4
е	From 2016		and add	4 44
f	Total of lines 3a through e		A PART OF THE PART	1947 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
g	Applied to underdistributions of prior years	the tendence		- /
h	Applied to 2017 distributable amount	しょう とかない	The state of the s	
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3ı from 3f.		\$4 205 L	Some to the second of the second
4	Distributions for 2017 from		总经验的 。 76%	
	Section D, line 7:		2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
a	Applied to underdistributions of prior years			* * * * * * * * * * * * * * * * * * * *
b	Applied to 2017 distributable amount	4 * 4 * 4 * 4 * 4 * 4 * 4 * 4 * 4 * 4 *	<u> </u>	
С	Remainder. Subtract lines 4a and 4b from 4.		, + 	<u>ــ ــــــ کې د - د د ها</u>
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.	The second of th		<u> </u>
6	Remaining underdistributions for 2017. Subtract lines 3h		the state of	
_	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:	2 12 640	· · · · · · · · · · · · · · · · · · ·	7 12/1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
a	Excess from 2013	- Terreson to	A Thomas of the state of the st	Sandary - 1 -
<u>_</u>	Excess from 2014		Mary Control of the C	<u> </u>
<u>_</u>	Excess from 2015		adit sadit title i i i i i se	10 ² 1 1 2 2 2 5
d	Excess from 2016	1000年代	the second second second	
<u>u</u>	Excess from 2017	** *** ****		
	LAUGGG HUIT ZUTT		1 2 2 2 2 2 2 2	<u></u>

Part VI	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 D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

	the organization		Employer identification number
	Mountain Children's Law Center		74-2406045
Part			
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year) .		
	Aggregate value at end of year		<u> </u>
	Did the organization inform all donors and donor funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene conferring impermissible private benefit?	and donor advisors in writing that gra	nt funds can be used for any other purpose
Part			
	Complete if the organization answered		·
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recrea	· <u>—</u>	• •
	Protection of natural habitat	☐ Preservation o	of a certified historic structure
2	 Preservation of open space Complete lines 2a through 2d if the organization h 	ald a gualified concentation contributi	ion in the form of a consequation
2	easement on the last day of the tax year.	leid a quaimed conservation contributi	Held at the End of the Tax Year
а			<u></u>
b	Total acreage restricted by conservation easemen		
c	Number of conservation easements on a certified		——————————————————————————————————————
d	Number of conservation easements included in		
_			l l
3	Number of conservation easements modified, trar	nsferred, released, extinguished, or ter	
	tax year ►		
4	Number of states where property subject to conse	ervation easement is located	
5	Does the organization have a written policy re-		
	violations, and enforcement of the conservation e	asements it holds?	· · · · · ·
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecti	ing handling of violations, and enforcing	conservation easements during the year
•	►\$	ing, nationing of violations, and emorcing	g conservation easements during the year
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements of	of section 170(h)(4)(B)(i)
_	•		
9	In Part XIII, describe how the organization reports	conservation easements in its revenu	-
	balance sheet, and include, if applicable, the text		•
	organization's accounting for conservation easen	nents.	
Par			
	Complete if the organization answered		
1a	If the organization elected, as permitted under S		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under works of art, historical treasures, or other similar public service, provide the following amounts rela-	ar assets held for public exhibition, eating to these items:	education, or research in furtherance of
	(i) Revenue included on Form 990, Part VIII, line	1	> \$_
	(i) Revenue included on Form 990, Part VIII, line (ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of all following amounts required to be reported under	rt, historical treasures, or other simil	ar assets for financial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1		▶ \$_
b	Assets included in Form 990, Part X	<u> </u>	> \$

