# Form **990** (Rev. January 2020) Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

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

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

Open to Public Inspection

A	ror the	e 2019 Calendar year, or tax year beginning SEP 1, 2019 and e	ending A	<u>UG 31, 2020</u>	
В	Check if applicabl	C Name of organization		D Employer identific	cation number
	Addre chang	Juvenile Law Center			
	Name chang	Doing business as		23-19763	86
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
F	Final return	1800 John F Kennedy Blyd	.900B	215-625-	
	termin ated			G Gross receipts \$	5,123,781.
Г	□Amen	ded Dhiladalahia Da 10102		H(a) Is this a group re	
F	return Applic			for subordinates	
_	tion pendir	same as C above		H(b) Are all subordinates in	·····= =
_	T		- D 507	1	
		empt status: X 501(c)(3) 501(c)( )◀ (insert no.) 4947(a)(1) o te: <b>www.jlc.org</b>	r 527	1 '	list. (see instructions)
		organization: X Corporation	I Veen	H(c) Group exemption	I State of legal domicile: PA
	art I	Summary	L Year	of formation; 1975  N	A State of legal domicile; PA
_	1	Briefly describe the organization's mission or most significant activities: Advoc			
Activities & Governance		equity, & opportunity for youth in child w	welfar	<u>re &amp; justice</u>	systems.
'n	2	Check this box  if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	sets.
ē	3	Number of voting members of the governing body (Part VI, line 1a)		3	18
Ö	4	Number of independent voting members of the governing body (Part VI, line 1b)			18
ون در	5 5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			25
ij	6	Total number of volunteers (estimate if necessary)			25
<u>`</u>	7 2	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă	' L	Net unrelated business taxable income from Form 990-T, line 39			0.
_	<b>├</b> ~	Not difficiated business taxable income from 1 offi 500 1, line 60		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		2,586,913.	4,665,460.
	9	- (		396,626.	37,180.
Ver	10	, , , ,		105,472.	131,590.
Be	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)  Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	4,695.
	1			3,089,011.	4,838,925.
_	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	0.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		2,405,172.	2,784,977.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		74,626.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		/4,040.	54,638.
.X	b	Total fundraising expenses (Part IX, column (D), line 25)   461,20		015 100	056.746
ш	1 ''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		915,199.	856,746.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,394,997.	3,696,361.
	19	Revenue less expenses. Subtract line 18 from line 12		-305,986.	1,142,564.
t Assets or	9		Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		6,018,596.	8,491,813.
t As	21	Total liabilities (Part X, line 26)		340,679.	1,095,248.
<u>S</u>	22	Net assets or fund balances. Subtract line 21 from line 20		5,677,917.	7,396,565.
P	art II	Signature Block			
Und	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer	has any knowledge.	
Sig	ın	Signature of officer		Date	
He	re	Susan V. Mangold, Chief Executive Office	cer		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	I	Date Check C	PTIN
Pai	d	Joyce Miller		self-employ	
Pre	parer	Firm's name J. MILLER & ASSOCIATES		Firm's EIN ▶	27-2001590
Use	Only	Firm's address 1617 John F. Kennedy Blvd.			
_		Philadelphia, PA 19103		Phone no. 21	5-600-1701
Ма	y the II	RS discuss this return with the preparer shown above? (see instructions)			Yes No

Form	n 990 (2019) Juvenile Law Center	23-1976386	Page 2
_	rt III   Statement of Program Service Accomplishments		••
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
-	JLC advocates for rights, dignity, equity, and opportu	nity for youth	n
	in the child welfare and justice systems.	<u> </u>	· <del>-</del>
	III die dilla wellale dia Jabelee byboomby		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2	, , , , , , , , , , , , , , , , , , , ,		s X No
	prior Form 990 or 990-EZ?	Ye:	S A NO
_	If "Yes," describe these new services on Schedule O.		<b>v</b>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?Ye	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services	s, as measured by expenses	S.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$2, 910, 391. including grants of \$)	Revenue \$63	<b>,316.</b> )
	Through litigation, appellate advocacy and submission	of amicus	
	(friend-of-the-court) briefs, policy reform, public ed	lucation,	
	training, consulting, and strategic communications, JI	C fights for	
	children who come into contact with the child welfare		
	systems. JLC strives to ensure that laws, policies, an		
	affecting youth advance racial and economic equity and		า
	research, consistent with children's unique developmen		•
	characteristics, and reflective of international human		3
	characteristics, and refrective of international number	. rrgnes varues	•
	· <u> </u>		
4b	(Code:) (Expenses \$) (including grants of \$)	Revenue \$	)
_			
4c	(Code:) (Expenses \$ including grants of \$) (	Revenue \$	)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses ▶ 2,910,391.		

