0218 12/13/2018 11:23 . Form <b>990</b> Department of the Treas		Return of Organization Exempt From Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code Do not enter social security numbers on this form as it may	except private foun ay be made public.	dations)	OMB №. 1545-0047 2017 Open to Public Inspection
nternal Revenue Servic	e	► Go to www.irs.gov/Form990 for instructions and the lat	est information.		Inspection
A For the 2017		year, or tax year beginning $09/01/17$ , and ending $08/31$	1/10		r identification number
Check if applicable:	C Name o	f organization		D Employe	
Address change		JUVENILE LAW CENTER		ىد بىرىد	**6386
Name change		usiness as	Room/suite	E Telephon	
		and street (or P.O. box if mail is not delivered to street address) 5 WALNUT STREET 4TH FLOOR	Roomsano		625-0551
Initial return Final return/		own, state or province, country, and ZIP or foreign postal code	L	[	
terminated				G Gross rec	eipts \$ 2,171,762
Amended return		LADELPHIA PA 19107	1	2	
			H(a) Is this a gr	oup return for s	ubordinates? 🔄 Yes 🛛 🗶 No
Application pending	1 202	AN V. MANGOLD	H(b) Are all su	hordinates incl	uded? Yes No
		5 WALNUT STREET 4TH FLOOR	1		(see instructions)
		LADELPHIA PA 19107		, 202011 0 100	
Tax-exempt status		501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527			
J Website: 🕨	WWW.J	LC.ORG	H(c) Group ex		
c Form of organizatio	n: X Co	prporation Trust Association Other >	L Year of formation:	.975	M State of legal domicile: PZ
Part I S	ummar				
0	r of voting	if the organization discontinued its operations or disposed of more that members of the governing body (Part VI, line 1a)	an 25% of its net as	sets.	20
8 4 Numbe	r of indepe	ndent voting members of the governing body (Part VI, line 1b)		4	20
🗑 5 Total nu	umber of ir	ndividuals employed in calendar year 2017 (Part V, line 2a)		5	27
Vities 3 Number 4 Number 5 Total nu 6 Total nu	umber of v	olunteers (estimate if necessary)		6	25
7a Total ur	nrelated bu	Isiness revenue from Part VIII, column (C), line 12		7a	(
		iness taxable income from Form 990-T, line 34	<u></u>	7b	0
			Prior Y	ear	Current Year
B Contrib	utions and	grants (Part VIII, line 1h)		3,564	
9 Program	m service i	evenue (Part VIII, line 2g)		1,635	
🖁 10 Investr	nent incom	e (Part VIII, column (A), lines 3, 4, and 7d)	12	5,203	120,472
11 Other n	evenue (P	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			(
12 Total re	evenue – a	dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,08	0,402	
		r amounts paid (Part IX, column (A), lines 1–3)			(
		r for members (Part IX, column (A), line 4)			(
15 0 1	•			.3,500	2,441,309
0 16a Profess	sional fund	raising fees (Part IX, column (A), line 11e)			(
s 15 Salarie 16a Profess b Total fu U 17 Other e	Indraisina	mpensation, employee benefits (Part IX, column (A), lines 5–10) raising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25) ▶ 410,941			
H 17 Other	vnonses (	Part IX, column (A), lines 11a–11d, 11f–24e)	1,10	6,624	929,765
		Add lines 13–17 (must equal Part IX, column (A), line 25)		20,124	
		penses. Subtract line 18 from line 12		50,278	
	ue less exp		Beginning of C		End of Year
20 Total a Balance Bal	espte (Par	t X, line 16)		7,375	6,431,223
		art X, line 26)		10,301	457,963
		d balances. Subtract line 21 from line 20		57,074	
			<u></u>		
Linder penalties (	of periupy 1	e Block declare that I have examined this return, including accompanying schedules and st Declaration of preparer (other than officer) is based op all information of which prep	atements, and to the parer has any knowle	best of my k lge.	nowledge and belief, it is
		Marada			3/8/2019
Sign	Signature of	officer		Date	e / / / / / / / / / / / / / / / / / / /
Sign	•		EF EXEC C	FFICE	R

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Here	📐 SUSA	AN V. MANGULD					_
	Type or print	name and title	k 1				
	Print/Type preparer's	s name	Preparer's signature	Date	Check	X if PTIN	
Paid	DAVID G. FAW	,	part fair and	12/13/	/18 self-empl	loyed *******	
Preparer	Firm's name	DAVID G. FAW,		Fi	irm's EIN 🕨	**-***1559	
Use Only		998 OLD EAGLE	SCHOOL ROAD, SUITE 1221				
	Firm's address	WAYNE, PA 19	087	PI	hone no.	610-687-816	
May the IR	S discuss this re	turn with the preparer shown abo	ove? (see instructions)	<i></i>	<u></u>	X Yes No	<u>כ</u>

rm 990		UVENILE				**_**	**6386	Page
Part II				Service Accom		l'a chaile Da	4 111	X
					e or note to any	line in this Pa	art III	
	-	e the organiza	ition's miss	ion:				
SEE	SCHEI	DULE O						
·								
				nificant program servi				<b>.</b> . <b>.</b> .
		) or 990-EZ? <sub>.</sub>						Yes X No
	,			n Schedule O.				
		zation cease c	conducting,	or make significant of	changes in how it co	nducts, any prog	gram	
	/ices?							Yes 🗴 No
		ibe these cha						
							am services, as measured by	
						he amount of gra	ants and allocations to others,	
the	total expen	nses, and reve	enue, if any	, for each program se	ervice reported.			
				0 400 000		•		6,397
a (Co	de:	) (Expens	es \$	2,490,268	including grants of	\$ DD00D3M	) (Revenue \$	
			MMARY	NARRATIVE	OF JLC'S	PROGRAM	ACCOMPLISHMENTS	AND
IIG	HLIGH	rs.						
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) (Co	de:	) (Expens	es \$		including grants of	\$	) (Revenue \$	
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(Co	de:	) (Expens	es \$		including grants of	\$	) (Revenue \$	
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J Oth	er program	n services (De	scribe in S	chedule O.)				
	penses \$	<b>`</b>		including grants of	of \$	) (R	Revenue \$	)
		service exper		2,490,	268			

# Form 990 (2017) JUVENILE LAW CENTER Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		x	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
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,	5		x
•	Part III	5		- 22
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	6		x
-	"Yes," complete Schedule D, Part I	<b>–</b>		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
0	complete Schedule D. Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, 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	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	x	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100	x	
	Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12b		x
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	120		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		x
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1-1-14		
b	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
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	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Ves " complete Schedule G. Part III	19	1	X

Form **990** (2017)

Form	1 990 (2017) JUVENILE LAW CENTER *	*-***6386		Pa	age <b>4</b>
	The Checklist of Required Schedules (continued)				
<u></u>				Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule I	Н	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements t		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domest				
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts		21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for dome				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation	on of the			
20	organization's current and former officers, directors, trustees, key employees, and highes				
	employees? If "Yes," complete Schedule J		23	x	
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of				
<b>2</b> 4a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes				
			24a		x
	through 24d and complete Schedule K. If "No," go to line 25a		24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period				
С	Did the organization maintain an escrow account other than a refunding escrow at any tin		24c		
	to defease any tax-exempt bonds?	······································			
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time duri		24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage				77
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Par		25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualifi				
	year, and that the transaction has not been reported on any of the organization's prior For				
	If "Yes," complete Schedule L, Part I		25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or p	payables to any			
	current or former officers, directors, trustees, key employees, highest compensated empl	oyees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II		26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, ke	y employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a	35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		27		X
28	Was the organization a party to a business transaction with one of the following parties (s	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 Schedu	le L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes				
D	Schedule L, Part IV		28b		x
•	An entity of which a current or former officer, director, trustee, or key employee (or a fam				
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule I		28c		x
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete or control of the organization receive more than \$25,000 in non-cash contributions?		29	х	
29	·	·····························			
30	Did the organization receive contributions of art, historical treasures, or other similar asse		30		x
	conservation contributions? If "Yes," complete Schedule M		30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," corr		24		x
	Part I		31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net asse				v
	complete Schedule N, Part II		32		X
33	Did the organization own 100% of an entity disregarded as separate from the organizatio				
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	-	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Sche				
	or IV, and Part V, line 1		34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any trans	saction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt		T		
			36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a				
÷.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete S				
	· · · · · · · · · · · · · · · · · · ·		37		x
20	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for P	art VI_lines 11b and			
38	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.		38	х	
		1			