Part	III Organizations Maintaining	Collections of A	Art, Histo	orical Tr	easures,	or Oth	er Similar As	sets (cor	ntinued)
3	Using the organization's acquisition, a collection items (check all that apply):								
а	☐ Public exhibition		d [] Loan c	r exchange	progra	ams		
b	Scholarly research		e [Other					
С	□ Preservation for future generations								
4	Provide a description of the organizati XIII.	ion's collections a	nd explai	n how the	ey further t	he orga	anization's exe	mpt purpo	se in Part
5	During the year, did the organization assets to be sold to raise funds rather							_	s 🗌 No
Part				-			·		<u> </u>
	Complete if the organization 990, Part X, line 21.	answered "Yes"	on Forn	n 990, Pa	art IV, line	9, or r	reported an ar	mount on	Form
1a	Is the organization an agent, trustee, included on Form 990, Part X?								s 🗆 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the foll	owing tal	ble:	_		Amount	
•	Poginning halange					4-	 	Amount	
q C	Beginning balance					1c 1d			
d	Distributions during the year					10 1e	·		
e f	Ending balance					1f			
2a	Did the organization include an amour						account liabilit	.a 🗖 🗸	
	If "Yes," explain the arrangement in Pa							•	
Pari		art Alli. Check fiere	e ii trie ex	piariation	nas been	orovide	d on Part Alli.	····	
CIL	Complete if the organization	answered "Vec"	' on Form	n 000 D	art IV line	10			
	Complete ii trie organization	(a) Current year	(b) Prio		(c) Two years		(d) Three years ba	ck (e) Four	years back
1a	Beginning of year balance	(a) canoni you	(2) / 110	, year	(0) 1110 your	J Duoix	(a) Tilloo youro ou	UN (C) 1 CUI	yours back
b	Contributions						·		
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	•	id balance	e (line 1g,	, column (a)) held a	as:		
а	Board designated or quasi-endowment	nt ▶	_%						
b	Permanent endowment ▶	<u></u> %							
C	Temporarily restricted endowment ▶	<u></u> %							
	The percentages on lines 2a, 2b, and								
За	Are there endowment funds not in the	e possession of th	ne organiz	ation tha	t are held	and ad	ministered for	the	
	organization by:								Yes No
	(i) unrelated organizations							. 3a(i)	
	(ii) related organizations							. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related of	•	•					. 3b	
4	Describe in Part XIII the intended uses		on's endo	wment fu	ınds.				
Par	, , ,								
	Complete if the organization	n answered "Yes	on For	m 990, F	Part IV, line	<u> 11a.</u>	See Form 990	D, Part X,	line 10.
	Description of property	(a) Cost or of (investment)			r other basis ther)		Accumulated epreciation	(d) Boo	ok value
1a	Land					*_*,	1821 32 2		
b	Buildings								
c	Leasehold improvements				13135		12986		149
d	Equipment				75929		46334		29595
е	Other	•			112229		112152		77
Total.	Add lines 1a through 1e. (Column (d) I	must equal Form 9	90, Part)	(, column	(B), line 10)c.) .	▶		29821

Part VII	Investments—Other Securities		- 000	. Dant IV line s	14b O F	OOO Dad V II do
	Complete if the organization ans (a) Description of security or category			Book value		
	(including name of security)		(0)	Book value		od of valuation: of-year market value
(1) Financial	derivatives					
(2) Closely-h	eld equity interests	[····
(3) Other				`		
(A)						
(B)						
(C)						
(D) (E)						
(E) (F)						
(G)						
(H)	·			-	-	
	o) must equal Form 990, Part X, col. (B) line 12.)			-		
Part VIII	Investments - Program Relate	d.			<u> </u>	<u> </u>
	Complete if the organization ans		n 990), Part IV. line	11c. See Form	990. Part X. line 13.
	(a) Description of investment			Book value		hod of valuation:
					Cost or end-	of-year market value
_(1)						
(2)						
(3)						
(4)	9-2-2-1					
_(5)						
_(6)						
		-				
(8)						
(9)	b) must equal Form 990, Part X, col. (B) line 13)					
Part IX	Other Assets.					
r are in	Complete if the organization ans	swered "Yes" on Forr	n 99) Part IV line	11d See Form	990 Part Y line 15
		(a) Description		5,1 41114, 11116	Tra. Occ Form	(b) Book value
(1)		<u> </u>				
(2)						
(3)						<u> </u>
(4)					1.1	
(5)				·		
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, o	col. (B) line 15.)	•		<u> ▶</u>	
Part X	Other Liabilities.					
	Complete if the organization and line 25.	swered "Yes" on For	n 99	0, Part IV, line	11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value				
	ncome taxes				Late Bank of	For war war and the
	Lease Obligation	1	4266	الم ورايع المرابع		
	unds Held in Trust		2043	WE WILL		
(4)						A Control of the
(5)						
(6)		 				
(7)	·					
(8)						
(9)	h) must oqual Form 000. Dark V and (D) II-a 051 h		/655			
	b) must equal Form 990, Part X, col. (B) line 25.)		6309	No. 10 To September 1	Charles of the St.	William Control of the Control of th

