Form 990

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

For the 2023 calendar year, or tax year beginning , 2023, and ending D Employer identification number Check if applicable: 7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR 20-2086127 Address change THE DOLPHIN HOUSE E Telephone number Name change 735 S. 1ST STREET Initial return 970-240-8655 MONTROSE, CO 81401 Final return/terminated G Gross receipts \$ Amended return 548,067. F Name and address of principal officer: BRENDA HERNANDEZ H(a) Is this a group return for subordinates? Yes X No Application pending H(b) Are all subordinates included?
If "No," attach a list. See instructions. Nο Yes SAME AS C ABOVE Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or Website: WWW.DOLPHINHOUSECOLORADO.ORG H(c) Group exemption number Κ X Corporation L Year of formation: 2005 Form of organization: Trust M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities: THE MISSION OF THE DOLPHIN HOUSE IS TO PROVIDE HELP, HOPE AND HEALING FOR VICTIMS OF CHILD ABUSE. Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box Number of voting members of the governing body (Part VI, line 1a)..... 3 Number of independent voting members of the governing body (Part VI, line 1b)..... 9 Total number of individuals employed in calendar year 2023 (Part V. line 2a)..... 5 Total number of volunteers (estimate if necessary)...... 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12...... b Net unrelated business taxable income from Form 990-T, Part I, line 11..... 0. **Prior Year Current Year** 435,061. Contributions and grants (Part VIII, line 1h)..... 461,888. Revenue Program service revenue (Part VIII, line 2q)..... Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... -5,889. 16,272. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 59,380. 73,549. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 515,379. 524,882. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)..... 286,668 310,633. 16a Professional fundraising fees (Part IX, column (A), line 11e)..... **b** Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 96,914. 93,889. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)...... 383,582. 404,522. Revenue less expenses, Subtract line 18 from line 12..... 131,797. 120,360. End of Year Beginning of Current Year 20 Total assets (Part X, line 16)..... 1,096,261. 1,220,189. 21 Total liabilities (Part X, line 26)..... 40,279. 36,711. 22 Net assets or fund balances. Subtract line 21 from line 20..... 1,059,550. 1,179,910. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here BRENDA HERNANDEZ PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Date Check NON-PAID PREPARER self-employed Paid Preparer Firm's name Use Only May the IRS discuss this return with the preparer shown above? See instructions.....

Form 990 (2023) 7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR

20-2086127

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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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect 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 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V.	10		х
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	х	
b	Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
c	: Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
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		х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	Х	
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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		Х
		_	000	

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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? <i>If "Yes," complete Schedule J.</i>	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		Х
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		х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		X
b	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 line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	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 Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
	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
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Greek it Schedule O contains a response of note to any line in this Fart v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		1975	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	1
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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a 7		V	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule Q	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
þ	If "Yes," enter the name of the foreign country			1000
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1		18913
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			v
	Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7e	5529	X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
		/	-	
·	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.		200	
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
	Section 501(c)(7) organizations. Enter:	200		200
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1999
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	S I S	
L				1
	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			
	Enter the amount of reserves on hand	1/-	-1/4/9	X
	• • • • • • • • • • • • • • • • • • • •	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		-
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	0.000	Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	-	Х
10	If "Yes," complete Form 4720, Schedule O.		1	10000
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
ВАА	If "Yes," complete Form 6069. TEEA0105L 08/23/23	Form	gan	(2023)
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Form 990 (2023) 7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR 20-2086127 Page 6 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................................... Section 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 9 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 9 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? SEE SCHEDULE O 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... X X Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 6 Did the organization have members or stockholders? X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X b Each committee with authority to act on behalf of the governing body?..... X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O...... Х 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?..... 11a b Describe on 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................... X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done..... Х 12c X 13 Did the organization have a written whistleblower policy?..... 13 X 14 Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official. Х 15a X b Other officers or key employees of the organization..... 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Own website X Upon request Other (explain on Schedule O) Describe on Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records.