# Form 990 (2019) 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?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_	37	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	l _		- v
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			<b>₩</b>
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
_	Schedule D, Part III	8_		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	Х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
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,	44.	Х	
h	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	- 22	
D		11b		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		1
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
ч	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	<u></u>	X

Pai	990 (2019) Juvenile Law Center 23-1970  TIV Checklist of Required Schedules (continued)			age <b>4</b>
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		37	
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ч	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
Lou	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			,,
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00-		x
00	"Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
UZ.	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			

#### Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 41 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners?

If "Yes," complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Х

36

37

Form 990 (2019)

Juvenile Law Center

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return	2a	25				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	X		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accour	nt)?	4a		X	
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).	_		37	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction file.			5b			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c			
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			60		x	
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions.			6a			
D				6b			
7	Organizations that may receive deductible contributions under section 170(c).			JU			
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices r	provided to the payor?	7a	Х		
b				7b	X		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
	to file Form 8282?			7c		х	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontrac	t?	7e		Х	
f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g			
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	е				
	sponsoring organization have excess business holdings at any time during the year?			8			
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a			
b				9b			
10	Section 501(c)(7) organizations. Enter:	1	1				
	Initiation fees and capital contributions included on Part VIII, line 12	10a					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter:	11a	1				
a L	Gross income from members or shareholders	11a					
D	Gross income from other sources (Do not net amounts due or paid to other sources against	11b					
12a	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		7	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	ıza			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120					
	In the consideration Property to the consequence of			13a			
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c					
	Did the constitution and the constitution of t			14a		Х	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O		14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $$1,000,000$ in remune		or				
	excess parachute payment(s) during the year?			15		X	
	If "Yes," see instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incor	ne?	16		X	
	If "Yes," complete Form 4720, Schedule O.						

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X		
Sec	tion A. Governing Body and Management							
					Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18					
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent	1b	18					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other					
	officer, director, trustee, or key employee?			2		Х		
3	Did the organization delegate control over management duties customarily performed by or under the							
	of officers, directors, trustees, or key employees to a management company or other person?							
4								
5	Did the organization become aware during the year of a significant diversion of the organization's asset			5		Х		
6	Did the organization have members or stockholders?			6		Х		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap							
	more members of the governing body?			7a		X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto							
	persons other than the governing body?			7b		Х		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
а	The governing body?	,	Ü	8a	Х			
b	Each committee with authority to act on behalf of the governing body?			8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read							
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev							
	(1110 0001011 21 0440010 1110111011011 201010 1101104 2) 110 1110 11011101	0,700			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х		
	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.							
		•	,	10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	Х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		· ·					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х			
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y							
	in Schedule O how this was done	,		12c	Х			
13	Did the organization have a written whistleblower policy?			13	Х			
14	Did the organization have a written document retention and destruction policy?			14	Х			
15	Did the process for determining compensation of the following persons include a review and approval							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-						
а	The organization's CEO, Executive Director, or top management official			15a	Х			
	Other officers or key employees of the organization			15b	Х			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent w	ith a					
	taxable entity during the year?			16a		Х		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	-	•					
	exempt status with respect to such arrangements?			16b				
Sec	tion C. Disclosure				•	•		
17	List the states with which a copy of this Form 990 is required to be filed ▶PA, NY							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	-T (Section 501(c)(3)	s onlv)	availa	.ble		
	for public inspection. Indicate how you made these available. Check all that apply.		( // .	,,				
	Own website Another's website X Upon request Other (explain	on So	chedule (O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, coi		,	d finan	cial			
	statements available to the public during the tax year.		pssy, an					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records					
	Kauthar Rahman, Chief Operating Officer - 215625055							
	1800 John F. Kennedy Blvd. STE 1900B, Philadelphia,		19103					

