# Form **990-EZ**

# **Short Form 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. 1545-1150

**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/Form990EZ for instructions and the latest information.

A F	or the	2017 calend	ar year, or tax year beginning	01/01	, 2017, an	d ending	_	12/31	, 20	17
<b>B</b> (	Check if ap	oplicable:	C Name of organization				D Emp	oyer ide	ntification numb	ber
	Address o	change	CONSUMERS FOR A RESPONSIVE LEG	AL SYSTEM				27	-1966682	
	Name cha	-	Number and street (or P.O. box, if mail is not de	livered to street address)	R	oom/suite	E Telep	hone nur	mber	
=	Initial retu		1380 Monroe St NW No 210					202	-649-0399	
=	rınaı retur Amended	n/terminated	City or town, state or province, country, and ZIP	or foreign postal code			<b>F</b> Gro	F Group Exemption		
=		on pending	Washington, DC, 20010				Nun	nber 🕨		
G /	Account	ting Method:	✓ Cash ☐ Accrual Other (specify)	<b>&gt;</b>		Н	Check	▶ ☐ if	the organization	on is <b>not</b>
	Vebsite		.responsivelaw.org						ch Schedule B	
J T	ax-exen		eck only one) — 🗹 501(c)(3) 🔲 501(c) (	) ◀ (insert no.) ☐ 4947	7(a)(1) or		(Form 9	90, 990-	-EZ, or 990-PF	).
				<del></del>	Other	'				
			7b to line 9 to determine gross receipts. If g							
(Pai	rt II, col	umn (B) belov	w) are \$500,000 or more, file Form 990 inste	ead of Form 990-EZ				<b>▶</b> \$		146,020
Р	art I	Revenu	e, Expenses, and Changes in Ne	t Assets or Fund B	Balances	(see the	instru	ctions		
			the organization used Schedule O to			•				. 🔽
	1		ons, gifts, grants, and similar amounts i					1		 145,853
	2		ervice revenue including government fe					2		40
	3	_	ip dues and assessments					3		0
	4	Investmen						4		0
	5a	Gross amo	ount from sale of assets other than inve	entory	5a		0			
	b		or other basis and sales expenses .		5b		0			
	С		ss) from sale of assets other than inver		from line	5a)		5c		0
	6		nd fundraising events	, (		,				
Revenue	а	Gross inc	ome from gaming (attach Schedule	G if greater than						
		\$15,000) .			6a		0			
	b	Gross inco	ome from fundraising events (not includ	ling \$	0 of co	ontributio				
			raising events reported on line 1) (attach	~						
_		sum of suc	ch gross income and contributions exc	eeds \$15,000)	6b		0			
	С	Less: direc	et expenses from gaming and fundraisi	ng events	6c		0			
	d		e or (loss) from gaming and fundraising		6a and 6	b and su	btract			
		line 6c)						6d		0
	7a	Gross sale	s of inventory, less returns and allowar	nces	7a		0			
	b	Less: cost	of goods sold		7b		0			
	С	Gross prof	it or (loss) from sales of inventory (Sub	tract line 7b from line	7a)			7c		0
	8	Other reve	nue (describe in Schedule O)					8		127
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, an					9		146,020
	10	Grants and	d similar amounts paid (list in Schedule	· O)				10		0
	11	Benefits pa	aid to or for members					11		0
Se	12		ther compensation, and employee ben					12		90,440
Expenses	13	Profession	al fees and other payments to indepen	dent contractors				13		4,882
be	14	Occupanc	y, rent, utilities, and maintenance .					14		0
ũ	15	Printing, p	ublications, postage, and shipping .					15		4,531
	16		enses (describe in Schedule O) .See S					16		9,777
	17		enses. Add lines 10 through 16					17		109,630
S	18		(deficit) for the year (Subtract line 17 fro					18		36,390
set	19	Net assets	or fund balances at beginning of year	ar (from line 27, colur	mn (A)) (n	nust agre	e with			
As		end-of-yea	ar figure reported on prior year's return)	)				19		-15,253
Net Assets	20	Other char	nges in net assets or fund balances (ex	plain in Schedule O) .				20		0
Z	21		or fund balances at end of year. Comb					21		21,137
For	Paper		ion Act Notice, see the separate instruct			. 106421			Form <b>990-E</b>	