MICHELLE GOTTLIEB 735 S. 1ST STREET MONTROSE CO 80401 970-240-8655

7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR

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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(0					
(A) Name and title	(B) Average hours	box,	, unle er ar	ss pe nd a d	rson lirecte	than one is both a or/trustee	n Reportable) compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	ner week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) BRENDA HERNANDEZ	3			-					
DIRECTOR/PRES	6	X		x			0.	0.	0.
(2) TERRY BALET	3		t	**					<u> </u>
DIRECTOR	0	X					0.	0.	0.
(3) DEBBY PATTERSON	3					 			
DIRECTOR	0 -	X					0.	0.	0.
(4) FRANK CAGNETTI	3								
DIRECTOR/TREAS	0	Х		X			0.	0.	0.
(5) JOHN WITHERSPOON	3								
DIRECTOR	0	X				1	0.	0.	0.
(6) NATALIE PATTERSON	3								
DIRECTOR	0	X					0.	0.	0.
(7) PHOEBE BENZIGER	3								
DIRECTOR/VP	0	X		X			0.	0.	0.
(8) VALERIE HILL	3			П					
DIRECTOR/SEC	0	X		Х			0.	0.	0.
(9) PATRICK DEMERS	3								
DIRECTOR	0	X					0.	0.	0.
(10) VERONICA MARTINEZ-ERIE	3								
DIRECTOR	0	X					0.	0.	0.
<u>(11)</u>									
(12)		-							
(13)							-		
(14)		1							

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(A) Name and title	(B) Average	box,	unte	Posi neck i	more rson i	than o	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amo	unt
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	_	Officer		Highest compensated employee	_	the organization (W-2/1099- MISC/1099-NEC)	relatéd organizations (W-2/1099- MISC/1099-NEC)	compensation fi the organization and related organizations	on
<u>(15)</u>											
(16)											
(17)											
(18)											
<u>(19)</u>											
(20)		,									
(21)											
(22)											
(23)											
(24)											
(25)											
1b Subtotal c Total from continuation sheets to Part VII, See d Total (add lines 1b and 1c)	ction A							0. 0.	0. 0. 0.		0.
2 Total number of individuals (including but not limit from the organization 0										ensation	<u> </u>
3 Did the organization list any former officer, dir on line 1a? If "Yes, "complete Schedule J for s	ector, truste	e, ke	еу е	mple	oyee	e, or	higł	nest compensated	employee	Yes	
 4 For any individual listed on line 1a, is the sum the organization and related organizations greater 										3	X
 such individual. Did any person listed on line 1a receive or acc for services rendered to the organization? If "\(\) 						- · · · ·				4	X
Section B. Independent Contractors										5	X
1 Complete this table for your five highest components of the organization. Report components of the components of th	ensated indensation for	epen- the c	den alen	t cor dar <u>s</u>	ntra year	ctors endi	tha	at received more to with or within the or	han \$100,000 of ganization's tax year		
(A) Name and business ad	ddress							Description (of services	(C) Compensation	า
2 Total number of independent contractors (including \$100,000 of companyation from the organization	-	ited to	o the	se I	isted	l abo	ve)	who received more	than		
\$100,000 of compensation from the organization		TEFAC	11001	50//	22102				100	Form 990 (2	2022