DAA

Batterments Regarding Other IRS Fillings and Tax Compliance           Check if Schedule O contains a response or note to any line in this Part V           a East he number exponded in two 's of from 'stop. Entra -0- If not applicable         Image: Stap	Form	990 (2017) JUVENILE LAW CENTER	**-***63	86			F	9age <b>5</b>
Check if Schedule O contains a response or note to any line in this Part V         1a       Enter the number of norm X-20 included in the inter Serie T-0 in for applicable       1a       30         2b       Enter the number of norm X-20 included in the inter Serie T-0 in for applicable       1a       30         2a       Enter the number of norm X-20 included in the inter Serie T-0 in for applicable       1a       30         2a       Enter the number of norm X-20 included in the inter corotable payments to vendors and resotable payments for the core of the serie T-0 in for applicable       1a       30         2a       Enter the number of norm X-20 in an include of the serie T-0 in for applicable       1a       32       7         2a       Enter the number of norm X-3 include of the serie T-0 in applicable       1a       3a       C       X         3a       Dt the organization how an inferce and to serie the number of the serie T-0 in applicable       2a       X       X         3b       Dt the organization how an inferce and the organization file an organization file an involute 1 serie series       3a       X       X         4a       Any time during the culture to inseries of the involute 1 series an intervel in or a signature or the analytic provide the organization file in the involute 1 series and the organization file in the involute 1 series and the involute 1 series and the organization file in the involute 1 series an the organization analytic provide in the involute 1 s		rt V Statements Regarding Other IRS Filings and Tax Comp	liance					
1a       Boart the number aportable is 0.0 f mm 10%6. Enter-O+ find applicable       1a       30         b       Enter the number of Forms W-26 included in line 1a. Enter-O+ find applicable       1a       30         c       D       D       D       D       D       D         c       D		Check if Schedule O contains a response or note to any line	e in this Part V _		<u></u>			
b         Enter the number of Perms W 20 Includes In line 1a. Enter -Fit of applicable         Ist. Ib 0           c         Did the organization comply with backs with throwing Inde Sor reportable payments to vorthors and reportable gaming (gambling) winnings to price winner?         Ist. Ib 0         Ist. Ib 0           28         Enter the number of employees reported on Form W-3. Transenset or vortice years of the x         Ist. Ib 0         Ist. Ib 0           29         Enter the number of employees reported on Form W-3. Transenset or vortice by this num         Ist. Ib 0         Ist. Ib 0         Ist. Ib 0           30         Did the organization have unrelated business gross income of S1.000 or more during the set of the organization have unrelated business gross income of S1.000 or more during the set of the organization have an interest in, or a signuture or other franctal account is forgering country cums as bench secourt.         If Test. Test is the approximation the secourt is the organization have an a bench secourt.         If Test. Test is the approximation transmitter is a signuture or other franctal account is forgenization that was or is a party to a prohibited tax sheller transaction at any time during the tax year?         If Test. Test is the organization the organization the were not tax diductibles as charitable contributions of the organization that were area is a party to a prohibited tax sheller transaction transmittable contributions or diductible account is forgerized than \$100,000, and old the organization tax or			1				Yes	No
bit is the function of the function of the second secon	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable						
reportable gaming (gambling) whinings to prize winners?       1c       X         2a Enter the number of employees reported an ComW.3. Transmitted of Wage and Tax.       2a       27         bit disestione is reported on fibe a calcular year ending with or within the year covered by this return?       2b       X         bit disestione is reported on fibe a calcular year ending with year.       2b       X         bit the segnitization have unrelated basiness gross income of \$1,000 or more during the year?       2b       X         bit the organization have unrelated basiness gross income of \$1,000 or more during the year?       3a       X         bit the organization have unrelated basiness gross income of \$1,000 or more during the year?       3a       X         bit 11**0s; fibe fiber organization have unrelated basiness gross income of \$1,000 or more during the year?       3a       X         bit 11**0s; fiber fiber and the organization have an interrest in, or a signature or other autionity or the instant of the organization have an interrest in, or a signature or other autionity or the instant and the i	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	L	1b	0			
Terret the number of employees reported on Form W-3. Transmittat of Wage and Tax       Image: Transmittation of employees reported on Form W-3. Transmittation Wage and Tax         Statements, filed for the calendar year ending with or within the year deviced by this return       Image: Transmittation Teal and greater than 250, you may be required to <i>e-file</i> (see instructions)       Image: Transmittation Teal and greater than 250, you may be required to <i>e-file</i> (see instructions)       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the provide and the provide and exploration in Schedule O       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the provide and the year?       Image: Transmittation Teal and the year?       Image: Transm	с	Did the organization comply with backup withholding rules for reportable payments t	o vendors and					
Statements, filed for the calendar year ending with or within the year covered by this return          [2a] 2.7           Fee Set Set Set Set Set Set Set Set Set S						1c	X	
b     If at least one is reported on line 2a dut the organization file all required local employment tax returns?     2b     X       Nobe, If the sum of lines 1a and 2a is grader than 250, you may be required to o-file (see instructions)     3a     X       If "Yes," that it life a form 90-T for the year? If %0'To the 2b, provide an explanation in Schedule O     3b     X       If "Yes," that it life a form 90-T for the year? If %0'To the 2b, provide an explanation or other authority     3a     X       If "Yes," enter the name of the foreign country (such as a bark account, ecurtiles account, or other financial accounts?     4a     X       See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FIDAR).     5a     X       Sa Was the organization approximation as party to a prohibited tax sheller transaction at any time during the tax year?     5a     X       Sa Was the organization approximation approximatin approximatin approximation approximation approximation	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Ta	IX I					
In trade to the sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3a       X         3a Did the organization have uncluded business greas income of \$1,000 or more during the year?       3a       X         3b If "Yes," sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3b       X         3b If "Yes," sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3a       X         3c If "Yes," sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3a       X         3c If "Yes," sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3a       X         3c If "Yes," sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3a       X         3c If "Yes," sum of lines is and 2 a is greater than 250, you may be required to # file (sum instructions)       3a       X         3c If "Yes," sum of the set of the (sum instructions)       5a       X       So         3c If "Yes," sum of the set or and, sith the organization in the way set is a party to a prohibited tax year?       5a       X         3c If "Yes," did the organization include with every solicitation an express statement that such contributions?       5c       So         3c If "Yes," did the organization include with every solicitation an express statement that such contributions? <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								
a Did the organization have unclated business gross income of \$1,000 or more during the year?       3a       X         b If "Yes," has I filed a Form 800-FT or this year? (M to 'bo 'bo 'as 0.5) convolve an explanation in Schedule 0.       3b         4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?       4a       X         b If "Yes," enter the name of the foreign country, 'be.''       5e       5e       5e       X         See instructions for filing country, 'be.''       5a       X       5a       X         b U any taxable party notify the organization that it was not is a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         b D d any taxable party notify the organization is the errom 8806-T?       5c       X       Se         c If 'Yes' in the Sa or 5b, did the organization is there more sole is a party to a prohibited tax shelter transaction?       5a       X         b D d any taxable party notify three organization is there were soleitation an express statement that such contributions?       6a       X         b T Yes," did the organization is the were not tax deductible as charitable carritobulans?       6a       X         b T Yes," did the organization neally were not tax deductible as charitable carritobulans?       7a       X         c T Yes, '' did the organization neally were not tax deductible as charitable carritobulans	b			s?		2b	X	
30       Did by Ophination and the Calendary 267. (If the symp 27 ft "No" to line 30, provide an explanation in Schedule O       30         4a       At any time during the calendary year, (if the organization have an interact in, or a signature or other authority over, a francial account in a trending to use as bank account, securities account, or other finandal accounts of theorign county (such as a bank account, securities account, or other finandal (FBAR).       4a       X.         5a       Was the organization of the foreign county (such as a bank account, securities account, or other finandal (FBAR).       5a       X.         5a       Was the organization of the organization in the was not a party to a prohibited tax shelter transaction?       5a       X.         5a       Was the organization induce with every solicitation an express statement that such contributions?       5c       5c         6a       Did any taxable party notify the organization induce with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).       5c       5c         7b       Yes," did the organization induce dispece of targing personal property for which it was required to file Form 8282?       7c       Xa         7b       Yes," did the organization in dus dispece of targing personal property for which it was required to file form 8282?       7c       Xa         7b       Yes," did the organization induce dispece of targing personal property for which it was required to file form 8282?       7c								
4a       At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).       4a       X         b       If "Yes," enter the name of the foreign country. ►       5a       X         See instructions for filing requirements for FineDRI Perm 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         b       Ud any taxable party noity the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         c       If "Yes," to line Sa or 5b, did the organization flat it was or is a party to a prohibited tax shelter transaction?       5c       Sc         C       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization rolucie with every solicitation an express statement that such contributions or glifts were not tax deductible contributions under section 170(c).       Bb       X         C       Organization stat ary or otherwise dispose of tangible personal property for which it was required for the organization neity the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided?       7a       X         D If the organization needword control the value of the goods or services provided?       7b       X         D If "Yes," indicate the number of Forms 8282?       7c       X         D If "Yes," indicate the nu	3a							
over, a financial account is foreign country (such as a bank account, securities account, or other financial account)?     4a     X       b     If 'vas, 'enter the name of the foreign country. >     See instructions for finDCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).     5a     X       5a     Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?     5a     X       5a     Was the organization name of the organization file Form 8880-T?     5c     X       6b     Did any taxable party notify the organization file Form 8880-T?     5c     X       76     Does the organization nave annual gross receipts that are normally greater than \$100,000, and did the organization neltawith every solicitation an express statement that such contributions or gifts were not tax deductable as charitable contributions or dist any contribution state were not tax deductable?     6b       7     Organization nelt, we apsymmet in excess of \$75 made parity as a contribution and parity for goods and services provided?     7a     X       7     Did the organization neity the donor of the value of the goods or services provided?     7a     X       7     Did the organization neity the donor of the value of the goods or services provided?     7a     X       7     T'vas, 'indicate the number of Forms 8282 filed during the year     Zd     7a     X       7     Did the organization neever year (addified inteleecute) proper), dif the organization feerower any funds, directly o	b					<u>3b</u>		
accountl?     4a     X       bit 1*Yas, "enter the name of the foreign country."     5a     X       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).     5a     X       bit damy taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?     5a     X       bit in the 5a or 5b, did the organization file Form 880-7?     5c     5c       6a     X     5b     X       11 ''s' of the organization nave annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax doubtible?     6a     X       11 ''s' di the organization neceive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?     7a     X       11 ''s', di the organization cellve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a     X       11 ''s', di the organization cellve in functive or indirectly, to pay premiums on a personal benefit contract?     7c     X       12 ''s', di the organization receive a payment in excess bolds or services provided?     7d     X       12 ''s', indicate the number of Forms 822? lied during the year     7d     7d     X       13 the organization receive a paymentile excess bolds or services for othered?     7d     X <t< td=""><td>4a</td><td></td><td></td><td></td><td>ty</td><td></td><td></td><td></td></t<>	4a				ty			
b trYes, enter the name of the foreign country: ► See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions of fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Was the organization a party to a prohibited tax shelter transaction? trYes, to line 5 or 5b, dif the organization file Form 8880-T? So bes the organization have annual gross roceipts that are normally greater than \$100.000, and did the organization solid any contributions that were not tax deductible as charitable contributions? b trYes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization nective a payment in excess of 375 made party as a contribution and party for goods and services provided to the payor? 7 If Yes, 'did the organization notic the payor? 7 If Yes, 'inclease the number of Forms 8282 filed during the year 7 If a								v
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). <ul> <li>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>Did any taxable party notify the organization fiel Form 8886-17?</li> <li>Does the organization sulcit any contributions that were not tax deductible as charitable contributions?</li> <li>Di ''Ne', ''d the organization include with every solicitation an express statement that such combutions or gifts were not tax deductible?</li> <li>Organization static may receive deductible contributions under section 170(c).</li> <li>Di f''Ne', ''I dit be organization notify the doror of the value of the goods or services provided?</li> <li>To' X</li> <li>To' X<!--</td--><td></td><td></td><td></td><td></td><td></td><td> 4a</td><td></td><td></td></li></ul>						4a		
(FBAR).       Image: Control of the organization of a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a       Was the organization a party to a prohibited tax shelter transaction?       5a       X         5b       X       5b       X         5c       10       Specific organization and process receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible as charitable contributions?       6a       X         5c       16 "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6b         70       Organization solid the organization control the donor of the value of the goods or services provided?       7a       X         7b       16 "Yes," did the organization receive a payment in excess of 537 mande party as a control that was required to file form 3222?       7a       X         7c       X       7b       X       7c       X         7d       16 "Yes," did the organization receive any function, directly or indirectly, or a personal benefit contract?       7c       X         7d       16 "Yes," did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of	b	If "Yes," enter the name of the foreign country:				•••		
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bit due of ganzation beta party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c ff "Yes" to line 6a or 5b, did the organization file Form 8886-T?       5a       5a       5b       X         G Does the organization have annual gross exceptist that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       5b       X         7 Organizations that may receive deductible contributions under section 170(c).       and services provided to the payor?       7a       X         7 If 'Yes," did the organization notify the donor of the value of the goods or services provided?       7a       X         7 Did the organization on the every solicitation and party for which it was required to file Form 8282?       7c       X         7 If 'Yes," did the organization and, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7d       X         7 If the organization received a contribution of cars, books, applanes, or other vehicles, did the organization received a contribution of any to whice thy ever?       7d       X         7 If the organization received a contribution of cars, books, applanes, or other vehicles, did the organization file a Form 1098-C?       7h       The organization meceived a contribution of cars, book						50		x
b dial by 2020te pair fourty response to the organization file Form 8880-T?       5c         Ga       Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization nichulde with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible?       6a       X         Organization status receive deductible contributions and every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6b         Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         C Did the organization notify the donor of the value of the goods or services provided?       7a       X         C Did the organization receive any motin, excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         C Did the organization networks dispose of tangible personal property for which it was required to file Form 8282?       7c       X         T Yes, X       Td did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7f       X         G Did the organization received a contribution of cars, boats, airplanes, or other whicks, did the organization file a Form 1098-C?       7f       X         Sponsoring organization maintaining doora advised funds. Did a donor advised fund maintained by the sponsoring								
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organization solicit any contributions that were not tax deductible as charitable contributions?     Ea     X       b     if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     Bb       7     Organizations that may receive deductible contributions under section 170(c).     Bit were not tax deductible?     7a     X       7     Did the organization notive apayment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a     X       c     Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282?     7c     X       d     If "Yes," indicate the number of forms 8282 filed during the year     7d     Td     X       f     Did the organization received an onthibution of qualified intellectual property, did the organization free forms 8298 as required?     7f     X       f     If the organization received a contribution of cars, boats, arplanes, or other vehicles, dif the organization free forms 8298 as required?     7f     X       f     If the organization make any taxable distributions under section 4966?     9a     9a     9a       g     Sponsoring organization make any taxable distributions under sources and services and aptication received anor them.)     1aa     1aa       g     Sponsoring organization make any taxable distributions under sources anot take or received form them.)	-							
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gifts were not tax deductible?     6b       7     Organizations that may receive deductible contributions under section 170(c).     6b       8     10 bit the organization sective a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a     X       b     11 'Yes," did the organization notify the donor of the value of the goods or services provide??     7b     X       c     Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year     1d     7c     X       7     Did the organization receive any function, directly or indirectly, to pay premiums on a personal benefit contract?     7c     X       f     Did the organization receive any function, directly or indirectly, on a personal benefit contract?     7ft     X       g if the organization received a contribution of cay, boats, airplanes, or other vehicles, did the organization feedewed a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?     7h     X       8     Sponsoring organizations maintaining donor advised funds.     9a     9a     9a       9     Sponsoring organizations maintaining donor advised funds.     10a     10b     10a       9     Did the sponsoring organizations maintaining donor advised funds.     10a     10a     10a       10 bit the sponsoring organizations maintaining donor advised funds.	<b>L</b>							
gins we end solutions that may receive deductible contributions under section 170(c).       a)         Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If *Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization receive a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7h       X         f If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         g Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         9 Sponsoring organization make ad distribution to a donor, donor advised fund maintained by the sponsoring organization make ad listribution to a donor, donor advised person?       9a       9b         10 Section 501(c)(7) organization make ad listributions to a donor, donor advised fund maintained by the sponsoring organization make ad listribution to a donor, donor advised fund maintained by the sponsoring organization make ad listributions the dude of the sources lagainst amounts due or related person?	D	-itte ware net text deductible?				6b		
a       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7c       X         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827.       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       Td       7d       X         f       Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7e       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         g       If the organization neceived a contribution of avoised funds.       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         g       Sponsoring organization make a distribution to a donor, donor advised funds.       10a       10a <td< td=""><td>7</td><td></td><td></td><td>••••</td><td></td><td></td><td></td><td></td></td<>	7			••••				
and services provided to the payor?     7a     X       b     if "Yes," did the organization notify the donor of the value of the goods or services provided?     7b     X       c     Did the organization notify the donor of the value of the goods or services provided?     7c     X       c     Did the organization notify the donor of the value of the goods or services provided?     7c     X       d     If "Yes," indicate the number of Forms 8282 filed during the year     7d     7c     X       e     Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7c     X       f     If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?     7h     X       g     If the organization maintaining donor advised funds.     10d in dorganization file a Form 1098-C?     7h     X       g     Sponsoring organizations maintaining donor advised funds.     9a     9a     9a     9a       g     Did the sponsoring organization make any taxable distributions under section 4966?     9a     9a     9b       g     Did the sponsoring organizations. Enter:     10a     10a     10b     10a       1     Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities     10a     10a       1     Section 501(c)(2) organizations. En				ods				
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         dif "Yes," indicate the number of Forms 8222 filed during the year       [7d]       7e       X         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7n       X         g       If the organization maintaining donor advised funds.       8       9         s       Sponsoring organization maintaining donor advised funds.       8       9         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a         b       Did the sponsoring organizations. Enter:       10a       10b       9b       9b         11       Section 501(c)(7) organizations. Enter:       11a       10a       10b       10b       10b         12       Section 501(c)(12) organizations. Enter:       11a       12a       12a       12a       12a         13       Section 501(c)(12) organizations. Enter: <td>a</td> <td></td> <td></td> <td></td> <td></td> <td>7a</td> <td>X</td> <td>T</td>	a					7a	X	T
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         f       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         g       If the organization received a contribution of cars, bcats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       7h         8       Sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9c	h					7b	X	
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f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7h       X         8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       8       8         9       Did the sponsoring organizations make a distribution to a donor, donor advised person?       9b       9b         10       Section 501(c)(7) organizations. Enter:       10a       10b       9b       9b         11       Section 501(c)(12) organizations. Enter:       10a       10b       1				ntrac	?	7e		
a       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organization 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 organization make any taxable distributions under section 4966?       9a         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross income from members or shareholders       11a         a       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a       13a         13a       List he organization is licensed to issue qualified health plans in more than one state?       13a       13a         14a       X	f					7f		X
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.       9         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a         a       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Ithe organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13a         b       Enter the amount of reserves on hand       13c       13a         A       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	g					7g		
sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       11a       10b         a       Gross income from members or shareholders       11b       12a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.       12a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13a       13a         b       It the amount of reserves the organizati	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles	s, did the organizati	on fil	e a Form 1098-C?	7h		
9 Sponsoring organization mark eaves business houng of any time of the first of the sponsoring organization make any taxable distributions under section 4966? 9a   9 Did the sponsoring organization make any taxable distributions under section 4966? 9a   10 Section 501(c)(7) organizations. Enter:   a Initiation fees and capital contributions included on Part VIII, line 12   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   11 Section 501(c)(12) organizations. Enter:   a Gross income from members or shareholders   b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   12a Ithe organization licensed to issue qualified health plans in more than one state?   13a Ithe organization is licensed to issue qualified health plans   the organization is licensed to issue qualified health plans   c Enter the amount of reserves on hand   the organization receive any payments for indoor tanning services during the tax year?	8	Sponsoring organizations maintaining donor advised funds. Did a donor advis	ed fund maintained	by tl	ne			
a Did the sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter:       11a         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13c       14a		sponsoring organization have excess business holdings at any time during the year	?			8		
b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       11b       12a       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       13a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a       13a         b       Enter the amount of reserves on hand       13c       14a       X	9						1	
b       Did the sponsoring organization make a databation of a databatic of	а					· · · ·		
a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter:       10a         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13b       13c         14a       X	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or re	lated person?			9b		
a       Initiation receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         14       Did the organization is licensed to issue qualified health plans       13b       13a	10		1		I			
1       Section 501(c)(12) organizations. Enter:         a       Gross income from members or shareholders         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)         12a       11b         12a       11b         2 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         2 B       12b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       X	а							
a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X	b			10b				
a       Cross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13a         c       Enter the amount of reserves on hand       13b       13b         13a       13b       13a       13a         14a       X	11		I	44-	1			
against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13b       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       14a       X	а			<u>11a</u>				
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.       12a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c       14a	b			446				
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.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       X		against amounts due or received from them.)			2	120	******	********
13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       X					f			
a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note. See the instructions for additional information the organization must report on Schedule O.       Image: Comparization is licensed to issue qualified health plans         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       Image: Ima			ai L	120	L			
a is the organization incensed to issue qualified nealth plans in more than one ease?         Note. See the instructions for additional information the organization must report on Schedule O.         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans         c Enter the amount of reserves on hand         14a         14a						13a	-	
<ul> <li>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</li> <li>c Enter the amount of reserves on hand</li> <li>13a</li> <li>14a</li> <li>14a</li> <li>14a</li> </ul>	а							
the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand         14a       Did the organization receive any payments for indoor tanning services during the tax year?	h							
c       Enter the amount of reserves on hand         14a       Did the organization receive any payments for indoor tanning services during the tax year?	U			13b				
14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	~							
						14a		X
	-							