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

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

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

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

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

Check this box if neither the organization	n nor any related	orga	niza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable	Reportable	Estimated			
	hours per	box			compensation	compensation	amount of			
	week	_	cer an	ia a a	recto	r/trus	iee)	from	from related	other
	(list any	irecto						the organization	organizations (W-2/1099-MISC)	compensation
	hours for related	e or d	stee			sated		(W-2/1099-MISC)	(88-2/1099-181130)	from the organization
	organizations	trustee or director	Institutional trustee		yee	mper		(** 2/ 1000 1/1100)		and related
	below	Individual t	ution	 	Key employee	est co oyee	er			organizations
	line)	Indiv	Instir	Offlicer	Key (	Highest compensated employee	Former			
(1) Stephen Labation	2.00									
Board Chair	0.00	Х		X				0.	0.	0.
(2) Kathleen Chimicles, ASA	2.00									
Board Vice Chair	0.00	Х		Х				0.	0.	0.
(3) Suzanne Meiners-Levy	2.00									
Board Treasurer	0.00	Х		Х				0.	0.	0.
(4) Thomas M. McCoy, Esq.	2.00	1							_	
Board Secretary	0.00	Х		Х				0.	0.	0.
(5) Scott Barsky, CPA	2.00	ļ								
Board Member	0.00	Х						0.	0.	0.
(6) James Bell	2.00	1								_
Board Member	0.00	Х						0.	0.	0.
(7) Tami Benton, MD	2.00	ļ								
Board Member	0.00	Х						0.	0.	0.
(8) Emily Buss, Esq.	2.00									
Board Member	0.00	Х						0.	0.	0.
(9) Gail Chavis	2.00									
Board Member	0.00	Х						0.	0.	0.
(10) Susan Jin Davis	2.00									
Board Member	0.00	Х						0.	0.	0.
(11) Nancy Gertner, Esq.	2.00	l								
Board Member	0.00	Х						0.	0.	0.
(12) Sekou Lewis, Esp.	2.00	.,								
Board Member	0.00	Х						0.	0.	0.
(13) Johnny Perez	2.00	.,								
Board Member	0.00	Х	_					0.	0.	0.
(14) Julia H. Pudlin, Esq.	2.00	-							_	_
Board Member		Х		$\vdash$				0.	0.	0.
(15) Ann Rosewater	2.00	₩.							_	_
Board Member	0.00	Х	-	$\vdash$				0.	0.	0.
(16) Elizabeth W. Scott, Esq. Board Member	0.00	X						0.	0.	0.
(17) Barry L. Zubrow	2.00	^						0.	0.	<b>.</b>
Immediate Past Chair	0.00	Х						0.	0.	0.
Immodiace rast chair	1 0.00	Λ						1 0.	U •	- OOO (22.42)

2	Total number of independent contractors (including but not limited to those listed \$100.000 of compensation from the organization • 0	above) who received more than	

Form 990 (2019) Juvenile Law Center
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	ne in this Part VIII			
			,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns 1a					
ant		Membership dues 1b		-			
ច្ច		Fundraising events 1c					
fts,		Related organizations 1d		1			
ig ig		Government grants (contributions)  1e		1			
Sin		All other contributions, gifts, grants, and		-			
ig ig	'		,665,460.				
를 돌	_		,005,400.	-			
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in lines 1a-1f		4,665,460.			
0 8		Total. Add lines 1a-1f	Business Code	1			
_	0 -	Attorney Fee Recovery	541100	25,782.	25,782.		
ice	2 a	Other Fees, Honoraria,	541100	11,398.	11,398.		
er.			341100	11,390.	11,390.		
n S	С.						
gra Be	d						
Program Service Revenue	e	All					
-		All other program service revenue		37,180.			
		Total. Add lines 2a-2f	<b></b>	37,100.			
	3	Investment income (including dividends, inter		110 140			110 140
		other similar amounts)		110,149.			110,149.
	4	Income from investment of tax-exempt bond p					
	5	Royalties(i) Real					
			(ii) Personal	-			
		Gross rents6a					
		Less: rental expenses 6b	+	-			
		Rental income or (loss) 6c					
		Net rental income or (loss)	(") OH				
	7 a	Gross amount from sales of (i) Securities	(ii) Other	-			
		assets other than inventory 7a 306,297.	•	-			
	b	Less: cost or other basis					
nu		and sales expenses 75 284,856.	•	-			
Revenue		Gain or (loss) 7c 21,441.		21 441	21 441		
Ř		Net gain or (loss)		21,441.	21,441.		
ther	8 a	Gross income from fundraising events (not					
ğ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18		-			
		Less: direct expenses 8t					
		Net income or (loss) from fundraising events	<b>_</b>				
	9 a	Gross income from gaming activities. See					
		Part IV, line 19		-			
		Less: direct expenses 9k					
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances10		-			
		Less: cost of goods sold 10	<u>b</u>				
$\rightarrow$	С	Net income or (loss) from sales of inventory					
ङ		Miggollo-serve	Business Code	4 (05	4 605		
eor re		Miscellaneous	541900	4,695.	4,695.		
lan	b						
Miscellaneous Revenue	С						
Β̈́		All other revenue		4 605			
		Total. Add lines 11a-11d		4,695.	62 216	^	110 140
	12	Total revenue. See instructions		4,838,925.	63,316.	0.	110,149.

