Form **990** 

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

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.

Dep	artment o nal Rever	if the Treasury nue Service	► Go to www.ir	s.gov/Form990 for ins	tructions and th	ne latest	informatio	n.	Inspecti	ion
A		2018 cale	-	, 20						
В	Check if	applicable	C Name of organization Rocky N	Mountain Children's La	w Center			D Employe	er identification nu	mber
$\overline{\Box}$		change	Doing business as	TOURIST OF THE PERSON OF THE P	··· Goillo				74-2406045	
$\overline{\Box}$	Name cl		Number and street (or P O box	uite	E Telephor					
$\overline{\Box}$	Initial ref	-	1325 S Colorado Blvd				701		303-692-1165	
$\overline{\Box}$		ırn/terminated	<u> </u>	country, and ZIP or foreign	postal code		701		303-032-1103	
$\Box$		ed return	Denver, CO 80222	,,	•			<b>G</b> Gross re	ceints \$	
$\overline{\Box}$			F Name and address of principal o	officer Rebecca Miller	Undike		H(a) Is this		subordinates? Yes	V No
_			1325 S Colorado Bivd, Ste 70		оражо	12	I .		s included? Yes	_
_	Tax-exe	mpt status	✓ 501(c)(3)		4947(a)(1) or	□ 52k			list (see instruction	
J	Website	•	s //childlawcenter org	(o) ( ) 4 (misere no)	1 4347 (a)(1) OF	<u> </u>	<del>-</del>	oup exemption	•	·
K				ociation	L Yea	ar of forma			of legal domicile	СО
_	art I	Summ			1		13	05   111 01010	or regar dominant	
	1		escribe the organization's m	ussion or most signif	cant activities	The R	ocky Mour	taın Childrei	n's Law Center	
ø			is the lives of abused, neglec	<del>-</del>				• • • • • • • • • • • • • • • • • • • •		
au			education, and public policy		muna 100mm	9990.99		ne regulado.		
Governance	2		is box ▶☐ if the organization		perations gradi	pesed	of_more-tk	an,25% of	its net assets	
õ	3		of voting members of the go			CEN	ÆD .	. 3		14
æ	4		of independent voting mem			line'1b)	7	0 4	-	14
ijes	5		nber of individuals employe	•	・ コンツァ しょふく	1/0 - 1	2010	5 5		18
Activities &	6				1441			1		110
Ac	7a	Total unre	nber of volunteers (estimate elated business revenue fro ated business taxable incor	m Part VIII, column (	C), line 12	75.		7a		0
	b	Net unrel	ated business taxable incor	me from Form 990-T	, lifte-38 OGI	REN,	UT.	7b		0
			-		•	T	Pho	Year	Current Yea	ar
ø	8	Contribut	tions and grants (Part VIII, lii		1179624		1127388			
a a	9	Program	service revenue (Part VIII, li	ne 2g)		[		78344		81810
Revenue	10	Investme	nt income (Part VIII, column	n (A), lines 3, 4, and 7	d) .	. [		15517		553
ш	11	Other rev	renue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10	Oc, and 11e) .	[		141556		250649
	12	Total reve	enue-add lines 8 through 1	1 (must equal Part VII	l, column (A), Iır	ne 12)		1415041		1460400
	13	Grants ar	nd similar amounts paid (Pa	rt IX, column (A), line	s 1-3) .	[		0		0
	14	Benefits	paid to or for members (Par	t IX, column (A), line	4)	[		o		_ 0
es	15		other compensation, employe	· · · · · · · · · · · · · · · · · · ·		5–10) [		1222001		1099553
Expenses	16a	Profession	onal fundraising fees (Part IX	(, column (A), line 11	e) .	[		0		0
ă	b		draising expenses (Part IX, o	, ,	*					
ш	17	-	oenses (Part IX, column (A),		•	. [		370193		344263
	18		enses. Add lines 13-17 (mu	•		i) [		1592194		<u>1443816</u>
	19	Revenue	less expenses Subtract lin	e 18 from line 12 .	· · · · · ·			-177153		16584
S or		<b>~</b>	. (5 ) . ( )			-	Beginning of	Current Year	End of Yea	r
Sset	20		ets (Part X, line 16) .				<del></del>	679663		714132
Net Assets Fund Balanc	21		ilities (Part X, line 26)			· ·		45318		63203
			ts or fund balances. Subtrac	ct line 21 from line 20	) . <u>.</u> .	• •		634345		650929
	art II		ture Block	<del></del>						
tru	aer pena e. correc	aities of perju ct. and compl	ry, I declare that I have examined the A Declaration of preparer (other t	nis return, including accom han officer) is based on all	ipanying schedules information of whic	s and state ch prepare	ments, and t r has any kn	to the best of m Owledge	ny knowledge and l	oelief, it is
			habelee mi	14 1101	<i>L</i> )			111	- 10	
Sig	ın	Sign	ature of officer	ruc upau	My			Date - 14	· / · /	
He			PBECCA MILLER	2 LIPTIKE	,	VE	UTIVE	- n 0	F/ 500	
		<b>   </b>	or print name and title	- WALKE		NEL	<u> </u>		-BC) (NC	
_		<u> </u>	pe preparer's name	Preparer's signature		D	ate		PTIN	
Pa			•					Check L self-emp	<b>」</b>	
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US	e On	עי 💳	ddress ▶					hone no		
Ma	y the If		s this return with the prepare	er shown above? (se	e instructions)			none no	Tes	No
			ction Act Notice, see the sep	<del></del>		Cat N	No 11282Y	<u> </u>		90 (2018)