		Check if Schedule O contains a res	oonse or note to any	line in this Part VIII	I		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
N N	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues					
ع ق	С	Fundraising events 1c					
a is	d	Related organizations 1d					
S, E	е	Government grants (contributions) 1e	251,023.				
S S	f	All other contributions, gifts, grants, and					THE PERSON NAMED IN
호	_ ا	similar amounts not included above 1f Noncash contributions included in	184,038.				
E 0	9	lines 1a-1f					
သို့ န	h	Total. Add lines 1a-1f		435,061.			
- Pi			Business Code				STATES
Program Service Revenue	2a						
æ	b						
<u>.</u>	С						
ξ	d						
Ë	е						
g.	f	All other program service revenue					
F.	g	Total. Add lines 2a-2f			NO THE POST OF THE PARTY OF THE		
	3	Investment income (including dividends,	interest, and				
		other similar amounts)	1	16,272.			16,272.
	4	Income from investment of tax-exemp					
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory 7a					
	b	Less: cost or other basis and sales expenses 7b					
	_	' 					
							E. 14.5 (C. 16.5)
				VICTOR 2010 10 10 10 10 10 10 10 10 10 10 10 10		-	THE RESERVE TO SHARE THE PARTY OF THE PARTY
울	8a	Gross income from fundraising events	1				
ē		(not including \$ of contributions reported on line 1c).					
ě		See Part IV, line 18	3 06 724				
<u>-</u>	h	Less: direct expenses 8					
Other Revenue		Net income or (loss) from fundraising	20/200.	73,549.	THE REAL PROPERTY.		73,549.
J	l	Gross income from gaming activities. See Part IV, line 19		15,545.			73,349.
	h	Less: direct expenses 9					
		Net income or (loss) from gaming acti					
					VAID-18 18 18 18 18 18 18 18 18 18 18 18 18 1	5 (Co.) (Co.) (Co.)	
	Iva	Gross sales of inventory, less	a				
		Less: cost of goods sold			White State of the		TRANSPORT
		Net income or (loss) from sales of inve					
<u></u>	Ť		Business Code	Property of the same of			PAGE 1/10 9 25 25
8 0	11a	•					
Miscellaneous Revenue	b						
등 등 조	C	 _					
<u> </u>	d	All other revenue					
Σ	е	Total. Add lines 11a-11d					
	12	Total revenue. See instructions		524.882.	0.	0.	89.821.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a				
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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	0.	0.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	259,047.	214,037.	33,588.	11,422.
	Pension plan accruals and contributions	233,047.	214,037.	33,300.	11,422.
8	(include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	28,105.	23,220.	3,645.	1,240.
10	Payroll taxes	23,481.	19,400.	3,045.	1,036.
11	Fees for services (nonemployees):	,		,	
а	Management				
b	Legal				
	Accounting	4,600.		4,600.	
	Lobbying.	4,000.		4,000.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A), amount, list line 11g expenses on Schedule 0.)	6,198.		6,198.	
12	Advertising and promotion	360.		180.	180.
13	Office expenses	14,822.	1,770.	13,052.	
14	Information technology	5,511.	5,511.		
15	Royalties				
16	Occupancy	7,333.	5,500.	1,833.	
17	Travel	2,471.	2,471.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,407.	2,407.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,863.	13,324.	2,539.	
23	Insurance	6,780.	321.	6,441.	18.
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	MAINTENANCE/REPAIRS	12,162.	9,122.	3,040.	
	CONTRACT SERVICES	9,076.	6,713.	2,363.	
c		4,157.	4,157.	4,303.	
	CHINDITIE		10/200725	126	
	SUPPLIES All other expenses	2,149.	1,713.	436.	
	All other expenses. Add lines 1 through 24s	404 E22	200 666	90.060	12 000
25	Total functional expenses. Add lines 1 through 24e	404,522.	309,666.	80,960.	13,896.
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)				

Form 990 (2023) 7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	253,555.	1	184,593.
	2	Savings and temporary cash investments	445,432.	2	632,830.
	3	Pledges and grants receivable, net	9,075.	3	15,561.
ļ	4	Accounts receivable, net	43,761.	4	46,119.
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
ş	8	Inventories for sale or use		8	
Āssets	9	Prepaid expenses and deferred charges		9	6,854.
¥		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
- 1	b	Less: accumulated depreciation	298,458.	10c	283,279.
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	45,980.	15	50,953.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,096,261.	16	1,220,189.
	17	Accounts payable and accrued expenses	15,911.	17	19,279.
	18	Grants payable		18	
	19	Deferred revenue	20,800.	19	21,000.
	20	Tax-exempt bond liabilities		20	
ē	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other 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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	**
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25	36,711.	26	40,279.
Ø		Organizations that follow FASB ASC 958, check here		1000	
8		and complete lines 27, 28, 32, and 33.			
를	27	Net assets without donor restrictions	994,920.	27	1,109,207.
m	28	Net assets with donor restrictions	64,630.	28	70,703.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ᅙ	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
8	31	Retained earnings, endowment, accumulated income, or other funds		31	
¥ /	32	Total net assets or fund balances	1,059,550.	32	1,179,910.
ž	33	Total liabilities and net assets/fund balances	1,096,261.	33	1,220,189.