Form 990 (2017)

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Form	990 (2017) JUVENILE LAW CENTER	**-***6386			Pa	age <b>6</b>
	rt VI Governance, Management, and Disclosur	e For each "Yes" response to lines 2 throug	h 7b below,	and for a "	'No"	
00000000	response to line 8a, 8b, or 10b below, describe th	he circumstances, processes, or changes in	Schedule O.	See instru	uction	s.
	Check if Schedule O contains a response or note					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the	e end of the tax year	1a 20			
	If there are material differences in voting rights among members					
	if the governing body delegated broad authority to an executive c	ommittee or similar				
	committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, v	vho are independent	1b 20			
2	Did any officer, director, trustee, or key employee have a family r					
	any other officer, director, trustee, or key employee?			2		_X
3	Did the organization delegate control over management duties cu	istomarily performed by or under the direct				
	supervision of officers, directors, or trustees, or key employees to			3		_X_
4	Did the organization make any significant changes to its governir			4	X	
5	Did the organization become aware during the year of a significant			5		<u>X</u>
6	Did the experimentian have members or stackholders?			6		_X
7a	Did the organization have members, stockholders, or other perso	ns who had the power to elect or appoint				
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or	subject to approval by) members,				
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings	held or written actions undertaken during the year	· by the follow	ing:		
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing t	ody?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Pa					
	the organization's mailing address? If "Yes," provide the names a	and addresses in Schedule O	<u></u>	9		X
Sec	tion B. Policies (This Section B requests information	about policies not required by the Intern	al Revenue	e Code.)_		
					Yes	
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedure					
	affiliates, and branches to ensure their operations are consistent				v	
11a	Has the organization provided a complete copy of this Form 990		the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization			10	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
12a	Did the organization have a written conflict of interest policy? If "			<u>12a</u>	X X	
b	Were officers, directors, or trustees, and key employees required		to conflicts?	<u>12b</u>		
С	Did the organization regularly and consistently monitor and enfor			10-	v	
				<u>12c</u> 13	X X	
13					X	
14	Did the organization have a written document retention and dest	uction policy?				
15	Did the process for determining compensation of the following pe	ersons include a review and approval by				
	independent persons, comparability data, and contemporaneous			15a	X	
a	The organization's CEO, Executive Director, or top management				X	
b						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (s					
16a	Did the organization invest in, contribute assets to, or participate			16a		X
	with a taxable entity during the year?	requiring the organization to ovaluate its				
b	If "Yes," did the organization follow a written policy or procedure					
	participation in joint venture arrangements under applicable fede			16b	*******	*******
<u> </u>	organization's exempt status with respect to such arrangements	£		105		
	tion C. Disclosure List the states with which a copy of this Form 990 is required to I	pe filed PA . NY				
17 10	List the states with which a copy of this Form 990 is required to a Section 6104 requires an organization to make its Forms 1023 (					
18	available for public inspection. Indicate how you made these available					
		Other (explain in Schedule O)				
40	Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization		st policy, and			
19	financial statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person w	ho possesses the organization's books and record	ds: 🕨			
20 K		5 WALNUT STREET	·			
	HILADELPHIA	PA 1910	7	215-62	25-0	551
					00	~

Form **990** (2017)

Form 990 (20	17) JUVENILE LAW CENTER	**-**6386	Page 7
Part VII	Compensation of Officers, Directors, Trust	ees, Key Employees, Highest Compensated I	Employees, and
	Independent Contractors		
	Check if Schedule O contains a response or n	ote to any line in this Part VII	<u></u>
Section A.	Officers, Directors, Trustees, Key Employees, and Hi	ghest Compensated Employees	
organization's			
List all o	of the organization's <b>current</b> officers, directors, trustees (wh	ether 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 nor any related organization compensated any current officer, director, or trustee.