•	
Form 990	A PAGE
Part I	
1	Check if Schedule O contains a response or note to any line in this Part III
	The Rocky Mountain Children's Law Center transforms the lives of abused, neglected and at-risk children and youth through
	compassionate legal advocacy, clinical services, education, and public policy reform
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
	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.
	(Code:) (Expenses \$ 264424 including grants of \$ 0) (Revenue \$ 312)
	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 quardian ad litem teams ensuring the best interests of each child when a case is filed in Denver's Civil Protection Order Court.
	(Code ) (Expanse)
	(Code. ) (Expenses \$ 259134 including grants of \$ 0 ) (Revenue \$ 31584 ) Caregivers of Children at Risk When children have healthy and reliable 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 non-parent caregivers in accessing
	resources and navigating the court system to promote security and stability in a child's life and to remove obstacles to necessary
	health care and educational services
	(0.1
4c	(Code: ) (Expenses \$ 151491 including grants of \$ 0) (Revenue \$ 0)  Youth Empowerment Oftentimes, despite good intentions, the child welfare system treats youth in 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 teens and young adults 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 caer system at both the state and national levels

0) (Revenue \$

1154901

49914)

4d Other program services (Describe in Schedule O.) (Expenses \$ 479852 including grants of \$

Total program service expenses ▶



Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	<del> </del> -
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C. Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<i>'</i>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<b>√</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<b>√</b>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<b>√</b>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	,	1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	/
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		<b>✓</b>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<b>√</b>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	1	
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		<b>✓</b>
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	-	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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		1
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		1
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		1
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		1
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
	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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓、
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>-</b>
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		✓
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>✓</b>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	✓	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	•		
4	Fatastha annahan yang dadi a Day 0 at Faras 4000 Fatas 0 at ant and lastic		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		× ~.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	Enter the number of employees reported as Form W.2. Transmitted of Ware and Tay		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
<b>L</b>	Statements, filed for the calendar year ending with or within the year covered by this return  2a 18	<u>.</u> .		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<b>✓</b>	<b></b>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	20		7-
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O .	3a 3b	_	<b>✓</b>
	- · · · · · · · · · · · · · · · · · · ·	SU		
1a	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		1
b	If "Yes," enter the name of the foreign country.			<u> </u>
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	·		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	1
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		-	-
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		_	_
	and services provided to the payor?	7a	1	_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<b>✓</b>	
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			ŀ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		-	-
•	sponsoring organization have excess business holdings at any time during the year?	_8_		
9_	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
a	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a		
b 10	Section 501(c)(7) organizations. Enter	9b		
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			ŀ
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			ŀ
	the organization is licensed to issue qualified health plans			ŀ
C	Enter the amount of reserves on hand			ļ
11a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			_
	excess parachute payment(s) during the year?	15_	<u>.                                    </u>	<b>-</b>
40	If "Yes," see instructions and file Form 4720, Schedule N.	- :-		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<del></del>
	If "Yes," complete Form 4720, Schedule O.			

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in:	struct	ions
	Check if Schedule O contains a response or note to any line in this Part VI		<u>.</u>	. ⊻
Secti	on A. Governing Body and Management		Lv	Г
			Yes	No
1a	, , , ,	4		
	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 1	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7		
	any other officer, director, trustee, or key employee?	2		7
3	Did the organization delegate control over management duties customarily performed by or under the direct			
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		\ <u>'</u>
4 5	Did the organization make any significant changes to its governing documents since the prior rorm 950 was filed?  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	<b> </b>		
ra	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
_	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following.		_ ا	
а	The governing body?	8a	✓	<u>                                     </u>
b	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	9		/
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve		ode.	)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
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	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1		
40	describe in Schedule O how this was done	12c	_	
13	Did the organization have a written whistleblower policy?	13	<b>√</b>	
14		14	<b>-</b>	-
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?			
a	The organization's CEO, Executive Director, or top management official	15a	<b>✓</b>	ļ.,
b	Other officers or key employees of the organization	15b	ļ	<b>✓</b>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		١.	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		·
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure	1.55	<del></del> -	<u> </u>
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 (1024 or 1024-A if applicable), 990, and 990-	T (Sec	tion	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)	,		(3)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	polici	v. and
.5	financial statements available to the public during the tax year.			,, und
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	ecords	<b>&gt;</b>	
	Kristan Gantala, 1325 S Colorado Blud, Sto 701, Danvar, CO, 80222, 303-602-1165			

Form	aan	(2018)	

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . . . . . . . . . . . . .

