For Paperwork Reduction Act Notice, see the separate instructions.

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

DLN: 93493196004089 OMB No 1545-0047

> Open to Public Inspection

> > Form **990** (2017)

Cat No 11282Y

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990

For the 2017 calendar year, or tax year beginning 09-01-2017 , and ending 08-31-2018 C Name of organization COUNCIL ON LEGAL EDUCATION D Employer identification number B Check if applicable ☐ Address change OPPORTUNITY INC 45-4462410 ■ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1101 MERCANTILE LN NO 294 ☐ Amended return ☐ Application pending (240) 582-8600 City or town, state or province, country, and ZIP or foreign postal code LARGO, MD 20774 G Gross receipts \$ 587.554 Name and address of principal officer H(a) Is this a group return for CASSANDRA SNEED OGDEN ☐Yes **☑**No subordinates? 1101 MERCANTILE LN NO 294 H(b) Are all subordinates LARGO, MD 20774 ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW CLEOINC ORG L Year of formation 2012 M State of legal domicile K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities TO DIVERSIFY THE LEGAL PROFESSION Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 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) 4 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 6 8 6 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year** Current Year 409,693 8 Contributions and grants (Part VIII, line 1h) . 1,112,182 **9** Program service revenue (Part VIII, line 2g) . . . 164,510 147,865 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 19.910 26,377 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,296,602 583,935 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 11,400 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . 384,438 394,950 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶87,863 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 841,995 479,226 1,248,345 863,664 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -279,729 19 Revenue less expenses Subtract line 18 from line 12 . 48,257 Assets or d Balances **Beginning of Current Year End of Year** 1,519,499 1,595,121 20 Total assets (Part X, line 16) . 59,664 418,850 21 Total liabilities (Part X, line 26) 1,459,835 1,176,271 22 Net assets or fund balances Subtract line 21 from line 20 . Part III 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 2019-06-10 Signature of officer Sign Here CASSANDRA SNEED OGDEN CEO Type or print name and title Print/Type preparer's name KEVIN UBELHART Preparer's signature KEVIN UBELHART Date PTIN Check \square if 2019-06-10 P00431964 Paid self-employed Firm's name

UBELHART ROGSTAD & ASSOC PC Firm's EIN ► 46-2709365 **Preparer** Firm's address ► 4451 BROOKFIELD CORP DR 205 Phone no (703) 956-6570 Use Only CHANTILLY, VA 20151 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) .

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😼 . . . 2 Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 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? 4 Nο If "Yes," complete Schedule C, Part II 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? 5 Nο 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? Nο 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? Nο R Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian

Nο

Yes

Yes

Yes

11a

11b

11c

11d

11e

11f

12a

12b

15

16

17

18

19

Nο

Νo

Nο

Nο

Νo

Nο

No

Nο

Nο

No

Nο

No

No

Nο

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for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

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 🛸

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 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 14h

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

29

Part IV	Checklist of Required Schedules (continued)		
		Yes	No

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

No

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25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

20b 21

20a

Nο

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Νo Nο

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 23 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 24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

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Νo

No
No
No
No

Nο

Νo

Nο

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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			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 31			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	ЭD		
C	If res, to line 3a or 3b, did the organization line rollin 8686-17	5c		
	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		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	,		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13a		
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	II 163, has to med a Form 720 to report these payments II No, provide an explanation in Schedule O I I		- 00	0 (2017

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes
				~
Se	Check if Schedule O contains a response or note to any line in this Part VI		• •	
	ction At Governing Body and Hanagement		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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?	7a		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	\sqcup		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O 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			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶THE ORGANIZATION 1101 MERCANTILE LN NO 294 LARGO, MD 20774 (240) 582-8600			

(A)

Name and Title

(F)

Estimated

amount of other

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

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

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(E)

Reportable

compensation

- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

(B)

Average

hours per

- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persor	15			
☐ Check this box if neither the organization noi	r any related or	ganization compensated any	current officer, dire	ctor, or trustee

	week (list any hours for related	is both an officer and a director/trustee)						from the organization (W- 2/1099-	from related organizations (W- 2/1099-	compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) CASSANDRA S OGDEN CEO	40 00	Х		×				80,016	0	0
(2) ANGELA B COX CHAIRPERSON	3 00	х		х				0	0	0
(3) HONORABLE DENISE OWENS VICE CHAIRPERSON	3 00	х		х				0	0	0
(4) PAMELA V ROTHENBERG SECRETARY	3 00	Х		х				0	0	0
(5) MALCOLM L MORRIS TREASURER	3 00	х		x				0	0	0
(6) ELIZABETH A CAMPBELL BOARD MEMBER	3 00	х						0	0	0
(7) DARRYL L FRANKLIN BOARD MEMBER	3 00	Х						0	0	0
(8) PHYLLIS P HARRIS BOARD MEMBER	3 00	Х						0	0	0
(9) YANERIS M ROSA BOARD MEMBER	3 00	Х						0	0	0
										Form 990 (2017)