Check this box if neither the orga	anization nor any		ileu (	Jiya	lizai		Joint	Sensated any current office		
(A) Name and Title	<b>(B)</b> Average hours per week (list any	bo	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			s both	an	<b>(D)</b> Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director		Officer		Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) SEE ATTACHED LIS		0%	PF	0	во	NO				
LIST	2.00	x						0	0	0
(2) SUSAN V. MANGOLI										
CHIEF EXEC OFFICER	40.00			х				188,310	о	14,974
(3) MARSHA L. LEVICI		1								
CHIEF LEGAL OFFICER	40.00				x			225,134	0	32,294
(4) JESSICA FEIERMA										с.
SR MANAGING DIR	40.00					x		112,500	0	32,922
(5) JENNIFER POKEMP										
POLICY DIRECTOR	40.00					x		107,513	0	15,799
(6)										
(7)										
(8)										
(9)	-									
(10)			1							
(11)										
		-	1	1	1		1			000

Form 990 (2017)

Form 990 (20 Part VII	(17) JUVENILE	LAW CENT	CEF stee	<u>د لا</u>	ev F	mpl	ovee	S.	and	* * - * * * d Highest Compensated		Page <b>8</b>
	(A) Name and title	(B)         (C)           Average         Position           hours per         (do not check more than one           week         box, unless person is both an           (list any         officer and a director/trustee)								(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	otal									633,457		95,989
d Total (	rom continuation she add lines 1b and 1c)									633,457		95,989
2 Total n	number of individuals (ir able compensation from	ncluding but not l	imite	ed to <b>4</b>	thos	se lis	sted a	abc	ove	) who received more than	\$100,000 of	
3 Did the	e organization list any fo	ormer officer, dir	ecto	r, or	trus	tee,	key (	em	plo	yee, or highest compensa	ated	Yes No 3 X
4 For an organiz	y individual listed on lin zation and related orga	e 1a, is the sum nizations greater	of ro tha	eport n \$1	able: 50,00	cor 00?	npen If "Ye	sat əs,'	tion " cc	and other compensation omplete Schedule J for su	from the hch	
5 Did an	v person listed on line '	1a receive or acc	rue	com	pens	satio	n fro	m a	any	unrelated organization of	r individual	
Section B. I	ndependent Contracto	ors			Inda		dopt		ntro	actors that received more	than \$100,000 of	
1 Compl compe	ensation from the organ	ization. Report c	omp	ensa	ation	for	the c	ale	enda	ar year ending with or with	hin the organization's tax ye	ear.
	Name and	(A) d business address								Descrip	(B) tion of services	(C) Compensation
						21						
2 Total r	number of independent ed more than \$100,000	contractors (incl	udin n fro	g bu m th	t not e or	limi gani	ted to	oth n∎	hos	e listed above) who	0	

Form **990** (2017)

Form	n 990	(2017) <b>JUV</b>	ENILE LA	W C	ENTEF	٤		**-***6386		Page <b>9</b>			
Part VIII         Statement of Revenue           Check if Schedule O contains a response or note to any line in this Part VIII													
		Check	if Schedule C	) cont	ains a r	esponse o							
							<b>(A)</b> Total revenue	(B) Related or	(C) Unrelated	Revenue excluded from tax			
								exempt function	business revenue	under sections			
0 0	<u>.</u>			<u> </u>				revenue		512-514			
Contributions, Gifts, Grants and Other Similar Amounts		Federated carr		1a									
ษิติ		Membership de		1b 1c		124,152							
ifts,		Fundraising ev Related organi		1d		121,152							
nii Gin		Government grants (		1e									
Sir		All other contribution		-10-									
her	•	and similar amounts		1f	1,	827,663							
ēđ	a	Noncash contributior	ns included in lines 1a-	1f: \$	;	34,007							
and	-		s 1a–1f			▶	1,951,815						
						Busn. Code							
Program Service Revenue	2a	OTHER FI	EES, HONORAR	IA, E	rC	541100	6,397	6,397					
Re	b												
, vice	С												
Ser	d												
am	е												
rogi		1 0	am service reve				6.007						
<u> </u>			es 2a–2f				6,397		1	l			
	3		come (including o				120,472			120,472			
			lar amounts)				120,472			120/1/2			
	4		nvestment of tax										
	5	Royalties	(i) Real	 T		Personal							
	60	Gross rents			(11) 1								
		Less: rental exps.											
		Rental inc. or (loss)				5.67 5.77 5							
			me or (loss)										
		Gross amount from	(i) Securities			Other							
		sales of assets other than inventory					]						
	b	Less: cost or other											
		basis & sales exps.											
	С	Gain or (loss)											
	d	Net gain or (lo	ss)	 r	<u></u>	🕨							
e	8a		om fundraising eve										
ent			124,										
Še			reported on line 1c			02 070							
Other Revenue			18			93,078 93,078							
<u>e</u>			(less) from func		evente								
			(loss) from function gaming activities	ſ	events.				1				
	99		19										
	h		(penses		A		1						
			(loss) from gar		tivities								
			f inventory, less	[									
			lowances	а									
	b		goods sold										
	С	Net income or	(loss) from sale	s of in	ventory	►							
		Mis	cellaneous Revenue			Busn. Code	4						
	11a												
	b												
	c												
			nue										
			es 11a–11d				2,078,684	6,397		120,472			
	12	i otal revenue	<ul> <li>See instructio</li> </ul>	us	<u></u>	🚩	2,070,004		<b>`</b>				

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Page 9

#### \*\*-\*\*\*6386 JUVENILE LAW CENTER Form 990 (2017) 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 (C) Management and general expenses (A) Total expenses (B) Program service expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to domestic organizations

	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		And the second		
5	Compensation of current officers, directors,			05 000	<b>F</b> 4 400
	trustees, and key employees	413,444	243,932	95,092	74,420
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,470,886	1,160,732	129,437	180,717
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	84,389	62,908	10,055	<u>11,426</u> 44,221
9	Other employee benefits	326,585	243,450	38,914	44,221
10	Payroll taxes	146,005	108,839	17,397	19,769
11	Fees for services (non-employees):				
	Management				
	Legal	47,007	47,007		
		68,080		68,080	
	Accounting		anaton in a second a		
	Lobbying Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	322,212	260,872	61,340	
	(A) amount, list line 11g expenses on Schedule O.)	5667616	2007071	01/010	
	Advertising and promotion	44,653	33,286	5,321	6,046
13	Office expenses	35,605	26,542		
14	Information technology	35,005	20, 542	1,215	17020
15	Royalties	149,481	111,430	17,812	20,239
16	Occupancy	117,430	87,537		
17	Travel	11/,430	01,551	15,992	13,701
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	25 415			+
19	Conferences, conventions, and meetings $\dots$	35,415	35,415		
20	Interest				
21	Payments to affiliates		05 600	4 000	1 656
22	Depreciation, depletion, and amortization $\ldots$	34,384	25,629		
23	Insurance	28,558	21,288	3,403	3,867
24	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.)			ļ	
а	OTHER DIRECT FUNDRAISING	24,088			24,088
b	LIBRARY	17,148			
с	MISCELLANEOUS	5,704	4,253	680	771
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,371,074	2,490,268	469,865	5 410,941
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
			1	1	1
	following SOP 98-2 (ASC 958-720)				

(D) Fundraising

expenses

Form 9	90	(2017) JUVENILE LAW CENTER		* *	-***6386		Page <b>11</b>
Part	Х						
		Check if Schedule O contains a response or note	to any line	in this Part X			·····
					(A) Beginning of year		(B) End of year
1		Cash—non-interest bearing				1	
2	2	Savings and temporary cash investments			179,761		67,624
3		Pledges and grants receivable, net			1,407,971	3	1,151,587
4		Accounts receivable, net				4	
5	5	Loans and other receivables from current and former of	ficers, direc	ctors,			
		trustees, key employees, and highest compensated em	ployees.				
		Complete Part II of Schedule L				5	
6	5	Loans and other receivables from other disqualified per		fined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B),	and contrib	outing employers and			
		sponsoring organizations of section 501(c)(9) voluntary	employees	' beneficiary			
S		organizations (see instructions). Complete Part II of Sch	nedule L			6	
Assets		Notes and loans receivable, net				7	
₹  ε		Inventories for sale or use				8	
9	9	Prepaid expenses and deferred charges			73,446	9	81,497
10		Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	170,677			
	b	Less: accumulated depreciation	10b	56,200	86,799	10c	
11		Investments—publicly traded securities			5,649,398	11	5,016,038
12	2	Investments-other securities. See Part IV, line 11				12	
13		Investments—program-related. See Part IV, line 11			13		
14		Intangible assets				14	
1		Other assets. See Part IV, line 11				15	
10	6	Total assets. Add lines 1 through 15 (must equal line 3	34)		7,397,375		6,431,223
17		Accounts payable and accrued expenses			540,301	17	197,961
18		Grants payable				18	
19		Deferred revenue				19	
20		Tax-exempt bond liabilities				20	
2		Escrow or custodial account liability. Complete Part IV	of Schedule	Ð		21	
v 22	2	Loans and other payables to current and former officers	s, directors,				
Liabilities		trustees, key employees, highest compensated employ	ees, and				
abi		disqualified persons. Complete Part II of Schedule L				22	
ב   <sup>ב</sup>	3	Secured mortgages and notes payable to unrelated thir				23	
24	4	Unsecured notes and loans payable to unrelated third p	arties			24	
2	5	Other liabilities (including federal income tax, payables	to related th	hird		1	
		parties, and other liabilities not included on lines 17-24)	. Complete	Part X			
		of Schedule D				25	260,000
20	6	Total liabilities. Add lines 17 through 25			540,301	26	457,961
		Organizations that follow SFAS 117 (ASC 958), chee	ck here 🕨	X and			
Ces		complete lines 27 through 29, and lines 33 and 34.					
<u>u</u> 2	7	Unrestricted net assets			2,610,236		2,280,757
88   28	8	Temporarily restricted net assets			3,246,838		
	9	Permanently restricted net assets		•••••	1,000,000	29	1,000,000
Ĕ		Organizations that do not follow SFAS 117 (ASC 95	8), check h	ere 🕨 🔄 and			
s o		complete lines 30 through 34.					
set 30	0					30	
8 3 <sup>.</sup>	1	Paid-in or capital surplus, or land, building, or equipment				31	
Net Assets or Fund Balances	2	Retained earnings, endowment, accumulated income,	or other fun	ds		32	
-   3:	3				6,857,074		
34	4	Total liabilities and net assets/fund balances	<u></u>	<u></u>	7,397,375	34	6,431,223

Form **990** (2017)

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Form 990 (2017) JUVENILE LAW CENTER

Form	990 (2017) JUVENILE LAW CENTER	**-***6386			Pag	je <b>12</b>
	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in thi	s Part XI	<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)			2,0'		
2	Total expenses (must equal Part IX, column (A), line 25)			3,3'		
3	Revenue less expenses. Subtract line 2 from line 1		3	-1,2		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column	n (A))	4	6,8		
5	Net unrealized gains (losses) on investments		5	4	)8,5	<u>578</u>
6	Donated services and use of facilities	·	6			
7	Investment expenses					
8	Prior period adjustments					
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 I	Part X, line				
	33, column (B))	<u></u>	10	5,9	73,2	262
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in thi	s Part XII	<u></u>	<u></u>	<u></u>	
2a b	Accounting method used to prepare the Form 990: Cash X Accrual If the organization changed its method of accounting from a prior year or checked "C Schedule O. Were the organization's financial statements compiled or reviewed by an independe If "Yes," check a box below to indicate whether the financial statements for the year reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate Were the organization's financial statements audited by an independent accountant If "Yes," check a box below to indicate whether the financial statements for the year separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate If "Yes," to line 2a or 2b, does the organization have a committee that assumes resp of the audit, review, or compilation of its financial statements and selection of an ind If the organization changed either its oversight process or selection process during the selection process during the organization have a committee that assumes resp	nt accountant? were compiled or arate basis ? were audited on a arate basis onsibility for oversight dependent accountant?		ah	Yes X X	<u>X</u>
	Schedule O. As a result of a federal award, was the organization required to undergo an audit or the Single Audit Act and OMB Circular A-133?			<u>3a</u>		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization					
	required audit or audits, explain why in Schedule O and describe any steps taken to	undergo such audits.				Ļ
				Fo	m <b>990</b>	J (2017)