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Par	t 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	5	24,8	382.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	04,5	522.
3	Revenue less expenses. Subtract line 2 from line 1	3	1	20,3	360.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,0	59,5	550.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	100000			
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,		140 34		HARAN III
-	column (B)).	10	1,1	79,9	910.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII.				🗌
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	wed on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepassis, consolidated basis, or both. X Separate basis	arate			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audience of its financial statements and selection of an independent accountant?	lit,	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?	e Uniform	3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	х	
BAA	TEEA0112L 08/23/23		Form	990 (2023)
					. ,

SCHEDULE A (Form 990)

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.

2023

Open to Public Inspection

Name c	f the organization 7TH JUDICIA	AL DISTRICT CH	HILD ADVOCACY O	TR	7/	Employer identifica	tion number			
		DOLPHIN HOUSE				20-208612	7			
Part	I Reason for Public Cha	rity Status. (All o	organizations must	comple	ete this	s part.) See instruc	tions.			
The o	rganization is not a private found	lation because it is: (For lines 1 through 12,	check or	nly one	box.)				
1	A church, convention of church	es, or association of cl	nurches described in sec	tion 170(l	b)(1)(A)(i).				
2	A school described in sectio	n 1 70(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)						
3	A hospital or a cooperative h	ospital service organ	ization described in se	ction 170	(b)(1)(A	λ)(iii).				
4	A medical research organiza	tion operated in conju	unction with a hospital	describe	d in sec	tion 170(b)(1)(A)(iii). E	nter the hospital's			
	name, city, and state:									
5	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										
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	A community trust described	in section 170(b)(1)(A)(vi). (Complete Part	11.)						
9	9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college									
	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:									
10	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.)									
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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.									
а										
b	Type II. A supporting organize management of the supporting must complete Part IV, Sect	ation supervised or	controlled in connection the same persons that c	with its control or	support manage	ed organization(s), by the supported organizati	having control or on(s). You			
С	Type III functionally integrated organization(s) (see instruction									
d	Type III non-functionally integrated. The cinstructions). You must com	rated A supporting org	anization operated in co	nnection :	with its s	cunnerted organization(s)	that is not			
е	Check this box if the organiz	ation received a writt	en determination from	the IRS t						
f	integrated, or Type III non-fu Enter the number of supported	nctionally integrated	supporting organization	1.						
	Provide the following informatio									
	i) Name of supported organization			(iv) is organizat in your go docun	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
				Yes	No					
(A)										
<u>(B)</u>										
(C)										
(D)										
• •	******									
(E)										
Total		TILLIA DISTRICT		100 500 800						

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	tion A. Public Support						
begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pul	olic Support P	ercentage				
	Public support percentage for 20						%_
15	Public support percentage from 2	2022 Schedule A,	Part II, line 14		• • • • • • • • • • • • • • • • • • • •		%
16a	33-1/3% support test—2023. If the and stop here. The organization	ne organization di qualifies as a put	d not check the b plicly supported o	ox on line 13, and rganization	d line 14 is 33-1/3	% or more, check	this box
	33-1/3% support test—2022. If the and stop here. The organization	qualifies as a pul	blicly supported o	rganization			
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this b	oox and stop here	. Explain in Part V	I how
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-al -circumstances to	nd-circumstances est. The organizat	test, check this to tion qualifies as a	oox and stop here publicly supporte	e. Explain in Part V d organization	I how the
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a,	, or 17b, check th	is box and see inst	ructions