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's 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 no	r any relate	d org	anız	atio	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
					C)					
(A)	(B)	(do n	ot ch		ition	e than o	ne	(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both	n an	Reportable	Reportable	Estimated
	hours per week (list any					or/trust		compensation from	compensation from related	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		1		✓				0	О	0
(2) Malcolm Aylett			Ì							
Director		✓		<u> </u>				0	0	0
(3) Kristen Blessman		ļ			ļ					
Director		<b>✓</b>						0	. 0	0
(4) Ashley Calhoun	ļ						١ .			
Director		<b>✓</b>						0	0	0
(5) Kelly Condon										
Director		✓						0	. 0	0
(6) Holly Hall-Perry	ļ			ł						1
Director	ļ	✓	ļ					0	0	0
(7) Sarah Haradon	ļ		ŀ							
Director		<b>✓</b>	_					0	0	0
(8) Tim Haycraft	ļ									
Director		<b>✓</b>						0	0	0
(9) Thomas Henderson		,	ļ							
Director		✓						0	0	0
(10) Laura Love	ļ									
Director		✓						0	0	0
(11) Anna Reinert	ļ	,								
Director		<b>✓</b>	L				<u> </u>	. 0	0	0
(12) Ron Rizzuto, Ph D		,								
Director (12)		✓						0	0	0
(13) Henry Schloss	ļ	,								
Director (44)		✓	_					0	0	0
(14) Erika Whitmore		,								
Director		✓						0	0	0

Part	Section A. Officers, Directors, Trus	tees, Key E	mploy	/ees		nd F C)	lighe	st C	ompensated E	mployees (	continu	ued)		
(A) Name and title		(B) Average hours per	box, ı	unles	eck s pe	rson	than o	n an Reportable		(E) Reportable compensation from		Esti	(F) mated	
		week (list any hours for related organizations below dotted line)	Individua or directo		a Officer		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N	elated othe anizations compen 1099-MISC) from organiz		ther ensation m the nization related	1
(15) F	Rebecca Miller Updike, Ph D				,									
	tive Director Randall Fons				✓			<u> </u>	123496	<u>'</u>	0			0
	y Executive Director	<del> </del>			1				83333		0			0
/4 7)	CACCOLING DIRECTOR								3335	<del></del>				
(18)				:										
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b	Sub-total				L	L	i	<b>&gt;</b>	206829		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)							<b>&gt;</b>	206 929		0			0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited					above	e) w	ho received m	ore than \$1	00,00	O of		
	· · · · · · · · · · · · · · · · · · ·												Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete								oloyee, or high 		nsated	d 		✓
4	For any individual listed on line 1a, is the organization and related organizations													
5	Individual		ompe	nsat	tion	 froi	m any	 un	 related organiz	 ation or ind	lividua	4 al		✓
	for services rendered to the organization on B. Independent Contractors									<del></del>	•	5		✓
1	Complete this table for your five highest	compensat	ed ind	dene	end	ent	contr	act	ors that receive	ed more tha	n \$10	0.000 of	:	
	compensation from the organization Repyear.													ЭX
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compens		
								<u> </u>						
								<u> </u>						
	Total number of independent contractor	ors (includii	ng bu	ıt n	ot	lımıt	ed to	th	nose listed abo	ove) who				
	received more than \$100,000 of compens									•				

Par	VIII	Statement of Revenue					_
		Check if Schedule O contains a	response or note to				· · · · · · · ·
		The second section is the second section of the second section in the second section is a second section of the		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Hevenue
} - 		mangangan di Selatan d Bangan di Selatan di S			oxempt function revenue	กลายการการ คยากคารการการการการการการการการการการการการกา	cyclinded from tay under sections 512-514
nts nts	1a		1a				
irai our	b	Membership dues	1b				
s, C	С	Fundraising events	1c				
Sift ar	d	Related organizations	1d				1
S, C	е	Government grants (contributions)	1e 248098				
in Si	f	All other contributions, gifts, grants,				•	- 1
E E		and similar amounts not included above	1f 879290				!
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1	f. \$				
မှာ လ	h	Total. Add lines 1a-1f		1127388			
		•	Business Code				
ven	2a	Program Income	541110	81810	81810		
8	b						
ÌĢ.	C						
Ser	d						
E	е						
Program Service Revenue	f	All other program service revenue					
<u>ة</u>	g		🕨	81810			
	3	Investment income (including d	lividends, interest,		i		
		and other similar amounts) .	· · • [	553			553
	4	Income from investment of tax-exem	pt bond proceeds ►	0			
	5	Royalties	<u> </u>	0			
		(i) Real	(ii) Personal				,
	6a	Gross rents .					7
	b	Less rental expenses					
	C	Rental income or (loss)					<u> </u>
	d	Net rental income or (loss)	<b>&gt;</b>	0			·
	7a	Gross amount from sales of (i) Securities	s (ii) Other				
		assets other than inventory			ľ		
	b	Less cost or other basis					
		and sales expenses					
	С	Gain or (loss)		-			
	d	Net gain or (loss)	· •	0			
<u>o</u>	0.0	Gross income from fundraising					
eune	8a	events (not including \$					1
ě		of contributions reported on line 1c)	.				\
ű.		See Part IV, line 18					'
Other Rev	h	Less: direct expenses	200001				
Ö		Net income or (loss) from fundrais	- 00000	240040			040040
		Gross income from gaming activities		210819			210819
	Į vu	See Part IV, line 19	1				'
	ь	Less direct expenses					'
	1	Net income or (loss) from gaming	12000	35605	<del></del>		25505
		Gross sales of inventory, le		33603	<del></del>		35605
		returns and allowances					
	ь	Less cost of goods sold	<del> </del>	ļ.			
	C	Net income or (loss) from sales of	<u> </u>	0			<del>-</del>
	<del></del>	Miscellaneous Revenue	Business Code				
	11a	Miscellaneous Income		4225	<del></del>		4225
	b			7223			4223
	C						
	d	All other revenue					<del>                                     </del>
	e	Total. Add lines 11a–11d		4225			<u> </u>
	12	Total revenue. See instructions	▶	1460400	81810		251202