### 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).

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			ірівів соішпіп (А).	
	•		(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	651,823.	415,861.	94,185.	141,777.
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	1,624,123.	1,455,101.	46,388.	122,634.
8	Pension plan accruals and contributions (include	,	, ,	,	,
-	section 401(k) and 403(b) employer contributions)	68,215.	56,077.	4,213.	7,925.
9	Other employee benefits	274,526.	225,676.	4,213. 16,956.	31.894.
10	Payroll taxes	166,290.	136,700.	10,271.	7,925. 31,894. 19,319.
11	Fees for services (nonemployees):	= 00,200	===,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
	Management				
b		3,061.	3,061.		
	3	40,072.	3,0011	40,072.	
	3	40,072.		40,0724	
	Lobbying Professional fundraising services. See Part IV, line 17	54,638.			54,638.
e	· •	34,030.			34,0301
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,	239,974.	156,819.	83,155.	
40	column (A) amount, list line 11g expenses on Sch O.)	239,914.	130,019.	05,155	
12	Advertising and promotion	56,772.	47,689.	2,343.	6,740.
13	Office expenses	33,196.	27,289.	2,050.	3,857.
14	Information technology	33,190.	21,209.	2,030.	3,037.
15	Royalties	181,792.	149,447.	11,223.	21,122.
16	Occupancy			7,436.	13,987.
17	Travel	124,356.	102,933.	7,430.	13,907.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	27 110	27 110		
19	Conferences, conventions, and meetings	27,110.	27,110.		
20	Interest				
21	Payments to affiliates	CE C73	E2 007	4 056	7 (20
22	Depreciation, depletion, and amortization	65,673.	53,987.	4,056.	7,630.
23	Insurance	28,384.	23,333.	1,753.	3,298.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а	Fundraising Expense	25,133.	0.	0.	25,133.
b	Library	20,460.	20,460.	0.	0.
С	Miscellaneous	10,763.	8,848.	665.	1,250.
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,696,361.	2,910,391.	324,766.	461,204.
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 if following SOP 98-2 (ASC 958-720)				
					Earm 990 (2010)

Form 990 (2019)
Part X | Balance Sheet

Par	τX	Balance Sheet					
		Check if Schedule O contains a response or r	note to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			250,982.	2	1,346,939 1,339,310
	3	Pledges and grants receivable, net	713,551.	3	1,339,310		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of the	ns		5		
	6	Loans and other receivables from other disqu	alified pers	ons (as defined			
		under section 4958(f)(1)), and persons describ	oed in sect	on 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ϋ́	9	Prepaid expenses and deferred charges			100,863.	9	126,084
	10 a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	354,600.			
	b	Less: accumulated depreciation	10b	171,899.	64,449.	10c	182,701
	11	Investments - publicly traded securities			4,888,751.	11	5,496,779
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must e			6,018,596.	16	8,491,813
	17	Accounts payable and accrued expenses			99,179.	17	269,447
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
es	22	Loans and other payables to any current or fo					
Ħ		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of the	•			22	
-	23	Secured mortgages and notes payable to unr				23	427 750
	24	Unsecured notes and loans payable to unrela	-			24	437,750
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	•	•	241 500		200 NE1
		of Schedule D		·····	241,500. 340,679.		388,051 1,095,248
	26	Total liabilities. Add lines 17 through 25		▶ ▼	340,079.	26	1,095,246
ပ္		Organizations that follow FASB ASC 958, o	neck nere				
uce	07	and complete lines 27, 28, 32, and 33.		-	2,257,582.	27	2,378,503
ala	27	Net assets with departmentions			3,420,335.	28	5,018,062
g	28	Net assets with donor restrictions  Organizations that do not follow FASB ASC			3,420,333.	20	3,010,002
ᇤ		and complete lines 29 through 33.	, 956, CHE	K liere			
o l	20	•	do			29	
ets	29 30	Capital stock or trust principal, or current fun- Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated				31	
<b>1</b>		Total net assets or fund balances			5,677,917.	32	7,396,565.
ΘI	32						

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Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,8			
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,6	96	,36	<u>51.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	1,1	42	, 56	54.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,6			
5	Net unrealized gains (losses) on investments	5	5	<u> 76</u>	,08	<u>34.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	7,3	<u> 96</u>	,56	<u> 55.</u>
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_	١	'es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2a _		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	lit			
	Act and OMB Circular A-133?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		it			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			Bb		
			Fo	orm 9	90 (2	2019)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

**Employer identification number** 

Juvenile Law Center 23-1976386 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Total

# Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2459314.	3953564.	1951815.	2586913.	4665460.	15617066 <b>.</b>
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2459314.	3953564.	1951815.	2586913.	4665460.	15617066.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						6464517.
	Public support. Subtract line 5 from line 4.						9152549.
Sec	ction B. Total Support				T		
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	2459314.	3953564.	1951815.	2586913.	4665460.	15617066.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	444 006	40= 000	100 170	405 450		
	and income from similar sources	114,386.	125,203.	120,472.	105,472.	110,149.	575,682.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	100 561	E1 106	00 000	100 005		454 550
	assets (Explain in Part VI.)	189,561.	71,106.	93,078.	100,807.		454,552.
11	<b>Total support.</b> Add lines 7 through 10						16647300.
12	Gross receipts from related activities,	•	,			12	
13	First five years. If the Form 990 is for				•		
Sec	organization, check this box and store ction C. Computation of Publi						<b></b>
14	Public support percentage for 2019 (li			olumn (f\)		14	54.98 %
15	Public support percentage from 2018					15	60.47 %
	33 1/3% support test - 2019. If the c						
	<b>stop here.</b> The organization qualifies						
b	33 1/3% support test - 2018. If the o						
_	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ū					•
	meets the "facts-and-circumstances"				-	-	
b	10% -facts-and-circumstances test						
-	more, and if the organization meets the	ū				•	
	organization meets the "facts-and-circ		•		•		<b>▶</b> □
18	Private foundation. If the organization			•			• <b>&gt;</b>

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

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

Se	ction A. Public Support	elow, please comp	Diete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						,,
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 organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	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						
ď	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included 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, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiza	ation,
	check this box and stop here						<b></b> ▶□
Se	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2019 (li	ine 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2018					16	%
Se	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	19 (line 10c, colur	mn (f), divided by li	ine 13, column (f))		17	%
	Investment income percentage from 2					18	%
19	<b>33 1/3% support tests - 2019.</b> If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar						<b>&gt;</b>
k	33 1/3% support tests - 2018. If the						
20	line 18 is not more than 33 1/3%, che <b>Private foundation.</b> If the organizatio						
LV	i i vate i variationi. Il tile organizatio	TI GIG HOL GHEGK A	201 UI III 10 14, 19	u, or rob, crieck li	no box and see III		

### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Pa	rt IV   Supporting Organizations (continued)			
	tr 5 5 (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
u	below, the governing body of a supported organization?	11a		
b	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 <b>Part VI.</b>	11c		
	tion B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	110
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			L
	tion of type it cupperting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	INO
•	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	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	•		
	and Divining 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		163	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		2		
3	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			
Ū	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		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.	-		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	ructions		
2	Activities Test. Answer (a) and (b) below.	uctions)	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	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? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
-	of its supported organizations? If IIVos II describe in Part VI the releasing the the experimentar in this record	3h		

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi:	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (explain in F	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must	complete Sec	tions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions).

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	 S		
4	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in <b>Part VI</b> ). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
	Distributions to attentive supported organizations to which the	ne organization is responsive	1	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
	Line 8 amount divided by line 9 amount			
	anno anno anno anno anno anno anno anno	(i)	(ii)	(iii)
Section	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
_1_	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	Distributions for 2019 from Section D,			
	line 7:			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
	Excess distributions carryover to 2020. Add lines 3j			
,	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part IV, Section A, line 1; Part IV, Sect	<b>Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, tion D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
Schedule A, Part	II, Line 10, Explanation for Other Income:
FUNDRAISERS	
2015 Amount: \$	189,561.
2016 Amount: \$	71,106.
2017 Amount: \$	93,078.
2018 Amount: \$	100,807.
2019 Amount: \$	0.

#### **SCHEDULE C**

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

Inspection

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

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

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

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

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

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

Iux	, (see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.		1_	
Nan	ne of organization			Em	ployer identification number
	Juvenil	e Law Center			23-1976386
Pa	art I-A Complete if the org	anization is exempt unde	er section 501(c)	or is a section 527 o	rganization.
1	Provide a description of the organiz	ation's direct and indirect politica	ıl campaign activities i	n Part IV.	
2	Political campaign activity expendit	ures		<b>&gt;</b>	\$
3	Volunteer hours for political campai				
Pa	art I-B Complete if the org	anization is exempt unde	er section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization unde	er section 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	<b></b> ▶	\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 f	or this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt unde	er section 501(c),	except section 501(	c)(3).
1	Enter the amount directly expended	by the filing organization for sec	tion 527 exempt funct	ion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to oth	er organizations for se	ection 527	
	exempt function activities			<b>&gt;</b>	\$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here ar	nd on Form 1120-POL,	ı	
	line 17b			<b>&gt;</b>	\$
4	Did the filing organization file Form				
5	Enter the names, addresses and en				
	made payments. For each organization	tion listed, enter the amount paid	from the filing organiz	ation's funds. Also enter t	ne amount of political
	contributions received that were pro-			•	ate segregated fund or a
	political action committee (PAC). If	additional space is needed, provi	de information in Part	IV.	
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0-	promptly and directly delivered to a separate
					political organization.
					If none, enter -0