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.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions,						
	and membership fees received. (Do not include any "unusual grants.")						
•	Gross receipts from admissions,	469,881.	465,087.	496,927.	520,739.	508,611.	2,461,245.
2	merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose						0.
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513.						0.
4	Tax revenues levied for the						<u> </u>
	organization's benefit and						
	either paid to or expended on its behalf						0.
5	The value of services or						0.
	facilities furnished by a governmental unit to the				1 4 1 1		
	organization without charge						0.
6	Total. Add lines 1 through 5	469,881.	465,087.	496,927.	520,739.	508,611.	2,461,245.
7a	Amounts included on lines 1,	100/0011	100/0011	,	5207.001		
	2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
h	Amounts included on lines 2	0.	0.	0.	0.	0.	0.
	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	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support. (Subtract line 7c from line 6.)						2,461,245.
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
_	Amounts from line 6	469,881.	465,087.	496,927.	520,739.	508,611.	2,461,245.
10a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from						
h	similar sources	2,676.	7,002.	7,074.	-5,889.	16,272.	27,135.
D	income (less section 511						
	taxes) from businesses						
_	acquired after June 30, 1975 Add lines 10a and 10b	2,676.	7 000	7 074	F 000	1.070	07.105
11	Net income from unrelated business	2,010.	7,002.	7,074.	-5,889.	16,272.	27,135.
•	activities not included on line 10b,						
	whether or not the business is regularly carried on						0
12	Other income. Do not include						0.
-	gain or loss from the sale of						
	capital assets (Explain in Part VI.)						0.
13	Total support. (Add lines 9,						
	10c, 11, and 12.)	472,557.	472,089.		514,850.	524,883.	2,488,380.
14	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here			ιπη tax year as a		П
Sec	tion C. Computation of Pul		ercentage				
	Public support percentage for 20			ne 13, column (f)) <i></i>		98.91 %
16	i ubile support percentage for 20						99.49 %
	Public support percentage from 2	2022 Schedule A,	Part III, line 15	<i></i>			
	Public support percentage from 2				***************************************		33,123
	Public support percentage from a tion D. Computation of Inv	estment Incon	ne Percentage	;			
Sec 17	Public support percentage from 2	estment Incon or 2023 (line 10c,	ne Percentage column (f), divide	ed by line 13, colu	ımn (f))		1.09 %
Sec 17 18	Public support percentage from 2 tion D. Computation of Inv Investment income percentage for Investment income percentage for 33-1/3% support tests—2023. If the support tests—2023.	estment Incon or 2023 (line 10c, rom 2022 Schedul he organization di	ne Percentage column (f), divide e A, Part III, line id not check the t	ed by line 13, colu 17 рох ол line 14, an	umn (f))		1.09 % 0.51 %
Sec 17 18 19a	Public support percentage from 2 tion D. Computation of Inv Investment income percentage from 1 Investment income percentage from 133-1/3% support tests—2023. If the is not more than 33-1/3%, check	estment Incon or 2023 (line 10c, rom 2022 Schedul he organization di this box and stop	ne Percentage column (f), divide e A, Part III, line id not check the to here. The organ	ed by line 13, colu 17 Dox on line 14, an ization qualifies a	umn (f))d line 15 is more is a publicly suppo	17 18 than 33-1/3%, and orted organization	1.09 % 0.51 % d line 17
Sec 17 18 19a	Public support percentage from 2 tion D. Computation of Inv Investment income percentage for Investment income percentage for 33-1/3% support tests—2023. If the support tests—2023.	estment Incon or 2023 (line 10c, rom 2022 Schedul he organization di this box and stop he organization di	ne Percentage column (f), divide e A, Part III, line id not check the to here. The organ d not check a bo	ed by line 13, colu 17 box on line 14, an ization qualifies a x on line 14 or lin	umn (f))d line 15 is more is a publicly suppore 19a, and line 16	than 33-1/3%, and orted organization is more than 33-	1.09 % 0.51 % d line 17 X

Part IV Supporting Organizations

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

S

			Yes	No
	1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
	2 Did the organization have any supported organization that does not have an IRS determination of status 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).	2		
	3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
	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.	3c		
	4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	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.	4c		
	5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).	5a		
	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?	5b	EVE 3	
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	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.	6		
	7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
	8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes complete Part I of Schedule L (Form 990).	, " 8	9/15/9	(800.9)
	9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
	b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
	c Did a disqualified person (as defined on 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.	9c	1000	PER CONTRACTOR OF THE
1	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 line 10b below.	," 10a		
	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.)	10b		