SCHEDULE A

# **Public Charity Status and Public Support**

OMB No. 1545-0047
2017
Open to Public
Inspection

(For	m 990 or 990-EZ)		Complete if the org	ganization is a section 501(c)(3) organiza	tion or a se	ection 4947(a	a)(1) nonexempt charitable trust.	2017
	tment of the Treasury			Attach to Form 99	0 or For	m 990-EZ		Open to Public
Intern	al Revenue Service		Go to	www.irs.gov/Form990 for inst	tructions	and the	latest information.	Inspection
Name	of the organization	-		CENTED			Employer identifie ** - ***6	
D	art I Reas		UVENILE LAW	Status (All organizations )	must co	mplete		
				e it is: (For lines 1 through 12, c				
1				ociation of churches described in				
2				A)(ii). (Attach Schedule E (Form			K-K-F	
3				ce organization described in sec			ii).	
4				d in conjunction with a hospital d				spital's name,
-	city, and sta							
5				of a college or university owned of				
			A)(iv). (Complete Part					
6				overnmental unit described in <b>se</b>				
7			at normally receives a on 170(b)(1)(A)(vi). (C	substantial part of its support fro omplete Part II.)	m a gove	ernmental	unit or from the general public	
8				I70(b)(1)(A)(vi). (Complete Part				
9	An agricultu	ral res	earch organization des	cribed in section 170(b)(1)(A)(i	<b>k)</b> operate	ed in conj	unction with a land-grant college	9
	-			of agriculture (see instructions). I			ly, and state of the college of	
10				1) more than 33 1/3% of its supp			ons membership fees, and gros	
10	receipts fror	n activ	ities related to its exen	npt functions—subject to certain	exceptio	ns, and (2	?) no more than 33 1/3% of its	-
	support from	n gross	investment income ar	nd unrelated business taxable in	come (le	ss section	1511 tax) from businesses	
				0, 1975. See section 509(a)(2).				
11				exclusively to test for public safe				20
12	An organiza	tion or	ganized and operated	exclusively for the benefit of, to p zations described in <b>section 50</b> 9	bertorm ti Ma)(1) or	section 5	509(a)(2). See section 509(a)(3	əs ).
	Check the b	ox in li	nes 12a through 12d ti	nat describes the type of suppor	ting organ	nization a	nd complete lines 12e, 12f, and	12g.
	a Type I.	A supp	orting organization op	erated, supervised, or controlled	by its su	pported o	rganization(s), typically by giving	
	the sup	ported	organization(s) the pov	wer to regularly appoint or elect a	a majority	of the dir	rectors or trustees of the	
				omplete Part IV, Sections A ar			ted an an institution (a) has been in a	
	b Type II.	A sup	porting organization su	pervised or controlled in connec ting organization vested in the s	tion with	its suppoi	rted organization(s), by having	4
				Part IV, Sections A and C.		Sono mar		-
	c Type III	functi	onally integrated. As	supporting organization operated	in conne	ection with	n, and functionally integrated wit	h,
				structions). You must complete				(-)
	d _ Type III	non-f	unctionally integrated	d. A supporting organization ope e organization generally must sa	rated in division of the second se	connection	n with its supported organization	(S)
	requirer	nent (s	ee instructions). You i	nust complete Part IV, Section	ns A and	D, and P	art V.	
	e Check t	his bo	if the organization rec	eived a written determination fro	om the IR	S that it is		
		-	-	n-functionally integrated support	ing orgar	nization.		[
			of supported organizat					····· L
		TOIIOWI		ne supported organization(s).	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
(	<ul> <li>i) Name of supported organization</li> </ul>		(ii) EIN	(iii) Type of organization (described on lines 1–10		ur governing	support (see	other support (see
				above (see instructions))		ment?	instructions)	instructions)
		_			Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Tot	al							

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

Schedule A (Form 990 or 990-EZ) 2017

Total

Scheo	lule A (Form 990 or 990-EZ) 2017 JUV	ENILE LAW	<b>CENTER</b>		* *	-***6386	Page <b>2</b>
	rt I Support Schedule for O	rganizations D	escribed in S	ections 170(b)	(1)(A)(iv) and	170(b)(1)(A)(vi)	
	(Complete only if you chee	cked the box or	n line 5, 7, or 8	of Part I or if th	ne organization	failed to qualify	under
	Part III. If the organization	fails to qualify	under the tests	ilisted below, p	please complete	e Part III.)	
Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	1,580,459	3,106,374	2,459,314	3,953,564	1,951,815	13,051,526
2	Tax revenues levied for the						
2	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
5	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	1,580,459	3,106,374	2,459,314	3,953,564	1,951,815	13,051,526
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						4 605 007
_	shown on line 11, column (f)						<u>4,685,997</u> 8,365,529
<u>6</u> 500	Public support. Subtract line 5 from line 4. tion B. Total Support						0,303,525
	idar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	• • • • • • •	1,580,459	3,106,374	2,459,314	3,953,564	1,951,815	13,051,526
7 8	Amounts from line 4 Gross income from interest, dividends,	1,580,459	5,100,574	2,455,514	5,555,501	1/551/015	
0	payments received on securities loans,						
	rents, royalties, and income from	122,327	99,256	114,386	125,203	120,472	581,644
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
40							
10	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)	39,093		189,561	71,106	93,078	392,838
11	Total support. Add lines 7 through 10						14,026,008
12	Gross receipts from related activities, etc.					12	250,058
13	First five years. If the Form 990 is for the	e organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 50 <sup>-</sup>	1(c)(3)	
	organization, check this box and stop her			<u></u>	<u></u>	<u></u>	
Sec	tion C. Computation of Public S						0/
14	Public support percentage for 2017 (line 6						59.64%
15	Public support percentage from 2016 Sch	iedule A, Part II, Iir	ie 14	40	22.4/20/ as more	15	54.57%
16a	33 1/3% support test—2017. If the organ						► X
	box and stop here. The organization qual 33 1/3% support test—2016. If the organ					ore check	
b	this box and stop here. The organization						
470	10%-facts-and-circumstances test—20						······
17a	10% or more, and if the organization mee						
	Part VI how the organization meets the "fa						
b	organization 10%-facts-and-circumstances test—20	<b>16</b> . If the organizat	ion did not check	a box on line 13. 1	6a, 16b, or 17a. ar	nd line	······
U	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization m						
	supported organization						►
	······································						

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2017

Sched		ENILE LAW				-***6386	Page 3
Pa	rt III Support Schedule for Or	rganizations D	escribed in S	ection 509(a)(2	2)		
	(Complete only if you chee	cked the box or	n line 10 of Par	t I or if the orga	anization failed	to qualify under	Part II.
	If the organization fails to	qualify under th	e tests listed b	elow, please c	omplete Part II.	.)	
	ion A. Public Support						
Calen	dar year (or fiscal year beginning in) 🛛 🕨	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") $\ldots$						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
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 furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
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 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
Tua	payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.) First five years. If the Form 990 is for the	e organization's firs					► □
	organization, check this box and stop her			<u></u>	<u></u>	<u></u>	· · · · · · · · · · · · · · · · · · ·
	tion C. Computation of Public S					15	%
15	Public support percentage for 2017 (line 8					· · · · · · · · · · · · · · · · · · ·	<u>%</u>
<u>16</u>	Public support percentage from 2016 Sch			<u></u>	<u></u>		/0
	tion D. Computation of Investme					17	%
17	Investment income percentage for 2017 (						<u>%</u>
18	Investment income percentage from 2016	Schedule A, Part	III, line 1/	- 44	$\sim$ more than 22 1/2		70
19a	33 1/3% support tests—2017. If the orga						
	17 is not more than 33 1/3%, check this b	iox and stop nere.	The organization	quaimes as a publ	iciy supported orga		····· 🗾

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2017

# Schedule A (Form 990 or 990-EZ) 2017 JUVENILE LAW CENTER

### Page 4

## Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

1		Yes	No
1			
1			
1			
2			
2	1		
2			
2			
2			
2			
3a			
3a			
3a			
3b			
3b	3a		
3b			
3b       -         3c       -         3c       -         4a       -         4b       -         4b       -         4b       -         4b       -         4b       -         4b       -         5a       -         5a       -         5b       -         5c       -         5b       -         5c       -         5b       -         5c       -         6       -         7       -         8       -         9a       -         9b       -         9b       -         10a       -			
3b       -         3c       -         3c       -         4a       -         4b       -         4b       -         4b       -         4b       -         4b       -         4b       -         5a       -         5a       -         5b       -         5c       -         5b       -         5c       -         5b       -         5c       -         6       -         7       -         8       -         9a       -         9b       -         9b       -         10a       -			
3c			
3c	26		
3c	30		
3c			
4a			
4a	3c		
4b			******
4b			
4c       -         5a       -         5b       -         5b       -         5c       -         5c       -         6       -         7       -         8       -         9a       -         9b       -         9c       -         10a       -	pessee		posessee
4c       -         5a       -         5b       -         5b       -         5c       -         5c       -         6       -         7       -         8       -         9a       -         9b       -         9c       -         10a       -	4h		
4c			
5a         5b         5c         5c         5c         6         7         8         9a         9b         9c         10a			
5a         5b         5c         5c         5c         6         7         8         9a         9b         9c         10a			
5a			
5b			
5b	5-		
5b         5c         5c         6         7         8         9a         9b         9c         10a	Ja		
5b         5c         5c         6         7         8         9a         9b         9c         10a			
5c		********	*********
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10a	9c		
10a	9c		
10a	9c		
	9c		
	9c		
	<u>9c</u> 10a		

Schedule A (Form 990 or 990-EZ) 2017

Schedule	A (Form 990 or 990-EZ) 2017 JUVENILE LAW CENTER	**-***6386		Page 5
Part	<b>Supporting Organizations</b> (continued)		T	
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	<u>11a</u>		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Par	<i>t VI.</i> 11c		
Sectio	on B. Type I Supporting Organizations			<b>—</b>
			Yes	No
	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	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 support	əd 🛛		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Pa	t 🛛		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sectio	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 director	s		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the p	rior tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies o			
	organization's governing documents in effect on the date of notification, to the extent not previously provide			
	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			
	the organization maintained a close and continuous working relationship with the supported organization(s)			
	By reason of the relationship described in (2), did the organization's supported organizations have a	·		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
		3		
Sectio	supported organizations played in this regard. on E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	ar (see instructions)		
1	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
a L	The organization satisfied the Activities rest. <i>Complete <b>Ime 2</b> below.</i>			
b	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity.	nt entity (see instructions)		
C			•	
۰ ^	ctivities Test Answer (a) and (b) below		Yes	No
	ctivities Test. <b>Answer (a) and (b) below.</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes	of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purpose.			
	how the organization was responsive to those supported organizations, and how the organization determin	eu 🔛		400000

- that these activities constituted substantially all of its activities.
- **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.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- **a** 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.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2a

2b

3a

chedule A (Form 990 or 990-EZ) 2017 JUVENILE LAW CENTER	Organizat	**-**6	386 Page
Part V         Type III Non-Functionally Integrated 509(a)(3) Supporting           1         Check here if the organization satisfied the Integral Part Test as a qualifying trust			
instructions. All other Type III non-functionally integrated supporting organization			
instructions. All other Type in non-functionally integrated supporting organization	is must comp		(B) Current Year
Section A - Adjusted Net Income		(A) Prior 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		
	8		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).			(B) Current Year
Section B - Minimum Asset Amount		(A) Prior Year	(optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
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			
emergency temporary reduction (see instructions).	6		*

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2017

DAA

Part	V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organiza	tions (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos	es		
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations		
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.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizatio	tion is responsive		
	(provide details in <b>Part VI</b> ). See instructions.			
	Distributable amount for 2017 from Section C, line 6			
0	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	````		Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2017:			
а				
b	From 2013			
с	From 2014			
	From 2015			
е	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
 i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
-	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
<u> </u>	Remaining underdistributions for years prior to 2017, if			
5	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI</b> . See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
6	-			
	and 4b from line 1. For result greater than zero, explain in			
-	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			S. (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (19

Schedule A (Form 990 or 990-EZ) 2017

Schedule & (Fo	rm 990 or 990-EZ) 2017 <b>JU</b>	VENILE LAW CENTER	**-**6386	Page 8
Part VI	Supplemental Information III, line 12; Part IV, Section B, lines 1 and 2; Part IV, S 3a and 3b; Part V, line 1;	on. Provide the explanations r n A, lines 1, 2, 3b, 3c, 4b, 4c, Section C, line 1; Part IV, Sect Part V, Section B, line 1e; Par	required by Part II, line 10; Part II, line 17a or 17b; F 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Sectic tion D, lines 2 and 3; Part IV, Section E, lines 1c, 2a rt V, Section D, lines 5, 6, and 8; and Part V, Section nal information. (See instructions.)	on a, 2b,
PART I	I, LINE 10 - OTH	ER INCOME DETAIL		
FUNDRA	ISERS	\$	392,838	
<b>.</b>				
			ب 	
<b>.</b>				
• • • • • • • • • • • • • • • • • •				

Schedule B

or 990-PF)

(Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

Name of the organization

# Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Employer identification number

# JUVENILE LAW CENTER

Organization type (check one):

Section:
X 501(c)( 3 ) (enter number) organization
4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
527 political organization
501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## **Special Rules**

Х	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the
	regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line
	13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1)
	\$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of crueity to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

▶ \$ .....