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part				Return.	
	Complete if the organization answered "Yes" on Form 990,				1//0/00
1	Total revenue, gains, and other support per audited financial statements	• •		1	1669690
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	المما			
a	Net unrealized gains (losses) on investments	2a 2b	254649		
b	Recoveries of prior year grants	20 2c	254649		
G	Other (Describe in Part XIII.)	2d			
d e	Add lines 2a through 2d		- 0	2e	254649
3	Subtract line 2e from line 1			3	1415041
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i .		3	1413041
a	Investment expenses not included on Form 990, Part VIII, line 7b.	4a	0		
b	Other (Describe in Part XIII.)		0		
C	Add lines 4a and 4b		<u> </u>	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	1415041
Part					
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	1846843
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-	
a	Donated services and use of facilities	2a	254649		
b	Prior year adjustments		0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII.)		0		
е	Add lines 2a through 2d			2e	254649
3	Subtract line 2e from line 1			3	1592194
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)		0	1 1	
С	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, li	ne 18.)		5	1592194
2; Pa	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to pro	ovide any additional in	formation.	
					
					<i></i>
					·

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Name of the organization	► Go to www	/.irs.gov/Forms	90 for the la	test instructions.	Employer identific	Inspection	
Rocky Mountain Children's Law Center)	2406045	
Part I Fundraising Activities.				vered "Yes" on F	orm 990, Part IV,	line 17.	
Form 990-EZ filers are i							
<u>=</u>	ne	e L					
c Phone solicitations	b ☐ Internet and email solicitations f ☐ Solicitation of government grants c ☐ Phone solicitations g ☐ Special fundraising events						
d In-person solicitations		3 —					
2a Did the organization have a wri	itten or oral agre	ement with	any individ	lual (including offic	cers, directors, trust	tees,	
or key employees listed in Forn							
b If "Yes," list the 10 highest paid compensated at least \$5,000 b			Iraisers) pu	ursuant to agreem	ents under which th	ne fundraiser is to be	
compensated at least \$5,000 b	y trie organizatio	Jri.					
	T	T		<u> </u>	(v) Amount paid to	T	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody or control of (iv) Gross receipts			(or retained by) fundraiser listed in	(vi) Amount paid to (or retained by)	
or oracly (randialsor)		contrib	utions?	from activity	col (i)	organization	
		Yes	No				
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8			ľ				
9		 	<u> </u>	1			
				<u> </u>			
10							
			<u> </u>	<u> </u>			
Total				Ì			
3 List all states in which the org				solicit contribution	ns or has been notif	fied it is exempt from	
registration or licensing.	, ,					•	
						·····	
·		••••					
			·				

	,	(a) Event #1 Fundraising Events	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col (c))
1	Gross receipts	227674			227674
2	Less: Contributions				
3	Gross income (line 1 minus line 2)	227674			22767
4	Cash prizes				
5	Noncash prizes				
6 7 8	Rent/facility costs				
7	Food and beverages				
8	Entertainment				
9	Other direct expenses .	94393			9439
10	Direct expense summary. Ac Net income summary. Subtr	id lines 4 through 9 in co act line 10 from line 3. co	olumn (d)		9439
					13320
art III	Gaming. Complete if the	e organization answer	ed "Yes" on Form 99	90, Part IV, line 19, or	
art III	Gaming. Complete if the than \$15,000 on Form 9	e organization answer	ed "Yes" on Form 99 (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	
art III	Gaming. Complete if the	e organization answer 90-EZ, line 6a.	ed "Yes" on Form 99 (b) Pull tabs/instant	90, Part IV, line 19, or	reported more (d) Total gaming (add
art III	Gaming. Complete if the than \$15,000 on Form 9	e organization answer 90-EZ, line 6a.	ed "Yes" on Form 99 (b) Pull tabs/instant	90, Part IV, line 19, or	reported more (d) Total gaming (add
art III	Gaming. Complete if the than \$15,000 on Form 9	e organization answer 90-EZ, line 6a.	ed "Yes" on Form 99 (b) Pull tabs/instant	90, Part IV, line 19, or	reported more (d) Total gaming (add
1 2 3 4	Gaming. Complete if the than \$15,000 on Form 9 Gross revenue	e organization answer 90-EZ, line 6a.	ed "Yes" on Form 99 (b) Pull tabs/instant	90, Part IV, line 19, or	reported more (d) Total gaming (add
1 2 3 4	Gaming. Complete if the than \$15,000 on Form 9 Gross revenue	e organization answer 90-EZ, line 6a. (a) Bingo	ed "Yes" on Form 99 (b) Pull tabs/instant bingo/progressive bingo	90, Part IV, line 19, or (c) Other gaming	reported more (d) Total gaming (add
1 2 3 4	Gaming. Complete if the than \$15,000 on Form 9 Gross revenue Cash prizes Noncash prizes Rent/facility costs	e organization answer 90-EZ, line 6a.	ed "Yes" on Form 99 (b) Pull tabs/instant	(c) Other gaming	reported more (d) Total gaming (add
1 2 3 4 5	Gaming. Complete if the than \$15,000 on Form 9 Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	e organization answer 90-EZ, line 6a. (a) Bingo Yes% No	ed "Yes" on Form 99 (b) Pull tabs/instant bingo/progressive bingo Yes% No	(c) Other gaming	reported more (d) Total gaming (add
1 2 3 5 6	Gaming. Complete if the than \$15,000 on Form 9 Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	e organization answer 90-EZ, line 6a. (a) Bingo Yes% No dd lines 2 through 5 in co	(b) Pull tabs/instant bingo/progressive bingo Yes% No	O, Part IV, line 19, or (c) Other gaming Yes% No	reported more (d) Total gaming (add
1 2 3 4 5 6 7 8 9 E a Is	Gaming. Complete if the than \$15,000 on Form 9 Gross revenue	Yes % No dd lines 2 through 5 in cory. Subtract line 7 from li	(b) Pull tabs/instant bingo/progressive bingo Yes % No Polumn (d)	(c) Other gaming Yes % No	reported more (d) Total gaming (add col. (a) through col (c))