Par	TIV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?	1000	Yes	No
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	Severill .	23
b	A family member of a person described on line 11a above?	11b		
		11c		86 FA
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Ition B. Type I Supporting Organizations	110		
366	tion b. Type i Supporting Organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
_	Did the executation arounds to each of its supported executations, by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
	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).			
ā	The organization satisfied the Activities Test. Complete line 2 below.			
E	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
(The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	uctions	s).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
á	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		
ı	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		1	
ŧ	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a	No. of Contract of	Suret Co
1	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	on No s must	v. 20, 1970 (explain in complete Sections A	n Part VI) . See through E.
Sec	tion 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	200 1 200 - 200 W	
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		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
Ŀ	Average monthly cash balances	1b		
- 0	Fair market value of other non-exempt-use assets	1c		
	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount	200.00		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
_4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated (see instructions).	grated	Type III supporting or	ganization
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	edule A (Form 990) 2023 7TH JUDICIAL DISTRIC			-208	6127 Page 7
	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	itions (continue	d)	
Sec	tion D — Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pur			1	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	s,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in Part VI)	-66-	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ons	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required — explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023	网络哈拉尔斯特罗斯里		10.70	
ě	From 2018				The state of the state of
	From 2019				
	From 2020			900	SERVING SERVING
	From 2021				
•	From 2022				
	f Total of lines 3a through 3e				
Ç	Applied to underdistributions of prior years				
ŀ	Applied to 2023 distributable amount			E VE	
	i Carryover from 2018 not applied (see instructions)			Garage .	
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2023 from Section D, line 7:				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount			200	
	: Remainder. Subtract lines 4a and 4b from line 4.		Service State of the service of the		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:	MARKET STREET			
	Excess from 2019				
	Exerce from 2020			110000	

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c Excess from 2021
d Excess from 2022
e Excess from 2023

Schedule A (Form 990) 2023

Part VI

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

SCHEDULE D (Form 990)

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 2023

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

7TF DBA	H JUDICIAL DISTRICT CHILD ADVOCACY CTR A: THE DOLPHIN HOUSE	20-2086127
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
		unds 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	TAIL III
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised are the organization's property, subject to the organization's exclusive legal control?	funds Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be us for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose compermissible private benefit?	ed only nferring Yes No
Par		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		orically important land area
	Protection of natural habitat Preservation of a certi	fied historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conser	vation easement on the
	last day of the tax year.	
		Held at the End of the Tax Year
_	a Total number of conservation easements	
	Total acreage restricted by conservation easements	
•	Number of conservation easements on a certified historic structure included on line 2a 2c	
(d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization tax year	on during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violand enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation ea	sements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements	ents during the year
8	Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4 and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense st include, if applicable, the text of the footnote to the organization's financial statements that describes the conservation easements.	tatement and balance sheet, and organization's accounting for
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other S Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	Similar Assets
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance Part XIII the text of the footnote to its financial statements that describes these items.	d balance sheet works of art, e of public service, provide in
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and bal historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pub following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1	lic service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1	\$
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro amounts required to be reported under FASB ASC 958 relating to these items.	
	Revenue included on Form 990, Part VIII, line 1	\$
Ь	Assets included in Form 990. Part X	Ś