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)	PAGE 1 OF	3 Page 2
Name of organization	Employer identi	

JUVENILE LAW CENTER

\*\*-\*\*\*6386

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	FOUNDATION TO PROMOTE OPEN SOCIETY 224 WEST 57TH STREET NEW YORK NY 10019	\$ 150,000	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	ANNIE E. CASEY FOUNDATION 501 ST PAUL STREET BALTIMORE MD 21202	\$ 105,000	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	Total contributions	Type of contribution
No. 3	STONELEIGH FOUNDATION 123 SOUTH BROAD STREET STE 1130 PHILADELPHIA PA 19109	\$ 108,600	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	SAMUEL S. FELS FUND 1528 WALNUT STREET SUITE 1002 PHILADELPHIA PA 19102	\$ 40,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY AL 36104	\$190,696	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6	INDEPENDENCE FOUNDATION 200 SOUTH BROAD STREET SUITE 1101 PHILADELPHIA PA 19102	\$45,000	PersonXPayrollNoncash(Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

PAGE 2 OF 3 Page 2

Name of organization					
JUVENILE	LAW	CENTER			
December					

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number \*\*-\*\*6386

Part I	Contributors (see instructions). Use duplicate copies of Pa	art i if additional space is nee	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	EQUAL JUSTICE WORKS 1730 M STREET STE 1010 WASHINGTON DC 20036	\$ 100,000	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	W. CLEMENT & JESSE V. STONE FOUND. 70 E. LAKE STREET STE 1020 CHICAGO IL 60601	\$	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	THE BARRY L. & JAN ROCK ZUBROW FUND 500 BLACK RIVER ROAD FAR HILLS NJ 07931	\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4 ANDRUS FAMILY FUND 330 MADISON AVE, 30TH FLOOR NEW YORK NY 10017	Total contributions	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 11	ELIZABETH ADAMS 26 HUBBARD PARK RD. CAMBRIDGE MA 02138	\$ 100,000	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person X

Schedule B (	Form 990, 990-EZ, or 990-PF) (2017)		3 OF 3 Page 2
	rganization NILE LAW CENTER		bloyer identification number - * * * 6386
Part I	Contributors (see instructions). Use duplicate copies of Pa	rt I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.13	INSTITUTE OF INTERNATIONAL EDUCATION 809 UNITED NATIONS PLAZA NEW YORK NY 10017	\$ <u>50,000</u>	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 14	MKM FOUNDATION 55 WALLS DRIVE, 3RD FLOOR FAIRFIELD CT 06824	\$ 90,000	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.15	THE ROCKING MOON FOUNDATION 5630 WISCONSIN AVE., APT. 1201 CHEVY CHASE MD 20815	\$ 50,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Name, address, and 2n + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupient Payroll Occupient Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
· · · · · · · · · · · · · · · · · · ·		\$	Person Payroll Noncash (Complete Part II for

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

noncash contributions.)

SCHEDULE C	Political C	ampaign and Lobby	/ing Activiti	es	OMB No. 1545-0047
(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527					2017
	Complete if the organization is	s described below.	Attach to Form 99	0 or Form 990-EZ.	Open to Public
Department of the Treasury Internal Revenue Service		ov/Form990 for instructions and			Inspection
If the organization answer	ed "Yes," on Form 990, Part IV, line	e 3, or Form 990-EZ, Part V, I	ine 46 (Political C	Campaign Activities),	then
<ul> <li>Section 501(c)(3) organi</li> </ul>	zations: Complete Parts I-A and B. D	o not complete Part I-C.			
<ul> <li>Section 501(c) (other that</li> </ul>	an section 501(c)(3)) organizations: C	Complete Parts I-A and C below	I. Do not complete	e Part I-B.	
	ns: Complete Part I-A only.				
	ed "Yes," on Form 990, Part IV, lin	e 4, or Form 990-EZ, Part VI,	line 47 (Lobbying	J Activities), then	
<ul> <li>Section 501(c)(3) organi</li> </ul>	zations that have filed Form 5768 (el	ection under section 501(h)): C	omplete Part II-A.	Do not complete Part	II-B.
<ul> <li>Section 501(c)(3) organi</li> </ul>	izations that have NOT filed Form 57	68 (election under section 501(	h)): Complete Par	t II-B. Do not complete	e Part II-A.
If the organization answer	ed "Yes," on Form 990, Part IV, lin	e 5 (Proxy Tax) (see separate	instructions) or	Form 990-EZ, Part V,	line 35c (Proxy
Tax) (see separate instruct					
	r (6) organizations: Complete Part III.				
Name of organization				Employer ident	ification number
•	JVENILE LAW CENTER			**-***63	86
	e if the organization is exem	pt under section 501(c)	or is a sectio	n 527 organizatio	on.
	of the organization's direct and indire	ct political campaign activities	in Part IV (see ins	structions for	
1 Provide a description definition of "political of		et pontieur europaign aeuvitiee			
	ivity expenditures (see instructions)			► \$	
2 Political campaign act	blitical campaign activities (see instructions)	otione)			
	e if the organization is exem				
	ny excise tax incurred by the organization			► \$	
	•			····· • • • ····	·····
	ny excise tax incurred by organization				
•	urred a section 4955 tax, did it file Fo				
4a Was a correction mac					
b If "Yes," describe in P	art IV.	ent under costion E01/c	executions	an 501(c)(3)	
	e if the organization is exem			011 30 1(0)(3).	
<ol> <li>Enter the amount dire</li> </ol>	ctly expended by the filing organization	on for section 527 exempt func	tion		
activities				▶\$	
2 Enter the amount of the	ne filing organization's funds contribu	ted to other organizations for s	ection	<b>N A</b>	
527 exempt function a	activities			►\$	
3 Total exempt function	expenditures. Add lines 1 and 2. Ent	er here and on Form 1120-PO	L,		
line 17b				▶\$	
4 Did the filing organiza	tion file Form 1120-POL for this year	?			Yes No
5 Enter the names, add	resses and employer identification nu	umber (EIN) of all section 527 p	political organization	ons to which the filing	
organization made pa	yments. For each organization listed	, enter the amount paid from th	e filing organizatio	on's funds. Also enter	
	I contributions received that were pro				
as a separate segrega	ated fund or a political action commit	tee (PAC). If additional space is	s needed, provide	information in Part IV.	1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds. If none, enter -0	delivered to a separate
					political organization.
					If none, enter -0
(1)					
(-)					
(2)					
(2)					
(2)					
(3)					
(4)					
(4)					
(5)					
(5)					
(0)					
(6)					

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Schedule C (Form 990 or 990-EZ) 2017

Sch		LE LAW CENTER	**-***6386	Page <b>2</b>
	art II-A Complete if the organiza	tion is exempt under section 501(c)(3) a	and filed Form 5768 (elec	ction under
	section 501(h)).			
A	Check      if the filing organization be	elongs to an affiliated group (and list in Part IV	each affiliated group member	er's name,
	address, EIN, expenses,	and share of excess lobbying expenditures).		
в		checked box A and "limited control" provis	sions apply.	
		ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group totals
1:	a Total lobbying expenditures to influence publ	ic opinion (grass roots lobbying)		
I	b Total lobbying expenditures to influence a leg	gislative body (direct lobbying)		
(		d 1b)		
(	d Other exempt purpose expenditures			
(	e Total exempt purpose expenditures (add line	s 1c and 1d)		
	f Lobbying nontaxable amount. Enter the amo			
	columns.			<u>`</u>
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
	g Grassroots nontaxable amount (enter 25% o	f line 1f)		
	<b>h</b> Subtract line 1g from line 1a. If zero or less,			
	i Subtract line 1f from line 1c. If zero or less, e			
	j If there is an amount other than zero on eithe	er line 1h or line 1i, did the organization file Form 47	20	
	reporting section 4911 tax for this year?			Yes No

4-Year Averaging Period Under section 501(h)

# (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	( <b>d)</b> 2017	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

	* _ * * *		
Part II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).			
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(	a)	(b)
lescription of the lobbying activity.	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local			
legislation, including any attempt to influence public opinion on a legislative matter or			
referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		37	2
e Publications, or published or broadcast statements?		X X	
f Grants to other organizations for lobbying purposes?		<b>^</b>	2
g Direct contact with legislators, their staffs, government officials, or a legislative body?		x	4
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	1	A X	
i Other activities?		•	
j Total. Add lines 1c through 1i		x	
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	01(0)(5)	orse	oction
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(0)(0),	01 50	SCION
501(c)(6).			Yes
4 March 1 March 1 (00% and the start) dues received pendeductible by members?			
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> </ul>			·····
<ul> <li>2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior y</li> </ul>			·····
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members		1	
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of</li> </ul>			
political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year		2b	
c Total		2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the			
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying			
and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	5	
Part IV Supplemental Information			
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list);	Part II-A, I	ines 1	and
2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.			
SCHEDULE C, PART II-B, LINE I			
SCHEDULE C, PART II-B, LINE 1			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			
JUVENILE LAW CENTER LOBBYING EXPENSE IS DE MINIMUS FOR			

SCHEDULE D

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047 201 7 Open to Public Inspection

Employer identification number

JT	JVENILE LAW CENTER		**-**6386
to construction of the	TI Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on I	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
2	Aggregate value of contributions to (during year)		
	Aggregate value of grants non (during year)		
4 5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised	
5	funds are the organization's property, subject to the organization's excl		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
0	only for charitable purposes and not for the benefit of the donor or don	or advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Da	rt II Conservation Easements.	<u></u>	
	Complete if the organization answered "Yes" on	Form 990. Part IV. line 7.	
	Purpose(s) of conservation easements held by the organization (check		
1	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically im	portant land area
		Preservation of a certified histor	-
	Protection of natural habitat		
-	Preservation of open space	pration contribution in the form of a cons	envation
2	Complete lines 2a through 2d if the organization held a qualified conse easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic structure inc		20
d	Number of conservation easements included in (c) acquired after 7/25.		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, released, ex	xtinguished, or terminated by the organiz	ation during the
	tax year ►		
4	Number of states where property subject to conservation easement is		
5	Does the organization have a written policy regarding the periodic mor		
	violations, and enforcement of the conservation easements it holds? $\ _{.}$		
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	of violations, and enforcing conservation	easements during the year
	▶		
7	Amount of expenses incurred in monitoring, inspecting, handling of vic	plations, and enforcing conservation ease	ements during the year
	▶ \$		<i>a</i> s
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easer	nents in its revenue and expense statem	ent, and
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that	describes the
	organization's accounting for conservation easements.		Cimilar Acasta
Pa	rt III Organizations Maintaining Collections of Art	, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), If	not to report in its revenue statement and	d balance sheet
	works of art, historical treasures, or other similar assets held for public		
	public service, provide, in Part XIII, the text of the footnote to its finance		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), f		
	works of art, historical treasures, or other similar assets held for public	c exhibition, education, or research in fur	therance of
	public service, provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical treasures, o		provide the
	following amounts required to be reported under SFAS 116 (ASC 958		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		
For I	Paperwork Reduction Act Notice, see the Instructions for Form 990	J.	Schedule D (Form 990) 2017