Form 990-F7 (2017) Page 2 Part II Balance Sheets (see the instructions for Part II) Check if the organization used Schedule O to respond to any question in this Part II . . . . . (A) Beginning of year (B) End of year 22 Cash, savings, and investments 8.257 22 21,137 23 Land and buildings . . . . . . . . . 0 23 0 Other assets (describe in Schedule O) . . . . . . . . 24 0 24 0 25 8.257 25 21,137 26 Total liabilities (describe in Schedule O) 23,510 26 0 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) . . . -15,253 27 21,137 Part III Statement of Program Service Accomplishments (see the instructions for Part III) **Expenses** Check if the organization used Schedule O to respond to any question in this Part III (Required for section What is the organization's primary exempt purpose? See Schedule O, Statement 2 501(c)(3) and 501(c)(4) Describe the organization's program service accomplishments for each of its three largest program services, organizations; optional for others.) as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title. Advocacy: Advocate for a more user-friendly legal system through changes to regulations and laws governing lawyers as well as changes to lawyers' business practices. Responsive Law is the only group speaking for consumers before the American Bar Association and at numerous state-level proceedings. (Grants \$ 0) If this amount includes foreign grants, check here . . . . 28a 56,734 29 Education: Educate people about how to more effectively use the legal system, including information about how to effectively use a lawyer and alternatives to traditional use of a lawyer such as limited-scope representation, non-lawyer services, and self-help. (Grants \$ 0) If this amount includes foreign grants, check here . . . . 29a 15,129 30 Self-Help Resources: Provide information and resources for people using the legal system without the assistance of a lawyer. (Grants \$ 0) If this amount includes foreign grants, check here 30a 3,782 0) If this amount includes foreign grants, check here . . . . (Grants \$ 31a 0 32 75,645 List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated – see the instructions for Part IV) Check if the organization used Schedule O to respond to any question in this Part IV (c) Reportable (d) Health benefits. (b) Average contributions to employee (e) Estimated amount of compensation (a) Name and title hours per week (Forms W-2/1099-MISC) benefit plans, and other compensation devoted to position (if not paid, enter -0-) deferred compensation Goldie Heidi Gider 2 0 0 0 **President** Frederick Mulhauser 2 0 0 0 Treasurer 0 0 **Chas Rampenthal** 1 0 Secretary **Richard Granat** 1 0 0 0 **Director** Renee Knake 1 0 0 0 **Director** Tom Gordon 40 75,417 0 0 **Executive Director** 

Other Information (Note the Schedule A and personal benefit contract statement requirements in the Part V instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V Yes No 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a 33 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the 34 Did the organization have unrelated business gross income of \$1,000 or more during the year from business 35a 35a If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . . . . 35c 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . . . . . . . . . . . . . . 36 Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 37a 37b 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38a If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . 39 Section 501(c)(7) organizations. Enter: 39a Gross receipts, included on line 9, for public use of club facilities . . . . . . . . . Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: o ; section 4912 ► section 4911 ▶ o ; section 4955 ▶ b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b / Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 0 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . . . . . . . . . . . . . ▶ 0 All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter List the states with which a copy of this return is filed ▶ 41 42a The organization's books are in care of ► Tom Gordon 202-649-0399 Telephone no. ▶ Located at ► 1380 Monroe St NW No 210, Washington, DC 20010 ZIP + 4 ▶ 20010 **b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes No a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? 42c If "Yes," enter the name of the foreign country: ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here 43 and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . . 43 Yes No 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be 44a Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be 44b If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an 44d 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . . . . . . . 45a 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," Form 990 and Schedule R may need to be completed instead of 45b