Schedule C (Form 990 or 990-EZ) 2019	Juvenil	e La	w Center		23-1	1976386 Page 2
Part II-A Complete if the org	anization i	s exer	npt under sectior	n 501(c)(3) and file	ed Form 5768 (ele	ection under
section 501(h)).						
	-			Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and shar			• •			
B Check ► if the filing organiza	tion checked	box A a	nd "limited control" pro	visions apply.		T
	ts on Lobbyiı ditures" mea	• .	nditures ınts paid or incurred.)		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to influ	ience nublic (	ninion (	grassroots Johhving)			
<b>b</b> Total lobbying expenditures to influ	•	•	,			
c Total lobbying expenditures (add li	-		• • • • •			
d Other exempt purpose expenditure						
e Total exempt purpose expenditure						
f Lobbying nontaxable amount. Enter	•		,	n columns		
If the amount on line 1e, column (a) o						
	1 (D) 15.		bying nontaxable am	ount is.		
Not over \$500,000	2,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000			00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (en	tor 25% of lin	o 1f\				
h Subtract line 1g from line 1a. If zero		,				
ŭ	,	0				
i Subtract line 1f from line 1c. If zero	•		ling 1; did the examina			
j If there is an amount other than zer		ie in or	_			Yes No
reporting section 4911 tax for this		Voor Av	eraging Period Under	Section 501/h)		Yes No
(Some organizations the	nat made a s	ection 5		have to complete all c	of the five columns b	elow.
	Lobbyir	ng Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 201	6	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	(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) 2019

# Schedule C (Form 990 or 990-EZ) 2019 Juvenile Law Center 23-19763 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(b)
	e 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:			
а	Volunteers?		X	
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
	Media advertisements?		X	04.0
	Mailings to members, legislators, or the public?	X		213.
	Publications, or published or broadcast statements?		X	
	Grants to other organizations for lobbying purposes?	77	X	0.6.6
_	Direct contact with legislators, their staffs, government officials, or a legislative body?	X	37	966.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?		X X	
	Total. Add lines 1c through 1i			1,179.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or sec	tion
	501(c)(6).			
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			<u> </u>
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section		• •	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	NO OR	(b) Part i	II-A, IIIIe 3, 15
_			1.4	
1 2	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	aı		
9			2a	
	Current year Carryover from last year			
	Total			
3	4		۔ ا	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the exceeds the amount on line 3.			
-	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po			
	expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Par	t IV Supplemental Information			
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (see
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.			
Scl	nedule C, Part II-B, Line 1			
			_	
Ju	venile Law Center lobbying expense is de minimus for	state	and and	tederal
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TOI	obying.			

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Juvenile Law Center

**Employer identification number** 23-1976386

Pai	t I Organizations Maintaining Donor Advised	d Funds or Other	Similar Funds	or Accounts. Complete if the	
	organization answered "Yes" on Form 990, Part IV, line	e 6.			
		(a) Donor advi	sed funds	(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v	writing that the assets	held in donor advis	ed funds	
	are the organization's property, subject to the organization's				
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that	grant funds can be	used only	
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for	any other purpose	conferring	
	impermissible private benefit?				
Pai				Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	`	<u>^</u>		
	Preservation of land for public use (for example, recreated	tion or education)		f a historically important land area	
	Protection of natural habitat Preservation of a certified historic structure				
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contr	ibution in the form		
	day of the tax year.			Held at the End of the Tax Year	
а	Total number of conservation easements				
b					
С	Number of conservation easements on a certified historic stru				
d	Number of conservation easements included in (c) acquired a				
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	r terminated by the	organization during the tax	
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the per				
_	violations, and enforcement of the conservation easements it				
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations,	and enforcing cons	servation easements during the year	
-	Assemble for a second in s			Manager and the state of the st	
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and	enforcing conserva	tion easements during the year	
	▶ \$ Does each conservation easement reported on line 2(d) above	a action the requireme	ente of continu 170/	h)/4\/D\/i\	
8		•	•		
0	and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation				
9	balance sheet, and include, if applicable, the text of the footn		=		
	organization's accounting for conservation easements.	lote to the organization	i S ili aliciai Statelli	ents that describes the	
Pai	t III Organizations Maintaining Collections of	Art. Historical Tr	easures, or Ot	her Similar Assets.	
	Complete if the organization answered "Yes" on Form		,		
1a	If the organization elected, as permitted under FASB ASC 95		evenue statement a	nd balance sheet works	
	of art, historical treasures, or other similar assets held for pub	•			
	service, provide in Part XIII the text of the footnote to its finan	•	•	•	
h	If the organization elected, as permitted under FASB ASC 95				
-	art, historical treasures, or other similar assets held for public	•			
	provide the following amounts relating to these items:	oximpition, cadeation,	or recourser in runti	ioranes or public sorvies,	
	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$	
				<b>L</b> .	
2	If the organization received or held works of art, historical trea				
_	the following amounts required to be reported under FASB A			J , F	
а	Revenue included on Form 990, Part VIII, line 1				
	Assets included in Form 990, Part X			<b>&gt;</b> \$	

(ii) Related organizations 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, an	d Equipment.
-----------------------------	--------------

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
<b>b</b> Buildings				
c Leasehold improvements				
<b>d</b> Equipment		354,600.	171,899.	182,701.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal	l Form 990 Part X colun	nn (B) line 10c )		182,701.