Page 10 Form 990 (2018) Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees . . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes . . . . . Fees for services (non-employees) a Management . . . . . Legal . . . . . . . . . . ol Accounting . Lobbying . . . . . . . . . . . . . Professional fundraising services See Part IV, line 17 Investment management fees . . . f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion . . . . . Office expenses . . . . . Information technology . . Royalties . . . . . . . . n n Occupancy . Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Payments to affiliates Depreciation, depletion, and amortization Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Client Costs Community & Volunteer Costs 16<u>72</u> Staff Training Costs C d All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

		Check if Schedule O contains a response or note to any line in this Pa	rt X		🔲
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	162524	1	218178
	2	Savings and temporary cash investments	82553	-	205963
	3	Pledges and grants receivable, net	361675	<del> </del>	179743
	4	Accounts receivable, net	15025		37181
	5	Loans and other receivables from current and former officers, directors,	13023	Ė	37101
	-	trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
Į.	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			0
Assets	7	Notes and loans receivable, net	0		0
As	8	Inventories for sale or use	0		0
	9	Prepaid expenses and deferred charges		<u> </u>	
	10a	Land, buildings, and equipment, cost or	16582		16680
		other basis, Camplete Bart VI of Schodule D			
	ь	120330	29821	100	
	11				38239
	12	Investments—publicly traded securities  Investments—other securities See Part IV, line 11	11483 0	-	15299
	13	Investments—program-related See Part IV, line 11	0		0
	14	Intangible assets	0	_	0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	679663	_	2849
	17	Accounts payable and accrued expenses			714132
	18	Grants payable	29009		33142
	19	Deferred revenue	0		0
	20	Tax-exempt bond liabilities	0		0
i	21	Escrow or custodial account liability Complete Part IV of Schedule D .	0		0
S	22	Loans and other payables to current and former officers, directors,		21	0
Liabilities	~~	trustees, key employees, highest compensated employees, and	•		, 
Ε̈́		disqualified persons Complete Part II of Schedule L	0	22	
Lia	23	Secured mortgages and notes payable to unrelated third parties			0
	24	Unsecured notes and loans payable to unrelated third parties	0		0
	25	Other liabilities (including federal income tax, payables to related third	<u> </u>		<u> </u>
		parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	16309	25	30061
	26	Total liabilities. Add lines 17 through 25	45318		63203
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and	43310		03203
Ses		complete lines 27 through 29, and lines 33 and 34.			! 
au	27	Unrestricted net assets	584345	27	446729
3al	28	Temporarily restricted net assets	50000	-	204200
힏	29	Permanently restricted net assets	0		0
<u>ا</u> ج.		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
or I		complete lines 30 through 34.			ı
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0	30	0
šse	31	Paid-in or capital surplus, or land, building, or equipment fund	0		0
Ä	32	Retained earnings, endowment, accumulated income, or other funds.	0		0
Net	33	Total net assets or fund balances	634345		650929
	34	Total liabilities and net assets/fund balances	679663		714132
					Form <b>990</b> (2018)

_	-4	^
Page	- 1	7

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		· · · ·		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		14	60400
2	Total expenses (must equal Part IX, column (A), line 25)	2		14	43816
3	Revenue less expenses Subtract line 2 from line 1	3			16584
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4			<u> 34345</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	i			
	33, column (B))	10		6	5092 <u>9</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u>.</u>	<del> </del>	$\sqcup$
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other				'
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain i	n		1
	Schedule O.		تا		ا بر- ا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			+	<del>                                     </del>
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled o	or		
	reviewed on a separate basis, consolidated basis, or both		l		
L	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?		. 2b	7	
D	· · · · · · · · · · · · · · · · · · ·			<b>'   *</b>	<del>                                     </del>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both	a 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 ov	oroiol		-	
С	of the audit, review, or compilation of its financial statements and selection of an independent accou				
	If the organization changed either its oversight process or selection process during the tax year, ex			<del>  '</del> -	<del>                                     </del>
	Schedule O.	piaiii	"'		;
32	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth :	n	,	,
Ja	the Single Audit Act and OMB Circular A-133?		". 3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao th	-	<u> </u>	Ė
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at		3b	,	1
			F	rm 990	(2018)

### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

OMB No 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number Name of the organization Rocky Mountain Children's Law Center 74-2406045 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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). 2 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). 7 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.) 8 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). 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 b 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) d 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 (in FIN (iii) Type of organization (iv) Is the organization (v) Amount of monetan (vi) Amount of (described on lines 1-10 listed in your governing other support (see support (see above (see instructions)) document? instructions) instructions) Yes No (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	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2464866	2457361	1467890	1179624	1127388	8697129
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2464866	2457361	1467890	1179624	1127388	8697129
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			٠			
^	· · · · · · · · · · · · · · · · · · ·						0,07120
6 Sacti	Public support. Subtract line 5 from line 4 on B. Total Support						8697129
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2464866	2457361	1467890	1179624	1127388	8697129
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	20803	683	13542	15517	553	51098
9	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				-		8796237
12	Gross receipts from related activities, etc.	-				12	287793
13	First five years. If the Form 990 is for the	•			· •		
	organization, check this box and stop her					· · · · ·	▶ 🗆
	on C. Computation of Public Suppor					1	
14						14	98 87 %
15	Public support percentage from 2017 Sch 331/3% support test—2018. If the organi					15	98 83 %
16a	box and <b>stop here.</b> The organization qual						
b	331/3% support test—2017. If the organi	=	• • •	-			_
	this box and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances test—20	-		_			_
,,,	10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts facts-and-circ	-and-circumsta umstances" te	ances" test, ch est. The organia	eck this box a zation qualifies	and <b>stop here.</b> s as a publicly	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	ation meets the meets the "fact	e "facts-and-d ts-and-circums 	circumstances' stances" test	' test, check ' The organizati	this box and son qualifies as	stop here. a publicly •
18	<b>Private foundation.</b> If the organization di instructions						

Part				, ,, ,			/
	(Complete only if you checked th						inder Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.) <u>/</u>	<u>-</u>
	on A. Public Support				T 77		
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise				ļ	/	
2	sold or services performed, or facilities					ľ	
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose				<del>                                     </del>		-
3	Gross receipts from activities that are not an unrelated trade or business under section 513				/		
					<del> /</del>		
4	Tax revenues levied for the				/		
	organization's benefit and either paid to				/		
	or expended on its behalf			. "	/		
5	The value of services or facilities			/	1		
	furnished by a governmental unit to the					ĺ	
	organization without charge						
6	Total. Add lines 1 through 5					<u> </u>	
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3			/			
	received from other than disqualified			/			
	persons that exceed the greater of \$5,000			1			
	or 1% of the amount on line 13 for the year						<u> </u>
C	Add lines 7a and 7b		/				<u> </u>
8	Public support. (Subtract line 7c from		/				
	line 6.)				<u> </u>		<u> </u>
	on B. Total Support				<del></del>		T
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6		/		<del> </del>		ļ
10a	Gross income from interest, dividends,		/				
	payments received on securities loans, rents,		/				
_	royalties, and income from similar sources .		<u>/</u>				ļ
b	Unrelated business taxable income (less		1				
	section 511 taxes) from businesses	/					
	acquired after June 30, 1975		-				ļ
	Add lines 10a and 10b				<u> </u>		<u> </u>
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on		-		<u></u>		-
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)					•	
40	•	<del> </del>					
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	V					
	,			-1 11-1 5 11	6.60		504(-)(0)
14	First five years. If the Form 990 is for the	-					
0 4'	organization, check this box and stop he					<u> </u>	· · ·
	on C. Computation of Public Suppor			40 1 (0)		74=1	
15	Public support percentage for 2018 (line a						<u>%</u>
16	Public support percentage from 2017 Scl			<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>	16	%
	on D. Computation of Investment In				(0)	14=	
17	Investment income percentage for 2018 (						<u>%</u>
18	Investment income percentage from 2013						%
19a	331/3% support tests – 2018. If the organ						
-	17 is not more than 331/3%, check this box						
' p	331/3% support tests -2017. If the organiz	ration did not d	neck a box on	ine 14 or line	19a, and line 16	o is more than	عن العالق ال
7	line 18 is not more than 331/3%, check this						
201	Private foundation. If the organization di	id not check a	nox on line 14	19a or 19h	check this hox	and see instr	uctions

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

determine whether the organization had excess business holdings.)

10b

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	i	-	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
Cooti	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		<u> </u>
Secu	on B. Type i Supporting Organizations		Yes	N
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		res	No
ı	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,	} '		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1 1		- ′
2	Did the organization operate for the benefit of any supported organization other than the supported	<b></b>		
	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,		_	ļ '
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control	•		'
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		-	
Cooti	on D. All Type III Supporting Organizations	1		
Secu	Dr. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	$\overline{}$	162	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			,
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		·
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	<u> </u>	!	
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	-		
<del></del>		3		<u> </u>
	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 i	nstru	ction	S).
a	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> </ul>			
b c	The organizations the parent of each of its supported organizations. Complete in established a government entity (	'caa in	etaict	ionel
2	Activities Test. Answer (a) and (b) below.	300 111	Yes	
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	110
a	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>		· '	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		,	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	.		
	activities but for the organization's involvement.	2b		<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<b>_</b>	<b></b>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard	3b		

Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	tru izat	st on Nov. 20, 1970 (explains must complete Secti	ain in Part VI). <b>See</b> ons 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>b</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		,	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	•	
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	·	"
4 Enter greater of line 2 or line 3.	4	· ,	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		4	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	egrated Type III supportir	ng organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
	(provide details in <b>Part VI</b> ). See instructions.	<del></del>		<del></del>
9	Distributable amount for 2018 from Section C, line 6	<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
10	Line 8 amount divided by line 9 amount	<del></del>	(ii)	/:::\
Secti	on E—Distribution Allocations (see Instructions)	(i) Excess Distributions	Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
<u>a</u>	From 2013			
р	From 2014			
C	From 2015		<del></del>	
d			<del></del>	
e f	From 2017	· '		····
	Applied to underdistributions of prior years			
	Applied to dilderdistributions of prior years  Applied to 2018 distributable amount	··· <del>-</del>	<del></del>	<u>.</u>
<u>''</u>	Carryover from 2013 not applied (see instructions)		<del></del>	
<u></u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from			
•	Section D, line 7 \$	'		
а	Applied to underdistributions of prior years			·
	Applied to 2018 distributable amount			
С				
5	Remaining underdistributions for years prior to 2018, if			
_	any. Subtract lines 3g and 4a from line 2. For result			1
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d				
е	Excess from 2018			

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.)
	<u>.</u>

### **SCHEDULE D** (Form 990)

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.