Page 3

-orm 99	U-EZ (20	) ( <i>(</i> )							P	age 🖣
									Yes	No
46		ne organization engage, directly or in ndidates for public office? If "Yes," o						46		~
Part \		Section 501(c)(3) organizations All section 501(c)(3) organization		stions 47–49b ar	nd 52. and	d complete	e the ta	ables fo	or line	es
		50 and 51.	·			·				_
		Check if the organization used Scl	nedule O to respond	to any question i	n this Par	: VI				
4-	D: 1 !!			504(1)					Yes	No
47		ne organization engage in lobbying If "Yes," complete Schedule C, Par		section 501(h) elec		ect during	the tax	47	~	
48	Is the	organization a school as described in	n section 170(b)(1)(A)(ii	i)? If "Yes," comple	te Schedul	eE		48		~
49a		ne organization make any transfers to		_				49a		~
b		s," was the related organization a se						49b		
50		plete this table for the organization's								d key
	empio	byees) who each received more than	1 \$ 100,000 of comper	isation from the or				enter "IN	one.	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contribu	ealth benefits, tions to emplo lans, and defe mpensation	yee (e)	Estimate other com		
None										
f 51	Comp	number of other employees paid over olete this table for the organization' 000 of compensation from the orga	s five highest compe	ensated independe	ent contrac	 ctors who e	each re	eceived	more	than
	(a)	Name and business address of each independ	lent contractor	<b>(b)</b> Type of :	service		<b>(c)</b> Co	mpensatio	on	
None										
		number of other independent contra	_		.▶					
52		he organization complete Scheduleted Schedule A	ıle A? <b>Note:</b> All se 	. , ,	-			เ <b>☑ Ye</b> s		lo.
		of perjury, I declare that I have examined this rd complete. Declaration of preparer (other than					ny know	ledge and	belief,	it is
Sign		Signature of officer				Date				
Here		Thomas Gordon, Executive Direct	or			Date				
		Type or print name and title	In		D-4			DT:::		
Paid		Print/Type preparer's name	Preparer's signature		Date	Check		PTIN		
Prepa						l	mployed			
Use (	Only	Firm's name				Firm's EIN ▶	•			
\/ a\/ +h	PQ ا	Firm's address ► discuss this return with the preparer	shown above? See i	netructions		Phone no.		□ Vac		Jo
viuy til		anddadd inno retain with the preparet	SHOWIT ADDVE: DEE I					Yes	P	1О

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

# **Public Charity Status and Public Support**

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

	SUMERS FOR A RESPONSIVE LEGA						66682			
Pa							ns.			
The o	organization is not a private found		,		•	•				
1	A church, convention of church					. , . , . , . ,				
2	A school described in <b>section</b>		,			, ,				
3	A hospital or a cooperative ho	•								
4	A medical research organization	•	onjunction with a hosp	oital desc	ribed in <b>s</b>	section 170(b)(1)(A)(	(III). Enter the			
-	hospital's name, city, and stat		- 11							
5	An organization operated for section 170(b)(1)(A)(iv). (Com	plete Part II.)			•		ai unit described in			
6	A federal, state, or local gover	•			٠,					
7	An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or from	the general public			
8										
9	☐ An agricultural research organ	• •		,	erated in	conjunction with a la	and-grant college			
	or university or a non-land-grauniversity:	int college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or			
10	An organization that normally receipts from activities related	receives: (1) mor	e than 331/3% of its su	upport fro	om contril	outions, membership	o fees, and gross			
	support from gross investmen	t income and un	related business taxal	ble incon	re (less se	ection 511 tax) from	businesses			
	acquired by the organization a	ifter June 30, 197	75. See <b>section 509(</b> a	a)(2). (Coi	nplete Pa	art III.)				
11	An organization organized and	•	•	,		` , ` ,				
12	An organization organized and									
	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.									
•	☐ <b>Type I.</b> A supporting organ	•	• • • • • • • • • • • • • • • • • • • •		•	•	• •			
a	the supported organization									
	supporting organization. <b>Y</b>					ne directors or trust				
b	☐ <b>Type II.</b> A supporting orga	nization supervis	sed or controlled in co	nnection	with its s	supported organizati	on(s), by having			
	control or management of organization(s). You must	the supporting o	rganization vested in	the same						
С	☐ Type III functionally integ						ally integrated with,			
	its supported organization		•		-					
d	☐ Type III non-functionally									
	that is not functionally inte requirement (see instruction						d an attentiveness			
_	_ ` `	,	•		-		. U. T III			
е	Check this box if the organ functionally integrated, or						e II, Type III			
f	Enter the number of supported	• •	tionally integrated 3up	oporting (	organizati	ion.				
g		•	oorted organization(s).							
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization	1	organization	(v) Amount of monetary	(vi) Amount of			
			(described on lines 1–10		ur governing ment?	support (see	other support (see			
			above (see instructions))	docu	ment:	instructions)	instructions)			
				Yes	No					
(A)										
(B)										
(C)										
(D)										
(E)										
Tota										