Schedule D (Form 990) 2019

Part VII	Investments - Other Securities.			
	Complete if the organization answered "Yes"			
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financia	al derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes"		11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end	Lafvaar markat valua
	(a) Description of investment	(b) Book value	(c) Method of Valuation. Cost of end	i-oi-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
<u>(6)</u>				
(7)				
(8)				
(9)	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
1 0.10 13 1	Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990 Part X line 15	
		Description		(b) Book value
(1)	, ,	•		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	ımn (b) must equal Form 990. Part X. col. (B) line	e 15.)		
Part X	Other Liabilities.	,		
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1.	(a) Description of liability			(b) Book value
	leral income taxes			
	fundable Advance			2,500.
$-\!$	ınds Held as Agent			75,000.
	eferred Rent			60,551.
(5) De	eferred Revenue			250,000.
(6)				
(7)				
(8)				
(9)				000 000
•	ımn (b) must equal Form 990, Part X, col. (B) line	•	<b>&gt;</b>	388,051.
<ol><li>Liability</li></ol>	for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements the	nat reports the

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

Par	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per Re	turn.	zy, coo con rage
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	ła.			
1	Total revenue, gains, and other support per audited financial statements			1	5,415,009.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	576,084.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	576,084.
3	Subtract line 2e from line 1			3	4,838,925.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIII.)	4b			•
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	\\\/:4b	Fyranca nay F	5	4,838,925.
Pai	rt XII Reconciliation of Expenses per Audited Financial Stater		Expenses per F	Returr	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		Ι. Ι	2 606 261
1	Total expenses and losses per audited financial statements			1	3,696,361.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ما			
a	Donated services and use of facilities			-	
b	Prior year adjustments			-	
C	Other losses			-	
d	, , , , , , , , , , , , , , , , , , , ,			2e	0
е 3				3	3,696,361.
4	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:			3	3,030,301.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
				1	
				4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)			5	3,696,361.
Pai	rt XIII Supplemental Information.				
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	rt IV, lines 1b	and 2b; Part V, line 4	l; Part X	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac	lditional inforn	nation.		
_					
Par	rt V, Line 4 - Intended Uses for Endowment	Funds			
mh a	. Tubuan andarment is to provide a manufic	fo110	.bin in abi	1 4	m!a 1a
TITE	e Zubrow endowment is to provide a yearly	rerrows	surb in cur	lare	en s law.
mhс	e fellow is given the opportunity to engag	ro in a	wide warie	+ 37 6	∖£
1110	e refrom is given the opportunity to engag	je ili a	wide valle	.cy (	) <u> </u>
adv	vocacy efforts on behalf of children in th	ne delir	nguency and	der	pendency
<u> </u>	vocacy cricics on scharr or ourraren in cr	ic dolli	iquerie, una	. uc <u>r</u>	ociiaciio y
svs	stem. Zubrow fellows are involved in trai	ning, 1	legislative	eff	orts,
		<i>3</i> /			
1it	tigation, policy work and some direct repr	esentat	ion on a v	arie	ety of
juv	venile issues.				

#### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

**Employer identification number** 

Name of the organization

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

23-1976386 Juvenile Law Center Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations g X Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Berger Hirschberg Strategies Fundraising Consultant Yes No LLC ( Fundraising Consultant Only- Fixed Price Х 0 54,638 0. 54,638, Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. PA,NY

		of fundraising event contributions and gro	_	-EZ, lines 1 and 6b. List e	· · · · · · · · · · · · · · · · · · ·	
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
Reve	1	Gross receipts				
	,	Less: Contributions				
	_	2000. 00/11/10/10/10				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
m	5	Noncash prizes				
ense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Dire						
	8	Entertainment				
	9	Other direct expenses			<b>•</b>	
	ı	Net income summary. Subtract line 10 from li				
Pa	ırt I	II Gaming. Complete if the organization a	answered "Yes" on Form			
	ı	\$15,000 on Form 990-EZ, line 6a.	T	I		I.,
ine			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue						
<u> </u>	1	Gross revenue				
ses	2	Cash prizes				
xpen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	Ť		Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	ı 5 in column (d)		<b>&gt;</b>	
_	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b> _	
9	Ent	ter the state(s) in which the organization condu	icts gaming activities:			
		the organization licensed to conduct gaming ac	_	states?		Yes No
		No," explain:				
10-		are any of the organization's domina licenses to	wokod suspended er te	arminated during the tax :	voar?	Yes No
		ere any of the organization's gaming licenses re Yes," explain:	· · · · · · · · · · · · · · · · · · ·	ammated during the tax y	/Cai !	. Lites Lino
	_					