Part VII

(**F**) Estimated

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	(A) Name and Title	(B) Average hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee) Rep comp from comp 2/100							D) ortable ensation m the ation (W-	(E) Reportable compensatio from related organizations	n d (W-	compensati V- from the organization	
		for related organizations below dotted line)	Individual trustee or director	In stitutional Trustee	Officei	key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-MISC	-)	organizati relati organiza	ed
												+		
												+		
												+		
c ·	Total from continuation sheets to Pa	· · · · · · · · · · · · · · · · · · ·					 			80,016		0		0
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos					rece	eıved mo	· I	00,000	-1		
													Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>										employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual										the	4		No
5	Did any person listed on line 1a receiv services rendered to the organization											5		No
Se	ection B. Independent Contract	ors										_		
1	Complete this table for your five high- from the organization Report comper	est compensate										mpen	sation	
	Name a	(A) and business addre	ess							Desc	(B) ription of services		(C Compen	
	<u> </u>													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization \blacktriangleright 0

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

Part \	VII	■ Statement of	Revenue								- rage J
				a respo	onse or note to an	y line in t	hıs Part VII	Ι			🗆
							(A) revenue	Rel ex fu	(B) ated or xempt nction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1 a	Federated campaign	ns	1a				re	venue		512-514
nts ints		b Membership dues		1b							
ira! 10u		Fundraising events		1c							
s. C		d Related organizatio		1d							
Gift ilar		Government grants (co		1e	72,701						
š. ï		F All other contributions,	•	<u> </u>	,						
tio er S		and similar amounts no above		1f	336,992						
質	و	Noncash contribution	ons included								
Contributions, Giffs, Grants and Other Similar Amounts		ın lınes 1a-1f \$									
<u>ة ت</u>	h	Total.Add lines 1a-1	.f		· · •		409,693				
JE 6	_				Busines			02.450	22	150	
7.4		SUMMER INSTITUTE REC				900099		92,450	92,4		
ارد حص		AIE & ASAP SEMINAR RI				900099		20,710	20,7		
JE VIC		OTHER FEES				900099		3,905	3,9	005	
δ, E	e			_							
Program Service Revenue	f	All other program se	rvice revenue	<u>:</u>							
ĕ	g	Total. Add lines 2a-2f	f		>	147,865					
		Investment income (ii			nterest, and other	[26,45	57			26,457
		imilar amounts) . Income from investme			and proceeds	▶	20,10				20,137
				-		• <u> </u>					
			(ı) Rea		(II) Personal	İ					
	6a	Gross rents									
	b	Less rental expenses				-					
		Rental income or				_					
	C	(loss)									
	d	Net rental income o	r (loss)	•]					
	_	Constant	(ı) Securit	ties	(II) Other	_					
	/a	Gross amount from sales of assets other		3,539							
		than inventory									
	b	Less cost or other basis and		3,619							
		sales expenses		,		_					
		Gain or (loss) Net gain or (loss)		-80		4	-8	ın.			-80
		Gross income from fi		• ents	<u> </u>	+					
<u> </u>		(not including \$		of							
Other Revenue		contributions reporte See Part IV, line 18		. a							
Re	b	Less direct expense	s	ь							
ē		Net income or (loss)			ents 🕨						
₹	9a	Gross income from g See Part IV, line 19		ies							
				a							
		Less direct expense		b							
		: Net income or (loss) Gross sales of invent		activiti	les >	_					
		returns and allowand	ces								
		Noss soot of goods o	ald	a b		_					
		Less cost of goods s Net income or (loss)		ı							
		Miscellaneous		IIIVelle	Business Code						
	11	а									
	b	,									
	c										
		All other revenue . Total. Add lines 11a			<u> </u>						
				•							
	12	Total revenue. See	instructions	• •	· · · •		583,93	5	147,865		0 26,377 Form 990 (2017)
											FOLITE 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must comp	elete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗸
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		ехрепзез	general expenses	
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	80,016	1,867	52,099	26,050
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	266,016	133,585	96,431	36,000
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	11,598	4,540	4,979	2,079
10 Payroll taxes	26,808	10,921	11,205	4,682
11 Fees for services (non-employees)				
a Management				
b Legal	2,800		2,800	
c Accounting	15,887		15,887	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	7,804		7,804	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	139,536	120,297	17,239	2,000
12 Advertising and promotion				
13 Office expenses	42,809	31,836	8,159	2,814
14 Information technology	24,000	9,322	10,353	4,325
15 Royalties				
16 Occupancy	48,739	19,340	20,736	8,663
17 Travel	36,791	21,397	15,394	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	152,651	147,084	4,317	1,250
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	990		990	
23 Insurance	3,731		3,731	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a ELECTRONIC PAYMENT FEES	3,488	143	3,345	
b				
С				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	863,664	500,332	275,469	87,863
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)				

31

32

33

34

Net

31

32

33

34

1,176,271

1.595.121

Form **990** (2017)

1,459,835

1.519.499

Page **11**

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

(A) Beginning of year End of year 236,256 290,950 1 Cash-non-interest-bearing . 314.865 500,013 2 2 Savings and temporary cash investments . . .