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Sche	dule D (Form 990) 2017 JUVENILE	LAW CENTER			**_**						age <b>2</b>
	rt III Organizations Maintainir	g Collections of A	rt, Historical Tre	easures, o	or Other \$	Simila	ar As	sets (	continu	ied)	
	Using the organization's acquisition, access collection items (check all that apply):	sion, and other records,	check any of the follo	wing that are	e a significa	int use	of its				
а	Public exhibition	d 🗌 Lo	an or exchange prog	rams							
b	Scholarly research		her								
С	Preservation for future generations										
4	Provide a description of the organization's of XIII.	collections and explain h	ow they further the o	rganization's	exempt pu	rpose i	n Part				
5	During the year, did the organization solicit	or receive donations of	art, historical treasure	es, or other s	imilar						_
•	assets to be sold to raise funds rather than	to be maintained as par	t of the organization's	s collection?		<u></u>			Ye	s	No
Pa	rt IV Escrow and Custodial A	rangements.							_		
	Complete if the organization	on answered "Yes" o	on Form 990, Par	t IV, line 9	, or repor	ted a	n am	ount or	ר Form		
	990, Part X, line 21.										
1a	Is the organization an agent, trustee, custo										] No
	included on Form 990, Part X?								Ye	s	No
b	If "Yes," explain the arrangement in Part XI	II and complete the follo	wing table:			Г			Amount		
						ŀ	1c		/ inouni		
	Beginning balance						1d				
	Additions during the year						1e				
	Distributions during the year						16 1f				
f	Ending balance Did the organization include an amount on	Form 000 Dort V line 2	1 for occrow or cust	ndial accoun	t liability?	L			Ye	s	No
2a	If "Yes," explain the arrangement in Part XI	L Chock here if the exp	1, 101 escrow of cusic	ovided on Pa	rt XIII					-	1
	rt V Endowment Funds.										
<b></b>	Complete if the organization	on answered "Yes" o	on Form 990. Par	t IV. line 1	0.						
	Complete il trie organizatio	(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Thr	ee years	a back	(e) Four	· years	back
15	Beginning of year balance	1,903,853	2,333,583		0,999	2	,221	,076	1,9	927,	512
	Contributions										
	Net investment earnings, gains, and										
U	losses	196,903	199,730	19	6,981		-24	,953	1	349,	,142
Ь	Grants or scholarships										
	Other expenditures for facilities and										
-	programs	100,572	629,460	5	54,397		5	5,124	-	55,	,578
f	Administrative expenses										
	End of year balance	2,000,184	1,903,853	2,33	3,583	2	,190	,999	2,2	221,	,076
	Provide the estimated percentage of the c	urrent year end balance	(line 1g, column (a))	held as:							
а	Board designated or quasi-endowment 🕨	%									
	Permanent endowment ► 49.99 %										
с	Temporarily restricted endowment ►	50.01%									
	The percentages on lines 2a, 2b, and 2c s										
3a	Are there endowment funds not in the post	session of the organizati	on that are held and	administered	for the				ſ		Τ
	organization by:									Yes	
	(i) unrelated organizations								3a(i)		X
	(ii) related organizations								3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organ			<i>.</i>					3b		
	Describe in Part XIII the intended uses of the		ment funds.		,						
Pa	art VI Land, Buildings, and Eq	uipment.		rt IV line (	110 500	Form	000	Dort X	lino 1	Λ	
	Complete if the organizati					cumulate			(d) Book		
	Description of property	(a) Cost or other bas (investment)	sis (b) Cost or o (othe		• •	reciation	4				
				,							
	Land										
	Buildings										
	Leasehold improvements			70,677		56	,20	0	1	14.	477
	Equipment		<u>+</u>	,.,			,	-		- 1	
	Other		X. column (B) line 10	)c.)	na china an an di cana an an			•	1	14,	477
TOLA			.,	/					ule D (Eo		

Schedule D (Form 990) 2017

Schedule D (Fe	orm 990) 2017 JUVENILE LAW CENTER		**-***6386	Page <b>3</b>
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11b. See Form 990, Part >	K, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuati	on:
	(including name of security)		Cost or end-of-year mark	et value
(1) Financial d	derivatives			
	eld equity interests			
		1		
(E)				
( <b></b> )		1		
(G)				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12.) 🕨			
Part VIII	Investments—Program Related.		11- Cas Farm 000 Dort	V line 12
	Complete if the organization answered "Yes" or			
	(a) Description of investment	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	n (b) must equal Form 990, Part X, col. (B) line 13.) 🕨			
Part IX	Other Assets.			
I CILLIAN	Complete if the organization answered "Yes" of	n Form 990, Part IV, line	e 11d. See Form 990, Part 🤅	X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 15.)	<u></u>	<u></u>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" o	n Form 990, Part IV, line	e 11e or 11f. See Form 990	), Part X,
	line 25.		F	
1.	(a) Description of liability	(b) Book value		
/	income taxes	0.000		
(2) FUND	S HELD AS AGENT	260,000		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)			J	

Schedule D (Form 990) 2017 JUVENILE LAW CENTER	t	**-***6386	Page <b>4</b>
Part XI Reconciliation of Revenue per Audited Financi	al Statements With Rev	venue per Return.	
Complete if the organization answered "Yes" on F			
1 Total revenue, gains, and other support per audited financial statements			2,487,262
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a	408,578	
b Donated services and use of facilities			
c Recoveries of prior year grants			
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		2e	408,578
3 Subtract line 2e from line 1			2,078,684
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 12.)		2,078,684
Part XII Reconciliation of Expenses per Audited Finance	cial Statements With Ex	penses per Return.	
Complete if the organization answered "Yes" on F			
1 Total expenses and losses per audited financial statements			3,371,074
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
b Prior year adjustments			
c Other losses d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1			3,371,074
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)			
	·····	4c	
<ul> <li>c Add lines 4a and 4b</li> <li>5 Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I</i>,</li> </ul>	line 18.)	5	3,371,074
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV. lines 1b and 2	p; Part V, line 4; Part X, line	Э
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p	art to provide any additional in	formation.	
PART V, LINE 4 - INTENDED USES FOR ED	DOWMENT FUNDS		
IARI V, HIRE I INIZADZO ODZO IOI -			
THE ZUBROW ENDOWMENT IS TO PROVIDE A	YEARLY FELLOWS	HIP IN CHILDR	EN'S LAW.
THE FELLOW IS GIVEN THE OPPORTUNITY	TO ENGAGE IN A	WIDE VARIETY	OF ADVOCACY
EFFORTS ON BEHALF OF CHILDREN IN THE	DELINOUENCY AN	D DEPENDENCY	SYSTEM.
EFFORID ON DEMME OF CHIEDREN, IN III			
ZUBROW FELLOWS ARE INVOLVED IN TRAIN	ING, LEGISLATIV	E EFFORTS, LI	TIGATION,
POLICY WORK AND SOME DIRECT REPRESEN	TATION ON A VAR	IETY OF JUVEN	ILE ISSUES.
			· · · · · <i>· · · · · · · · · · · · · · </i>
• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •	•••••••••••••••••••••••••••••••••••••••		
• • • • • • • • • • • • • • • • • • • •			

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SCHEDULE G Supplemental Infor	mation Regard	ing Fund	raising or Gaming	g Activities	OMB No. 1545-0047
(Form 990 or 990-EZ) Complete if the orgorigation	nization entered more the	an \$15,000 on F		ii the	2017
Department of the Treasury Internal Revenue Service	Attach to For Go to www.irs.gov/For				Open to Public Inspection
Name of the organization JUVENILE LAW CENT	ER			Employer identificat ** - ***63	
Part I Fundraising Activities. Complete Form 990-EZ filers are not required	if the organization	on answer	ed "Yes" on Form 9	990, Part IV, line	17.
1 Indicate whether the organization raised funds through			Check all that apply.		
a Mail solicitations			ernment grants		
<b>b</b> Internet and email solicitations		of governm			
c Phone solicitations		ndraising eve			
d In-person solicitations	g 🖂 opeoial la	laraion ig ore			
<ul> <li>2a Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or entit</li> </ul>	with any individual (	including off	icers, directors, trustee	S,	Yes No
<ul> <li>b If "Yes," list the 10 highest paid individuals or entities compensated at least \$5,000 by the organization.</li> </ul>	(fundraisers) pursua	int to agreen	nents under which the f	undraiser is to be	
		(iii) Did fund- raiser have		(v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody or control of contributions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col. <b>(i)</b>	(or retained by) organization
		Yes No			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total           3         List all states in which the organization is registered of			s or has been notified it	is exempt from	
<ol> <li>List all states in which the organization is registered or registration or licensing.</li> </ol>		contribution			
· · · · · · · · · · · · · · · · · · ·					

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

# Schedule G (Form 990 or 990-EZ) 2017 JUVENILE LAW CENTER

\*\*-\*\*\*6386 Page 2

**Part II** Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	gross receipts g				
		<b>(a)</b> Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
		LEADERSHIP PRIZ		NONE	(add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
iue					
Revenue	1 Gross receipts	217,230			217,230
Re					
	2 Less: Contributions	124,152			124,152
	3 Gross income (line 1 minus				
	line 2)	93,078			93,078
	4 Cash prizes	15,000			15,000
	5 Noncash prizes				
					10 500
ses	6 Rent/facility costs	13,780			13,780
<b>Direct Expenses</b>					20 505
ĔX	7 Food and beverages	38,785			38,785
ect					
Dir	8 Entertainment				
		25 512			25,513
	9 Other direct expenses	25,513			257515
			1	1	93,078
		Add lines 4 through 9 in column (c			
	11 Net income summary. St	ubtract line 10 from line 3, column ( plete if the organization answ	worod "Vos" on Earm 990	Part IV line 10 or ren	orted more
				, 1 attiv, inte 19, 01 tep	
	แกลก จาว,000 (	on Form 990-EZ, line 6a.	(b) Pull tabs/instant		(d) Total gaming (add

enue		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue	1 Gross revenue				
nses	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	│	Yes %	Yes %	
	7 Direct expense summary	y. Add lines 2 through 5 in column (	d)	•	
	8 Net gaming income sum	nmary. Subtract line 7 from line 1, co	olumn (d)	►	
		ne organization conducts gaming ac to conduct gaming activities in each	n of these states?		Yes No
	Were any of the organization If "Yes," explain:	n's gaming licenses revoked, suspe	nded, or terminated during the tax		· · · · · · · · · · · · · · · · · · ·

Sche	dule G (Form 990 or 990-EZ) 20	17 JUVENIL	E LAW	CENTE	R	**_**6	38	6	F	Page 3	į
11	Does the organization conduct g								Yes	No	כ
12	Is the organization a grantor, be							_			
	formed to administer charitable	gaming?							Yes	No.	כ
13	Indicate the percentage of gam	ing activity conducted in:				1	ı.				
а	The organization's facility						13a			%	-
b	An outside facility						13b			%	-
14	Enter the name and address of records:	the person who prepare	s the orgar	nization's ga	aming/special events books a	and					
	Name 🕨										
	Address ►										
15a	Does the organization have a c revenue?				ization receives gaming				Yes	No	0
b	If "Yes," enter the amount of ga	ming revenue received l	by the orga	nization 🕨	\$	and the					
	amount of gaming revenue reta	ained by the third party 🕨	\$								
С	If "Yes," enter name and addres	ss of the third party:									
	Name 🕨										
	Address ►										
16	Gaming manager information:										
	Name ►										
	Gaming manager compensatio	on ▶ \$									
	Description of services provide	d 🕨									
	Director/officer	Employee	Inde	pendent cor	ntractor						
17	Mandatory distributions:										
''a	Is the organization required und	der state law to make ch	aritable dis	tributions fr	om the gaming proceeds to						
	retain the state gaming license								Yes	N	C
b	Enter the amount of distribution	ns required under state la	aw to be di	stributed to	other exempt organizations	or					
	spent in the organization's own	exempt activities during	the tax ye	ar 🕨 💲							
Pa	t IV Supplemental In Part III, lines 9, 9t See instructions.	formation. Provide o, 10b, 15b, 15c, 16	the explain the explain the explain the explain the explanation of the	anations i o, as appl	required by Part I, line 2 icable. Also provide any	2b, columns (iii) and y additional informa	ל (v) tion	; an	d		_
					••••••						
								••••			•
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						·····					
						Schedule G (For	m 99	0 or	990-E	Z) 201	7