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	e organization		Employer identification number
	ountain Children's Law Center		74-2406045
Part I			ds or Accounts.
	Complete if the organization answered '		
		(a) Donor advised funds	(b) Funds and other accounts
	otal number at end of year		
_	ggregate value of contributions to (during year)		
<b>3</b> Ag	ggregate value of grants from (during year) .		
	ggregate value at end of year		
	d the organization inform all donors and donor		
fui	nds are the organization's property, subject to th	e organization's exclusive legal contro	l? □ Yes □ No
6 Di	d the organization inform all grantees, donors, a	nd donor advisors in writing that gran	it funds can be used
	nly for charitable purposes and not for the benef		
CO	onferring impermissible private benefit?		· · · · · · 🗌 Yes 🗌 No
Part II	Conservation Easements.		
	Complete if the organization answered '	'Yes" on Form 990, Part IV, line 7.	
<b>1</b> Pu	urpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recreat	ion or education)   Preservation of	a historically important land area
	Protection of natural habitat	☐ Preservation of	a certified historic structure
$\Box$	Preservation of open space		
-	omplete lines 2a through 2d if the organization he	eld a qualified conservation contributio	n in the form of a conservation
	asement on the last day of the tax year.	·	Held at the End of the Tax Year
			2a
	otal acreage restricted by conservation easement		
	umber of conservation easements on a certified h		
	umber of conservation easements included in	• •	
			I I
	umber of conservation easements modified, trans		
	x year ►	renea, released, extinguished, et tem	mated by the organization during the
	umber of states where property subject to conse	vation easement is located >	
	pes the organization have a written policy reg	******	pection, handling of
	plations, and enforcement of the conservation ea		
	aff and volunteer hours devoted to monitoring, inspec		
J 5.	and volunteer neare develop to memoring, mape	sung, narialing of violations, and emoraling	g conservation addoments during the year
7 Ar	mount of expenses incurred in monitoring, inspecting	a handling of violations, and enforcing o	conservation easements during the year
, /.ï ▶		g, mandaning or violations, and emoroting t	bonsor varion casemonis damig the year
8 Do	pes each conservation easement reported on line	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
	nd control 170/h)/4\/D\/6\2		· · · · · · · · · · · · · · · No
	Part XIII, describe how the organization reports of		
	alance sheet, and include, if applicable, the text of		
	ganization's accounting for conservation easeme		
Part III			Other Similar Assets.
	Complete if the organization answered		
1a If	the organization elected, as permitted under SF		revenue statement and balance sheet
	orks of art, historical treasures, or other similar		
	ublic service, provide, in Part XIII, the text of the f		
•	the organization elected, as permitted under S		
	orks of art, historical treasures, or other similar		
OI.	ublic service, provide the following amounts relati	na to these items:	
(a)	Revenue included on Form 990 Part VIII line 1		<b>~</b> ¢
(!) /:::	Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X		· · · · • •
2 if	the organization received or held works of art,	historical transuras or other similar	accete for financial agin provide the
	illowing amounts required to be reported under S		
		· · · · · · · · · · · · · · · · · · ·	
	evenue included on Form 990, Part VIII, line 1 .		
<u>b</u> As	ssets included in Form 990, Part X		· · · · <b>&gt;</b> \$

Part										
3	Using the organization's acquisition, collection items (check all that apply):		her reco	ds, chec	k any of the	e follov	ving that are a	signıfıca	ant us	e of its
а	☐ Public exhibition		d	Loan	or exchang	e prog	rams			
b	☐ Scholarly research		е	Other	•					
C	☐ Preservation for future generations	S								
4	Provide a description of the organizar XIII.	tion's collections a	ind expla	in how t	hey further	the org	janization's exe	mpt pu	rpose	in Part
5	During the year, did the organization									_
	assets to be sold to raise funds rather		ined as p	part of the	e organizati	on's co	ollection? .		Yes	□ No
Part						_			_	
	Complete if the organization 990, Part X, line 21.	answered "Yes	on For	m 990, F	Part IV, line	9, or	reported an a	mount	on F	orm
	Is the organization an agent, trustee	austadian or oth	or interm	odion, fo	v contribut	1000 01	other secote	not.		_ <del></del>
1a	included on Form 990, Part X?								V	☐ No
L								· Ц	res	☐ 140
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the 10	llowing ta	abie:		T	Amount		_
•	Beginning balance					10	<del> </del>	(1100111		
c d	Additions during the year					10				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount							\\2 □	Yes	□ No
	If "Yes," explain the arrangement in P									F
	V Endowment Funds.			.р.ш.таль		P. 0	<del>50 5,77 4,77,</del>			₩
	Complete if the organization	answered "Yes'	on For	m 990, F	Part IV, line	10.				
		(a) Current year	(b) Pri		(c) Two year		(d) Three years ba	ck (e) F	our yea	rs back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and	ļ								
	programs									
f	Administrative expenses							_		
g	End of year balance									
2	Provide the estimated percentage of t			e (line 1g	, column (a	)) held	as:			
a	Board designated or quasi-endowme	nt P	%							
b	Permanent endowment									
С	Temporarily restricted endowment ►		200/							
3a	The percentages on lines 2a, 2b, and Are there endowment funds not in the			zation the	at are hold	and ad	ministered for	ho		
Ųα	organization by:	e possession or in	e organi.	zation the	at are nero	anu au	ministered for	.116	Ye	s No
	(i) unrelated organizations							. 3a	-	5 140
	(ii) related organizations							3a		+
b	If "Yes" on line 3a(ii), are the related of							31		
4	Describe in Part XIII the intended uses									
Part										
	Complete if the organization		on For	m 990. F	Part IV. line	e 11a.	See Form 990	). Part 2	K. line	e 10.
	Description of property	(a) Cost or ot			or other basis		Accumulated		Book va	
	, , , ,	(investm	ent)	(0	ther)	ď	epreciation	• •		
1a	Land									
b	Buildings						_			
С	Leasehold improvements				13135		13085			50
d	Equipment				30592		2268			28324
e	Other				82831		72966			9865
Total.	Add lines 1a through 1e. (Column (d) r	must equal Form 9	90, Part )	(, columr	n (B), line 10	c.) .	<u></u> ▶			38239