Schedule D (Form 990) 2023

3	Using the organization's acquisition items (check all that apply).	n, accession, and othe	_		ake significant use of its	collection		
а	Public exhibition		d ∐ Loan o	or exchange program				
þ	Scholarly research		e Other					
С	Preservation for future gene	rations	_					
4	Provide a description of the organi Part XIII.	zation's collections an	d explain how they	further the organization's	exempt purpose in			
5	During the year, did the organizato be sold to raise funds rather t			t, historical treasures, or rganization's collection?	other similar assets	Yes		No
Par	Escrow and Custod Complete if the organization form 990, Part X, I	anization answer	ts ed "Yes " on F	orm 990, Part IV, liı	ne 9, or reported a	n amol	ınt or	1
1a	Is the organization an agent, tru on Form 990, Part X?	stee, custodian, or o	ther intermediary	for contributions or other	er assets not included	Yes	Γ	No
b	If "Yes," explain the arrangement i	n Part XIII and comple	ete the following tal	ble.			_	
						Amount		
С	Beginning balance			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1c			
	Additions during the year							
	Distributions during the year							
	Ending balance							
	Did the organization include an					Yes		No
	If "Yes," explain the arrangemen						[
Par	V Endowment Funds							
	Complete if the organization	anization answer	ed "Yes" on F	orm 990, Part IV, li	ne 10.			
		(a) Current was	(h) Prior you	(a) Two years back	(d) Three weers back	(a) Fo	ur years	hack
۹.	Designing of year balance	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) F0	ui years	Dack
	Beginning of year balance				-	 - -		
a	Contributions					<u> </u>		
С	Net investment earnings, gains,							
. ا	and losses	ļ				+		
е	Other expenditures for facilities and programs		1					
f	Administrative expenses							
	End of year balance							
	Provide the estimated percentage	e of the current vea	r end balance (lin	e 1g, column (a)) held a	as:			
	Board designated or quasi-endo	= = = = = = = = = = = = = = = = = = = =	યું `					
	Permanent endowment	%						
	Term endowment	%						
·	The percentages on lines 2a, 2b, a		00%					
За	Are there endowment funds not in organization by:	the possession of the	organization that a	re held and administered	for the	Г	Yes	No
	(i) Unrelated organizations?					3a(i)		
	(ii) Related organizations?					3a(ii)	-	
h	If "Yes" on line 3a(ii), are the re							
	Describe in Part XIII the intende							
Par			zation's chaowing	int ranas.				
r aı	Complete if the organizat		n Form 000 Port	IV line 11a See Form 90	On Part Y lina 10			
	<u></u>		····					
	Description of property	(a) Co	st or other basis	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) B	ook va	lue
1 9	Land		iivosiiiolit <i>j</i>	50,000.	dopresiduon		50	000.
	Buildings			374,661.	159,050.			611.
	Leasehold improvements	·		13,919.	3,585.			334.
_	Equipment							
	Other			46,306.	40,644.			662.
	Add lines 1a through 1e (Colur			6,335.	4,663.			672. 279

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	the organization answered "Yes" on	Form 990 Part IV line	N/A 11h See Form 990 Part X line 12	
	or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market valu	ie
(1) Financial derivatives.				
• •	terests			
(3) Other				
(A) (B) (C) (D) (E)				
(C)				
(D)				
(F) (G)				
(H)				
<u>(1)</u>				
	Form 990, Part X, line 12, column (B))			
Part VIII Investme	nts — Program Related the organization answered "Yes" on	Form 990 Part IV line	N/A	
(a) Description	on of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year marke	t value
(1)		(4) 20011 14140	Committee of Falaction, 2007 of the of Joan Market	· raido
(2)				
(3)				78 1-1-1
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	Form 990, Part X, line 13, column (B))	27./2		E SPECIAL CO
Part IX Other As	sets <u>the organization answered "Yes" on</u>	N/A Form 990 Part IV line	11d See Form 990 Part X line 15	
oompiete n	(a) Des	scription	(b) Book v	alue
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
		olumn (B))		
Part X Other Lia	bilities the organization answered "Vee" on	Form 900 Part IV line	11e or 11f. See Form 990, Part X, line 25.	
1.		ption of liability	(b) Book va	alue
(1) Federal income taxe		priority	(5) 5550 (1)	aido
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)	-			
(10)				
(11)				
			nancial statements that reports the organization's liability for uncerta	

Pai	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	524,882.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1000	74
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
c	: Recoveries of prior year grants	10.33	
C	I Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	524,882.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	100	
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	524,882.
Pai	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	404,522.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	0.39	
а	Donated services and use of facilities		
b	Prior year adjustments		
c	: Other losses		
c	I Other (Describe in Part XIII.)	1000	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	404,522.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	623	-
	Investment expenses not included on Form 990, Part VIII, line 7b	136	
	Other (Describe in Part XIII.)	3000	
	: Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	404,522.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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Schedule D (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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

2023

Open to Public Inspection

Employer identification number Name of the organization 7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR DBA: THE DOLPHIN HOUSE 20-2086127 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?..... **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. (v) Amount paid to (vi) Amount paid to (or retained by) (iii) Did fundraiser (i) Name and address of individual (iv) Gross receipts (or retained by) fundraiser listed in (ii) Activity have custody or control of contributions? or entity (fundraiser) from activity organization column (i) Yes No 1 2 3 6 7 8 9 10 0. 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.