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . 59,699 99,899 78,860 123,838 112,422 474,718 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . Total. Add lines 1 through 3. . . . 4 59,699 78,860 99,899 112,422 474,718 123,838 5 The portion of total contributions by each person (other than governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 253,830 Public support. Subtract line 5 from line 4 220,888 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 7 Amounts from line 4 . . . . . . 59,699 99,899 112,422 78,860 123,838 474,718 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.) . . . . . . . 47 33,558 33,605 **Total support.** Add lines 7 through 10 11 508.323 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) . . . . . 43.45 % 14 Public support percentage from 2016 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 

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

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

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

	ii trie organization falls to qualify	under the te	sts listed bei	ow, piease co	impiete Fart	11.)	
	on A. Public Support			1			
Calen	dar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
1	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						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
<i>,</i> a	received from disqualified persons .						
	· · · ·						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	<u> </u>						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u> </u>	line 6.)						
	on B. Total Support		T				
	dar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for th	e organizatio	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her	·е					▶ ┌
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2017 (line 8	B, column (f) d	ivided by line 1	3, column (f))		15	%
16	Public support percentage from 2016 Sch		-			16	%
Secti	on D. Computation of Investment Inc	come Perce	ntage				
17	Investment income percentage for 2017 (I			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2016			-		18	%
19a	331/3% support tests—2017. If the organi						
	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
b	33 <sup>1</sup> / <sub>3</sub> % support tests—2016. If the organiz	_	=	-		_	
~	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this b						
20	Private foundation If the organization di	_	_	•	-		_

#### 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.)

All Supporting Organizations

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

Part I	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b		<u> </u>
	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		
Section	on B. Type I Supporting Organizations			I
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the approximation approach fourth a homeful of any approximation at how there the approached	-		
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? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			<u> </u>
Occur	on or Type in 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		103	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			·
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (	see in	struct	ions).
•	Activities Test Anguar (a) and (b) below		Vaa	Na
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	a		
J	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. <i>Answer (a) and (b) below.</i>			
	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 "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount	•		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
<b>6 Distributable Amount</b> . 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-functional		tegrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	S) Supporting Organi	zations (continued)				
Secti	on D - Distributions		,	Current Year			
1	Amounts paid to supported organizations to accomplish	exempt purposes					
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.						
9							
10	Line 8 amount divided by line 9 amount	T		(iii)			
Se	Section E - Distribution Allocations (see instructions)  (i)  Excess Distributions  (ii)  Underdistributions  Pre-2017						
1	Distributable amount for 2017 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in <b>Part VI</b> ). See instructions.						
3	Excess distributions carryover, if any, to 2017						
a							
b	From 2013						
c	From 2014						
d	From 2015						
е	From 2016						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2017 distributable amount						
<u>i</u> _	Carryover from 2012 not applied (see instructions)						
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2017 from Section D, line 7: \$						
a	Applied to underdistributions of prior years						
b	Applied to 2017 distributable amount						
c	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
7	Excess distributions carryover to 2018. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а	Excess from 2013						
b	Excess from 2014						
c	Excess from 2015						
d	Excess from 2016						
е	Excess from 2017						

Part VI

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, 2 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 I lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	
Schedule A, Part II, Line 10 - Bequest of \$33,431 in 2017. Remainder is tax refunds.	

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part

#### 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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

• 0	ation F01(a)(4) (F) ar (6) area	mizational Complete Dort III				
	ection 501(c)(4), (5), or (6) orga of organization	inizations: Complete Part III.		Employer ide	atification much as	
		ELECAL SYSTEM		Employer idei	ntification number	
	UMERS FOR A RESPONSIV		or coation E01/a	o) or is a section 507 a	27-1966682	
Part  2 3 Part  1 2 3 4a b Part  1	Provide a description of definition of "political campaign activit Volunteer hours for political campaign activit Volunteer hours for political Complete if the Enter the amount of any of Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct	y expenditures (see instructions). cal campaign activities (see instructions) e organization is exempt under excise tax incurred by the organization and a section 4955 tax, did it file Form.	direct political calculus	mpaign activities in Part	IV. (see instructions  Yes N  Yes N	
2 3 4	Enter the amount of the 527 exempt function acti Total exempt function eline 17b	filing organization's funds contribution vities	uted to other org	anizations for section ▶ \$ on Form 1120-POL,		No.
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, e entributions received that were pro- fund or a political action committee	nber (EIN) of all seenter the amount property and directly	ection 527 political organi paid from the filing organi delivered to a separate p	zations to which the fill ization's funds. Also en political organization, su	ing itei ich
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0	t
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