Part VII	Investments—Other Securities.					
	Complete if the organization answ					
	(a) Description of security or category (including name of security)		(b	) Book value		thod of valuation: i-of-year market value
(1) Financial	derivatives					
(2) Closely-h	neld equity interests					
(3) Other						
(A)			<u> </u>			
(B)						
(C)						
(D)						
(E)			<u> </u>			
(F)						
(G)						
(H)						
	b) must equal Form 990, Part X, col (B) line 12 ) ▶					
Part VIII	Investments—Program Related					
	Complete if the organization answ	vered "Yes" on For			e 11c. See Form	1 990, Part X, line 13.
	(a) Description of investment		(b	) Book value		thod of valuation d-of-year market value
(1)						
_(2)		<del></del> -				
_(3)			L			
_(4)		<del></del> -				
_(5)			<u> </u>			
			<u> </u>			
			ļ			
(8)	<del></del>					
Total (Column)	(h) must equal Form 000 Part V and (P) line 12 \				<del></del>	
	(b) must equal Form 990, Part X, col (B) line 13.) ► Other Assets.	<del></del>		l		<del> </del>
Part IX	Complete if the organization answ	warad "Vaa" on Far	OO	O Dort IV line	11d Con Form	000 Dort V line 15
		) Description	111 33	o, Fart IV, Ime	riu. See Foili	(b) Book value
(4)		, o coc. p. c		<del></del>	<del> </del>	(b) Book value
(1)	<del></del>			<del></del> -		
(2)		<del></del> .			<del></del>	
(3)	<del></del>			<del></del>		<del></del>
(4)			-			<del>                                     </del>
<u>(5)</u> (6)				·	<del></del>	<del></del>
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, co	ol. (B) line 15 )	_	· · ·	•	
Part X	Other Liabilities.	<u> </u>				J
	Complete if the organization answ	wered "Yes" on For	m 99	0, Part IV, line	e 11e or 11f. Se	e Form 990, Part X,
	line 25.					,
1.	(a) Description of liability	(b) Book value			•	
(1) Federal II	ncome taxes		0			
(2) Capital	Lease Obligation		28324			
	unds Held in Trust		1737			
(4)						
(5)						
(6)					•	
(7)						
(8)						
(9)		······································				
	(b) must equal Form 990, Part X, col. (B) line 25.) ▶		30061			
2. Liability fo	r uncertain tax positions. In Part XIII, provi	de the text of the footn	ote to	the organization	's financial statem	ents that reports the

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

Pan	<del></del>		· ·	teturn.	
1	Complete if the organization answered "Yes" on Form 990, Total revenue, gains, and other support per audited financial statements		ille 12a.	1	1691025
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		}		1071023
a	Net unrealized gains (losses) on investments	2a	ام		
b	Donated services and use of facilities	2b	230625	İ	
C	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines 2a through 2d			2e	230625
3	Subtract line 2e from line 1			3	1460400
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		Ì		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	o		
b	Other (Describe in Part XIII.)	4b	0		
С	Add lines <b>4a</b> and <b>4b</b>			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	1460400
Part				r Retur	n.
	Complete if the organization answered "Yes" on Form 990,	Part IV,	line 12a.		
1	Total expenses and losses per audited financial statements			1	1674441
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			
а	Donated services and use of facilities	2a	230625		
b	Prior year adjustments	2b	0		
C	Other losses	2c   2d	0) 0		
ď	Other (Describe in Part XIII.)		<u>\</u>	2e	230625
е 3	Subtract line 2e from line 1			3	1443816
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i . i			1443010
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	أه		
b	Other (Describe in Part XIII.)	4b	0		
	Add lines <b>4a</b> and <b>4b</b>			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	1443816
Part	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an				
2, Fai	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	ιο μισνι	de arry additional im	omatio	1.
			,		