SCHEDULE J	C For cortain Office	ompensation Information ers, Directors, Trustees, Key Employees, and Highes	OMB No. 1545-0047
(Form 990)		Compensated Employees	2017
	Complete if the or	ganization answered "Yes" on Form 990, Part Ⅳ, lin ▶ Attach to Form 990.	e 23. Open to Public
Department of the Treasury Internal Revenue Service	Go to www.irs.go	► Attach to Form 990. bv/Form990 for instructions and the latest information	on. Inspection
Name of the organization			Employer identification number
	UVENILE LAW CENTE		**-**6386
Part I Questions	Regarding Compensation	n	
		d any of the following to or for a parson listed on Form	Yes No
		d any of the following to or for a person listed on Form vide any relevant information regarding these items.	
First-class or charte		Housing allowance or residence for personal	use
Travel for companie		Payments for business use of personal reside	
· · ·	and gross-up payments	Health or social club dues or initiation fees	
Discretionary spend	-	Personal services (such as, maid, chauffeur,	chef)
b If any of the boxes on li	ine 1a are checked, did the organi	zation follow a written policy regarding payment	
		cribed above? If "No," complete Part III to	
explain			<b>1</b> b
		ursing or allowing expenses incurred by all	
		utive Director, regarding the items checked in line	
1a?			
		is used to establish the compensation of the	
		ion used to establish the compensation of the	
		ply. Do not check any boxes for methods used by a :O/Executive Director, but explain in Part III.	
-		Written employment contract	
Compensation com		Compensation survey or study	
Form 990 of other	ensation consultant	X Approval by the board or compensation com	nittee
	organizations		
4 During the year, did an	v person listed on Form 990, Part	VII, Section A, line 1a, with respect to the filing	
organization or a relate			
•	ayment or change-of-control payr	nent?	4a X
b Participate in, or receiv	e payment from, a supplemental	nonqualified retirement plan?	4b X
		compensation arrangement?	4c X
If "Yes" to any of lines	4a-c, list the persons and provide	the applicable amounts for each item in Part III.	
		nizations must complete lines 5–9.	
		1a, did the organization pay or accrue any	
compensation continge			50 X
If "Yes" on line 5a or 5l	o, describe in Part III.		
6 For poreone listed on F	Form 990 Part VII Section & line	1a, did the organization pay or accrue any	
•	ent on the net earnings of:		
			6a X
If "Yes" on line 6a or 6			
7 For persons listed on F	Form 990, Part VII, Section A, line	1a, did the organization provide any nonfixed	
payments not describe	ed on lines 5 and 6? If "Yes," desc	ribe in Part III	
8 Were any amounts rep	oorted on Form 990, Part VII, paid	or accrued pursuant to a contract that was subject	
to the initial contract ex	ception described in Regulations	section 53.4958-4(a)(3)? If "Yes," describe	
in Part III			<u>8 X</u>
		outtable presumption procedure described in	
Devulations asstics E2	3,4958-6(c)?		

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

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# Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2017 Part II

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

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

		0110 0001	a a a a a a a a a a a a a a a a a a a		(IN Manual )	/E/ Total of columna	(E) Composition
(A) Name and Title	(b) Breakdown of (i) Base compensation	(ii) Bonus & incentive (iii) Other compensation compensation	(iii) Other reportable compensation	(c) retirement and other deferred compensation	benefits	(B)(i)–(D)	<ul> <li>Comparation</li> <li>in column (B) reported</li> <li>as deferred on prior</li> <li>Form 990</li> </ul>
STISAN V MANGOLD	0 188.310	0				203,284	0
EXEC OFFICER	:	0	0	0	0	0	0
MARSHA L. LEVICK	0 225,134	0	0	11,256	21,038	257,428	0
2 CHIEF LEGAL OFFICER		0	0				0
	(II) (I)						
	()						
<u>,                                     </u>	(1)						
	(1)						
	(II)						
	(1)						
	(1)						
	(II)						
	(II)						
	(I) (II)						
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						Sc	Schedule J (Form 990) 2017

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# SCHEDULE M (Form 990)

# **Noncash Contributions**

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

Attach to Form 990.

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

Open To Public Inspection Employer identification number

OMB No. 1545-0047

2017

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Department of the Treasury						
Internal Revenue Service						
Name of the organization						

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JUVENILE LAW CENTER

ra	Tti Types of Property	r		· · · · · · · · · · · · · · · · · · ·				
		(a)	(b)	(c) Noncash contribution	(d)			
		Check if	Number of contributions or	amounts reported on	Method of determinin			
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution am	iounts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	X	2	34,007	STOCK MARKET VAI	LUE		
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►( )							
29	Number of Forms 8283 received by	the organ	ization during the tax yea	ar for contributions for				
	which the organization completed F				29	T		
							Yes	No
30a	During the year, did the organization							
	28, that it must hold for at least thre	e years fro	om the date of the initial	contribution, and which isn'	't required			
	to be used for exempt purposes for	the entire	holding period?			30a		X
b	If "Yes," describe the arrangement i	n Part II.						
31	Does the organization have a gift a		policy that requires the r	eview of any nonstandard				
	contributions?					. 31		X
32a	Does the organization hire or use th	nird parties	or related organizations	to solicit, process, or sell r	noncash			
						. 32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an a	mount in d	column (c) for a type of p	roperty for which column (a	a) is checked,			
	describe in Part II.							
Ear D	apopyork Reduction Act Notice see the Instru	ctions for Fo	rm 990		So	chedule M (F	orm 99	<del>3</del> 0) 2017

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

OMB No. 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O Complete to provide information for responses to specific questions on (Form 990 or 990-EZ) 2017 Form 990 or 990-EZ or to provide any additional information. **Open to Public** Attach to Form 990 or 990-EZ. Department of the Treasury Inspection ► Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Employer identification number Name of the organization \*\*-\*\*\*6386 JUVENILE LAW CENTER FORM 990 - ORGANIZATION'S MISSION JUVENILE LAW CENTER ADVOCATES FOR RIGHTS, DIGNITY, EQUITY AND OPPORTUNITY FOR YOUTH IN THE CHILD WELFARE AND JUSTICE SYSTEMS. FOUNDED IN 1975, JUVENILE LAW CENTER IS THE FIRST NON-PROFIT, PUBLIC INTEREST LAW FIRM FOR CHILDREN IN THE COUNTRY. THROUGH LITIGATION,

APPELLATE ADVOCACY AND SUBMISSION OF AMICUS (FRIEND-OF-THE-COURT) BRIEFS, POLICY REFORM, PUBLIC EDUCATION, TRAINING, CONSULTING, AND STRATEGIC COMMUNICATIONS, WE FIGHT FOR CHILDREN WHO COME INTO CONTACT WITH THE CHILD WELFARE JUSTICE SYSTEMS. WIDELY PUBLISHED AND INTERNATIONALLY RECOGNIZED AS LEADERS IN THE FIELD, JUVENILE LAW CENTER HAS SUBSTANTIALLY SHAPED THE DEVELOPMENT OF LAW AND POLICY ON BEHALF OF YOUTH. WE STRIVE TO ENSURE THAT LAWS, POLICIES, AND PRACTICES AFFECTING YOUTH ADVANCE RACIAL AND ECONOMIC EQUITY AND ARE ROOTED IN RESEARCH, CONSIST WITH CHILDREN'S UNIQUE DEVELOPMENTAL CHARACTERISTICS, AND REFLECTIVE OF INTERNATIONAL HUMAN RIGHTS VALUES.

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE BYLAWS WERE REVISED EFFECTIVE AUGUST 30, 2018 IN THE AREAS OF TERM LIMITS FOR BOARD MEMBERS AND OFFICERS, TITLE CHANGES FOR ORGANIZATION AND BOARD LEADERSHIP, AND CHANGES TO BOARD COMMITTEES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS RECEIVES AN ELECTRONIC COPY OF FORM 990 FOR REVIEW AND APPROVAL AS PART OF THE ANNUAL AUDIT

chedule O (Form 990 or 990-EZ) (2017) me of the organization	Employer identification number						
JUVENILE LAW CENTER	**-**6386						
PROCESS. FOLLOWING THAT, A COMPLETE ELECTR	ONIC COPY OF FORM 990 IS SENT TO						
THE FULL BOARD PRIOR TO FILING.							
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY							
THE EXECUTIVE DIRECTOR MONITORS THE CONFLICT OF INTEREST POLICY O							
GOING BASIS THROUGHOUT THE YEAR.							
FORM 990, PART VI, LINE 15A - COMPENSATION	PROCESS FOR TOP OFFICIAL						
THE EXECUTIVE COMMITTEE OF THE BOARD OF DI	RECTORS MEETS IN EXECUTIVE						
SESSION TO REVIEW AND SET THE EXECUTIVE DI	RECTOR'S ANNUAL COMPENSATION,						
USING ALL NECESSARY DATA TO ESTABLISH A FA	IR AND APPROPRIATE SALARY FOR T						
TOP MANAGEMENT OFFICIAL IN AN AGENCY THE S	IZE AND COMPLEXITY OF THE						
JUVENILE LAW CENTER.							
FORM 990, PART VI, LINE 15B - COMPENSATION	PROCESS FOR OFFICERS						
THERE ARE NO OTHER OFFICERS WHO ARE COMPEN	ISATED OR KEY EMPLOYEES AS DEFIN						
BY FORM 990 INSTRUCTIONS, HOWEVER THE SAME	METHODS DESCRIBED ABOVE ARE IN						
PLACE FOR DETERMINING THE SALARIES OF ALL							
FORM 990, PART VI, LINE 19 - GOVERNING DOC	UMENTS DISCLOSURE EXPLANATION						
JLC MAKES ITS GOVERNING DOCUMENTS, POLICY	STATEMENTS AND FINANCIALS						
AVAILABLE TO THE PUBLIC UPON REQUEST.							
······································							
	PAGE 1 OF 1						

# Juvenile Law Center Board of Directors

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JUAN WILLIAMS Fox News New York, NY

# Juvenile Fighting for the rights and well-being of youth LawCenter

# Program Summary of New Funding September 1, 2017 – August 31, 2018

Juvenile Law Center was successful in securing both new and continued support for our work on behalf of youth in the child welfare and justice systems. When possible, we sought multi-year grants to provide for fiscal stability and planning.

In FY2018, the Andrus Family Fund awarded us a three-year grant of \$300,000 to support our use of a variety of legal strategies including litigation to address conditions in correctional facilities, promote juvenile criminal record expungement, ensure access to vital records and other recommendations to prevent homelessness for youth exiting the foster care and justice systems, and improve foster care for older youth and re-entry to age 21.

The Foundation to Promote Open Society awarded us a one-year \$150,000 time-restricted grant for our work. The Independence Foundation awarded us a three-year grant of \$45,000 for support of our work.

Southern Poverty Law Center awarded us \$190,696 to support our collaborative work in the Legal Center for Youth Justice & Education to develop jurisprudence and policies to advance the educational rights of justice-involved youth. The Legal Center for Youth Justice & Education is a national collaborative established in 2015. The Legal Center strives to ensure that all children in and returning from the juvenile or criminal justice system can access a quality education.

The Rocking Moon Foundation awarded us \$50,000 to host a convening to bring together community activists, racial equity advocates and experts on youth in the justice system to develop strategies to address racial inequity both for youth in the juvenile justice system and those tried as adults. A primary goal of the convening is to collaboratively develop a Plan of Action to address race inequity for youth in the justice system with clear next steps following the convening. This convening and subsequent legal advocacy is desperately needed to address the gross racial disparity at every stage of our justice system

The W. Clement and Jessie V. Stone Foundation awarded us a one-year grant of \$40,000 and The Stoneleigh Foundation awarded us a one-year grant of \$35,000 to support the work of our Youth Advocacy Programs. These programs recruit and train young people with current or past involvement in the child welfare or justice systems, ages 15-22, to lead advocacy and policy reform efforts in their communities. The programs provide young people with extensive training and opportunities to use their personal experiences to create solutions and advocate for reform. During the 2017-2018 project year, youth advocates and alumni presented at over 72 events with policymakers, other stakeholders, and youth. They reached an audience of over 3,600 people in the 2017-2018 program year and reached others through media, materials and online resources.