<u>Sch</u>	nedule G (Form 990 or 990-EZ) 2019 JUVENIIE LAW CENTER 23-	<u> 19/0300</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	c If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	••	
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	art III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
Sc	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundraiser	s:	
(i	.) Name of Fundraiser:		
Be	erger Hirschberg Strategies LLC ( Fundraising Consultant Only-F	ived Dr	ice)
			<u> </u>
<u>(i</u>	.) Address of Fundraiser: 335 Madison Avenue, New York, NY 100	17	

Schedule G	G (Form 990 or 990-EZ)	Juvenile :	Law	Center	23	1976386	Page 4
Part IV	(Form 990 or 990-EZ)  Supplemental Inform	mation <sub>(continued</sub>	d)				
						· · · · · · · · · · · · · · · · · · ·	

## SCHEDULE J (Form 990)

Department of the Treasury

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Juvenile Law Center

Employer identification number 23-1976386

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year did any nersen listed on Form 000 Part VIII Section A line 1s with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	-10		
	The state of the state of the persons and provide the approach amounted to each term in a trin.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			7-
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2019

Juvenile Law Center Schedule J (Form 990) 2019

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

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

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

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	1	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(c)-(i)(s)	ın column (B) reported as deferred on prior Form 990
(1) Susan V. Mangold	<u>(i)</u>	194,021.	0	0.	9,815.	5,274.	209,110.	0
Chief Executive Officer	I ∷	0	0	0.	0	0	0	0
(2) Marsha Levick	Ξ	234,029.	0	0.	11,735.	20,404.	266,168.	0
Chief Legal Officer	(ii)	• 0	0	0	0	• 0	• 0	0
(3) Jessica Feierman	(j)	116,091.	0.	• 0	6,146.	29,593.	151,830.	• 0
Senior Managing Director	(ii)	0.	0.	0.	0.	• 0	0.	0
	(i)							
	(ii)							
	(j)							
	≘							
	Ξ							
	<u> </u>							
	Ξ							
	<u> </u>							
	Ξ							
	I ∷							
	(i)							
	(ii)							
	(j)							
	(ii)							
	(i)							
	<u>(ii</u>							
	Ξ							
	(ii)							
	Ξ							
	(ii)							
	(j)							
	(ii)							
	Ξ							
	(ii)							
	Ξ							
	(ii)							
982112 10.21.19							Schedu	Schedule J (Form 990) 2019

# **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ 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 instructions and the latest information.

**Employer identification number** 

	Juvenile Law	Cente	r		∠3−	<b>エ</b> タ / 6 .	386	
Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contrib	determin	•	s
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	3	45,571.	Stock Marke	et Va	alue	<u> </u>
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 organiz	zation durino	the tax vear for c	ontributions				
	for which the organization completed Form 828	•						
	3	,					Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I. lines 1 throug	h 28. that it			
	must hold for at least three years from the date			•	•			
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.					333		
31	Does the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contribut	ions?	31		Х
32a	Does the organization hire or use third parties of	•	*	•		J.,		
J_U			•			32a		x
b	contributions?  If "Yes," describe in Part II.					JŁu		
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	/ for which column (a) is ched	cked.			
-	organization districtoport an amount in o	2.3 (0) 101	, po oi piopoit)	,	,			

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

Schedule M (Form 990) 2019

Schedule M	(Form 990) 2019 Juvenile	Law Center	23-1976386	Page 2
Part II	Supplemental Information. P	Provide the information required by Part I, lines 30b, 32b, and 3 number of contributions, the number of items received, or a co	33. and whether the organization	on

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 **Open to Public** 

Inspection

Name of the organization

Juvenile Law Center

**Employer identification number** 23-1976386

Form 990, Part VI, Section B, line 11b:
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
process. Following that, a complete electronic copy of form 990 is sent to
the full board prior to filing.
Form 990, Part VI, Section B, Line 12c:
The Chief Executive Officer monitors the conflict of interest policy on an
on-going basis throughout the year.
Form 990, Part VI, Section B, Line 15:
The Executive Committee of the board of directors meets in executive
session to review and set the Chief Executive Officer's annual
compensation, using all necessary data to establish a fair and appropriate
salary for the top management offical in an agency the size and complexity
of the Juvenile Law Center.
The same methods described above are in place for determining the salaries
of all JLC employees.
Form 990, Part VI, Section C, Line 19:
Governing Documents Disclosure Explanation. JLC makes it's governing
documents, policy statements and financials available to the public upon
request.