chedul	e G (Form 990 or 990-EZ) 2017 Page 3
11 12	Does the organization conduct gaming activities with nonmembers?
13 a b 14	Indicate the percentage of gaming activity conducted in: The organization's facility
	Name ►
	Address►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
	Name ▶
	Address►
16	Gaming manager information:
	Name ►
	Gaming manager compensation ▶ \$
	Description of services provided ►
	☐ Director/officer ☐ Employee ☐ Independent contractor
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
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 ▶ \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Rocky Mountain Children's Law Center 74-2406045 Form 990, Part I, Line 6 The Children's Law Center also received considerable donated professional services during 2017. Donated legal services were valued at \$232,500, and other professional services were valued at \$22,149 Form 990, Part III, Line 2 The Children's Law Center implemented Youth Empowerment, Trauma-Informed Yoga and Therpeutic Gardening for Children at Risk programs during 2017. (see Form 990 Part III, and below re: Part III Line 4d, for program details) Form 990, Part III, Line 4d - Education Needs of Children at Risk. Children who experience abuse, neglect, poverty or instability often struggle with emotional and behavioral challenges that can make it difficult to succeed in school School disciplinary policies relying primarily on suspensions, expulsions and police involvement increase the likelihood that kids needing help will enter the criminal justice system. Additionally, children who enter the foster care system often experience disruption to their interpersonal connections and educational progress. The Children's Law Center Education Program advocates for the needs of these children both individually and collectively - Trauma-Informed Yoga. Studies reveal that yoga can be a powerful component in the effective and long-term healing of trauma. Through yoga, children have the freedom and authority to reclaim control of their bodies, as well as their experiences The Children's Law Center Bloom Yoga Program helps to facilitate healing and health for children, youth and families - Therapeutic Gardening for Children at Risk: A growing body of academic research supports the value of trauma-informed therapeutic gardening as a protective support in the lives of children. The Children's Law Center Dandelion Project offers therapeutic support in a nature-based non-traditional setting, as well as cultivating "life skills" such as following directions and developing accountability - Innovation and Systemic Reform The Children's Law Center is at the forefront of improving options and outcomes related to children and families in the state of Colorado. The Organization has been diligent in identifying existing systemic gaps, exploring and incubating solutions, working both inside and outside of the court system to raise awareness and to influence public policy, and partnering with other visionaries and leaders working on behalf of children and youth All Children's Law Center programs take a multifaceted approach, drawing on the diverse legal and clinical expertise of it's staff and

Cat No. 51056K

Schedule O (Form 990 or 990-EZ) (2017)

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

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
Rocky Mountain Children's Law Center	74-2406045
community partners. Children's Law Center programs are also active in numerous community education	ınıtıatives Organization
professionals provide hundreds of hours of training annually to community groups, educators, human ser	rvice providers, attorneys,
legislators, judges and magistrates, and court appointed special advocates	
Form 990, Part VI, Line 12c	
All personnel, board members and significant contractors are required to complete a conflict of interest st	tatement annually
Form 990, Part VI, Line 15a	
Upon initial hire, and in alignment with potential salary increases, executive compensation is recommended	ed by the governing body's
executive committee and approved by the full board. The Executive Committee reviews and compares sal	laries to industry norms and in
relation to responsibilities and compentencies.	
Form 990, Part VI, Line 19	
Governing documents, policies and financial statements are made available upon request	·