Pai	t II	Fundraising Events. Complete if reported more than \$15,000 of fur	the organization andraising event con	ntributions and dros	orm 990 Part IV I	ine 18 or
<u> </u>		and 6b. List events with gross rec	eipts greater than (a) Event #1 BARN DANCE (event type)	\$5,000. (b) Event #2 GOLF TOURNEY (event type)	(c) Other events 1 (total number)	(d) Total events (add column (a) through column (c))
Revenue	1	Gross receipts	49,290.	39,637.	7,807.	96,734.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	49,290.	39,637.	7,807.	96,734.
	4	Cash prizes				
	5	Noncash prizes	67.	1,769.	1,000.	2,836.
nses	6	Rent/facility costs				
Expe	7	Food and beverages	6,252.	3,661.		9,913.
Direct Expenses	8	Entertainment	2,500.			2,500.
Ω	9	Other direct expenses	1,303.	6,558.	75.	7,936.
	10 11	Direct expense summary. Add lines 4 thro Net income summary. Subtract line 10 fro	ough 9 in column (d)	,		23,185. 73,549.
Par	t III j	Gaming. Complete if the organiza than \$15,000 on Form 990-EZ, line	tion answered "Ye	s" on Form 990, Pa	rt IV, line 19, or re	ported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
~	1	Gross revenue				
ses	2	Cash prizes			_	
irect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				1 1 1 1 1 1 1
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes %	Yes %	
	7	Direct expense summary. Add lines 2 thro				-
i	8	Net gaming income summary. Subtract lin	ne / from line I, colum	n (a)		
а	ls th	r the state(s) in which the organization core organization licensed to conduct gaming o," explain:		ese states?		Yes No
		e any of the organization's gaming licenses	revoked, suspended,		tax year?	Yes No

cne	edule G (Form 990) 2023 /TH JUDICIAL DISTRICT CHILD ADVOCACY CTR 20	-2086127	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:	1	
	a The organization's facility	13a	8
1	An outside facility	13b	~~~~
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
ı	a Does the organization have a contract with a third party from whom the organization receives gaming revenue of If "Yes," enter the amount of gaming revenue received by the organization \$ and the of gaming revenue retained by the third party \$ cold for "Yes," enter name and address of the third party:	e? Yes e amount	No
	Name		1
	Address		i
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided	_	
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the	-	
	state gaming license?	L-J	No
ı	 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 	ne	
Pai	Supplemental Information. Provide the explanations required by Part I, line 2b, column and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any information. See instructions.	umns (iii) and (additional	v);

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization 7TH JUDICIAL DISTRICT CHILD ADVOCACY CTR DBA: THE DOLPHIN HOUSE

Employer identification number 20-2086127

OMB No. 1545-0047

2023

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

DIRECTORS DEBBY PATTERSON AND NATALIE PATTERSON HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

A DRAFT VERSION OF THE FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS FOR THEIR REVIEW. AFTER EACH BOARD MEMBER HAS REVIEWED THE FORM 990 AND HAD THEIR QUESTIONS ANSWERED, A FINAL VERSION OF FORM 990 IS PRESENTED AND VOTED UPON AT A REGULAR BOARD MEETING. THIS FORM 990 AND RELATED SCHEDULES WERE APPROVED BY THE BOARD AT ITS MAY 21, 2024 MEETING.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

A PUBLIC INSPECTION FOLDER THAT INCLUDES ITS CORPORATE BYLAWS, BOARD POLICY MANUAL AND FINANCIAL STATEMENTS IS AVAILABLE FOR INSPECTION AT THE DOLPHIN HOUSE, 735 S.

1ST STREET, MONTROSE, CO 81401.

FORM 990, PART VI, LINE 12C

ANNUALLY, EACH MEMBER OF THE BOARD OF DIRECTORS SIGNS A CODE OF ETHICS STATEMENT WHICH, IN PART, REQUIRES THE MEMBER TO DISCLOSE ANY CONFLICT OF INTEREST. A RESPONSBILITY OF THE EXECUTIVE DIRECTOR IS TO MONITOR MATTERS THAT MIGHT GIVE RISE TO ANY CONFLICT OF INTEREST AND TO BRING SUCH MATTERS TO THE BOARD OF DIRECTORS AS A WHOLE.