### **SCHEDULE G** (Form 990 or 990-EZ)

Rocky Mountain Children's Law Center

### **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.

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization

OMB No 1545-0047

Open to Public

**Employer identification number** 

74-2406045

Pari	Fundraising Activities. Form 990-EZ filers are n				ered "Yes" on I	orm 990, Part IV,	line 17.
1 a b c d 2a b	Indicate whether the organization  Mail solicitations  Internet and email solicitation  Phone solicitations  In-person solicitations  Did the organization have a writtor key employees listed in Form  If "Yes," list the 10 highest paid compensated at least \$5,000 by	ns ten or oral agree 990, Part VII) or individuals or e	e f g = ement with rentity in co	Solicitati Solicitati Special f any individ	on of non-govern on of government fundraising events lual (including offi with professional t	ment grants t grants cers, directors, trust fundraising services?	☐ Yes ☐ No
	(i) Name and address of individual or entity (fundraiser)	(II) Activity	custody o contrib	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1			Yes	No			
2							
3							
4							
5 			-				
6 				_			
7 							
8							
9							
7otal 3	List all states in which the orga registration or licensing.	nization is regis	tered or lic	ensed to s	olicit contribution	·····	
			- <del></del>	<b></b>		·	
		<del></del>				·	

Pa	rt <sup>s</sup>	Fundraising Events. Cor than \$15,000 of fundraising gross receipts greater tha	ng event contributions	on answered "Yes" o and gross income on	n Form 990, Part IV, lir Form 990-EZ, lines 1 a	e 18, or reported more and 6b. List events with
			(a) Event #1  Fundraising Events  (event type)	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	295857			
Œ	2	Less: Contributions .	0			
	3	Gross income (line 1 minus line 2)	295857			
	4	Cash prizes	0	,		
	5	Noncash prizes	7850			
nses	6	Rent/facility costs	3867			
Direct Expenses	7	Food and beverages	39485			
Direct	8	Entertainment	3616			
	9	Other direct expenses .	30220			
	10 11	Direct expense summary. Ad Net income summary. Subtra				<u>85038</u> 210819
Pa	rt III	Gaming. Complete if th \$15,000 on Form 990-E2	e organization answe			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue			47661	47661
ses	2	Cash prizes		<u> </u>	0	0
Expenses	3	Noncash prizes		·	11812	11812
Direct !	4	Rent/facility costs			0	0
	5	Other direct expenses .			244	244
-	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		12056
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		35605
g	a Is	nter the state(s) in which the or the organization licensed to co "No," explain:	onduct gaming activities	s in each of these state	s?	
10	10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? .					

Schedu	ule G (Form 990 or 990-EZ) 2018 Page	₃ 3
11	Does the organization conduct gaming activities with nonmembers?	0
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	lo
13	Indicate the percentage of gaming activity conducted in:	
а	The organization's facility	<u>%_</u>
b	An outside facility	6
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name ► Jeremy Jones	<b>-</b>
	Address ► 1325 S Colorado Blvd, Ste 701 Denver, CO 80222	
15a	revenue?	io
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	
	amount of gaming revenue retained by the third party ► \$	
С	If "Yes," enter name and address of the third party:	
	Name ▶	
	Address ►	. <b></b> -
16	Gaming manager information:	
	Name ► Ashley Calhoun	
	Gaming manager compensation ▶ \$0	
	Description of services provided ▶ Oversight of gaming (raffle) operations and selection of random winning ticket	
	☑ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions:	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	
-	retain the state gaming license?	lo
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); at 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

2018

Open to Public Inspection

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization

74-2406045 Rocky Mountain Children's Law Center Form 990, Part 1, Line 6 The Children's Law Center also received considerable donated professional services during 2018. Donated legal services were valued at \$208022, and other professional services were valued at \$22483 Form 990, Part III, Line 2 The Children's Law Center implemented Safe Babies Court and Young Adult Legal Advocacy programs during 2018 See 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 -Young Adult Legal Advocacy At any given time, an alarming number of teens and young adults are experiencing homelessness, as well as the enormous vulnerability and risk that accompanies such instability The Children's Law Center Young Adult Legal Advocacy Program provides this population with civil legal services and guidance to overcome a myriad of barriers to a successful transition to adulthood -Safe Babies Court Team Model The Safe Babies Court Team Model serves children aged zero to three and their families involved in child abuse related court cases. These early years are crucial to healthy development and long-term stability, and providing well-resourced specialty courts significantly and demonstrably improves outcomes 
The Children's Law Center established a Safe Babies Court in Pueblo County during 2018, and anticipates expanding to additional locations over the coming years. -Trauma Informed Yoga Studies reveal that yoga can be a powerful component in teh 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

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization  Rocky Mountain Children's Law Center	Employer identification number 74-2406045
continued.	
nature-based non-traditional setting, as well as cultivating "life skills" including following directions and c	leveloping 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	al expertise of it's staff and
community partners Children's Law Center programs are also active in numerous community groups and	d education initiatives
Organization professionals provide hundreds of hours of training annually to educators, human service p	roviders, attorneys, legislators,
judges and magistrates, court appointed special advocates, and other groups	
Form 990, Part VI, Line 12c	
All personnel, board members and significant contractors are required to complete a conflict of interest significant contractors are required to complete a conflict of interest significant contractors.	atement 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 sa	laries to industry norms and in
relation to responsibilities and competencies	
Form 990, Part VI, Line 19	
Governing documents, policies and financial statements are gladly made available upon request	
<del></del>	