Cat. No. 50084S

OCII	edule O (i Oil	11 330 01 330-LZ) 2011					raye 2
Pa	rt II-A	Complete if the organization section 501(h)).	n is exempt ı	under section 50	01(c)(3) and file	d Form 5768 (ele	ection under
Α	Check ▶	if the filing organization belon address, EIN, expenses, and	•	O , ,		liated group memb	per's name,
В	Check ▶	if the filing organization check	ed box A and	"limited control" pr	ovisions apply.		
		Limits on Lobb (The term "expenditures" m			)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1	a Total	lobbying expenditures to influence	public opinion	(grass roots lobby	ring)	0	
	<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .			g)	1,000		
	<b>c</b> Total	lobbying expenditures (add lines 1	a and 1b) .			1,000	
	<b>d</b> Other	exempt purpose expenditures .				108,630	
	e Total	exempt purpose expenditures (add	l lines 1c and 1	d)		109,630	
	f Lobbying nontaxable amount. Enter the amount from the following table in both columns.					21,926	
	If the a	mount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not ov	er \$500,000	20% of the ar	nount on line 1e.			
	Over \$	500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000.		
	Over \$	1,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000.		
	Over \$	1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$	17,000,000	\$1,000,000.				
	<b>g</b> Grass	roots nontaxable amount (enter 25	% of line 1f)			5,482	<u> </u>
	h Subtra	act line 1g from line 1a. If zero or le	ess, enter -0-			0	
	i Subtra	act line 1f from line 1c. If zero or le	ss, enter -0-			0	
		re is an amount other than zero ing section 4911 tax for this year?		1h or line 1i, did			Yes No
	(Son	ne organizations that made a sec	ction 501(h) el	Period Under sec ection do not hav ructions for lines	e to complete all	of the five colum	ns below.
		Lobbying	Expenditures	During 4-Year Av	veraging Period		
	Cal	endar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e) Total

Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e) Total			
2a	Lobbying nontaxable amount	13,957	20,108	19,381	21,926	75,372			
b	Lobbying ceiling amount (150% of line 2a, column (e))					113,058			
С	Total lobbying expenditures	1,000	1,000	1,500	1,000	4,500			
d	Grassroots nontaxable amount	3,489	5,027	4,845	5,482	18,843			
е	Grassroots ceiling amount (150% of line 2d, column (e))					28,265			
f	Grassroots lobbying expenditures	0	0	0	0	0			

Schedule C (Form 990 or 990-EZ) 2017

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).	iled	Form	5768		
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)		
	iption of the lobbying activity.	Yes	No	Aı	mount	t
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?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	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?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
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	prior	year?	3		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line :	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	$Aggregate\ amount\ reported\ in\ section\ 6033(e)(1)(A)\ notices\ of\ nondeductible\ section\ 162(e)\ dues\ .$		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part	Supplemental Information					
2 (see	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.					

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization	Employer identification number
CONSUMERS FOR A RESPONSIVE LEGAL SYSTEM	27-1966682
	27-1700002
Form 990-EZ, Part I, Line 8 - tax refunds	

#### Schedule O, Statement 1

#### CONSUMERS FOR A RESPONSIVE LEGAL SYSTEM

Form: Form 990-EZ (2017) EIN: 27-1966682

Page: 1

Part I, Line 16

#### Other Expenses Structured Explanation

Description	Amount
advertising	99
banking and financial	2,071
books and subscriptions	50
office supplies	344
state charitable registration fees	1,469
insurance	915
travel and meetings	4,074
office equipment	755
Total:	9.777

Schedule O, Statement 2

#### **CONSUMERS FOR A RESPONSIVE LEGAL SYSTEM**

Form: **Form 990-EZ (2017)** EIN: **27-1966682** 

Page: 2 Part III

#### **Primary Exempt Purpose**

#### **Primary Exempt Purpose**

Consumers for a Responsive Legal System works to make the legal system more accessible, affordable, and accountable to its users.