100 049 35.200 3 3 Pledges and grants receivable, net . . . 474 4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets 7 Notes and loans receivable, net . Inventories for sale or use . 8 34,378 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other

5,906 10a basis Complete Part VI of Schedule D 3,220 10b 2.679 10c Less accumulated depreciation 772,502 11 Investments—publicly traded securities . 11

38,091 2,686 779,273 12 12 Investments—other securities See Part IV, line 11 . 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 3,602 15 15 Other assets See Part IV, line 11 . 1,519,499 16 Total assets. Add lines 1 through 15 (must equal line 34) . . 16

17 Accounts payable and accrued expenses 39.464 17 18 Grants payable . . . 18 19 20,200 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

3,602 1,595,121 56,675 100,000 262,175 Liabilities persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, 25 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D

59,664 418,850 26 Total liabilities. Add lines 17 through 25 . . 26

Organizations that follow SFAS 117 (ASC 958), check here ightleftarrows and complete lines 27 through 29, and lines 33 and 34. 27 1,459,835 27 Unrestricted net assets

1,176,271 28 28 Temporarily restricted net assets

Fund Balances 29 29 Permanently restricted net assets

Organizations that do not follow SFAS 117 (ASC 958),

check here

and complete lines 30 through 34. Assets or 30 Capital stock or trust principal, or current funds 30

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances .

2c

3a

3b

Yes

Nο

Form 990 (2017)

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

Additional Data

Software ID:

Software Version:

EIN: 45-4462410

Name: COUNCIL ON LEGAL EDUCATION OPPORTUNITY INC.

Form 990 (2017)

Form 990, Part III, Line 4a: PROVIDE PROGRAMS FOR SECONDARY SCHOOL AND COLLEGE STUDENTS - CONDUCT SEMINARS. WORKSHOPS AND ONLINE BLOGS TO HELP STUDENTS PREPARE FOR ENTRY INTO LAW SCHOOL PUBLISH THE CLEO EDGE MAGAZINE WHICH IS DESIGNED TO INFORM STUDENTS INTERESTED IN ATTENDING LAW SCHOOL ABOUT THE REQUIREMENTS FOR ADMISSION TO ABA APPROVED LAW SCHOOLS ACROSS THE UNITED STATES PROGRAMS FOR LAW STUDENTS - PROVIDE ONLINE ACADEMIC SUPPORT FORUM FOR FIRST YEAR LAW STUDENTS WHO PARTICIPATED IN A PRE-LAW PROGRAM TO RECEIVE ONGOING SUPPORT FROM LAW SCHOOL PROFESSORS PROVIDES A VEHICLE FOR STUDENTS TO EXCHANGE IDEAS AND SUGGESTIONS AND RECEIVE WEEKLY WORDS OF ENCOURAGEMENT AND TIPS FOR SUCCESS. PROVIDE

REGIONAL WORKSHOPS TO ADDRESS THE ACADEMIC CONCERNS OF FIRST AND SECOND YEAR LAW STUDENTS. PROVIDE PROFESSIONAL DEVELOPMENT SUPPORT ACTIVITIES THAT CREATE OPPORTUNITIES FOR LAW STUDENTS TO PARTICIPATE IN INTERNSHIPS, ATTEND SEMINARS, AND GAIN VALUABLE EXPERIENCE FROM

PRACTICING PROFESSIONALS

Form 990, Part III, Line 4b: PROGRAMS FOR PRE-LAW STUDENTS 1L-PREP ATTITUDE IS ESSENTIAL (AIE) SEMINARS - THE AIE PROGRAM PROVIDES COLLEGE STUDENTS ADMITTED TO A LAW SCHOOL A HEAD START ON LAW SCHOOL AND LEARNING IN A SUPPORTIVE ENVIRONMENT. THE SEMINAR EXPOSES STUDENTS TO THE BEST PRACTICES FOR CASE

BRIEFING, LEGAL RESEARCH AND WRITING, CONQUERING LAW SCHOOL EXAMS, AND MANAGING TIME AND FINANCES THESE SEMINARS ARE HELD IN VARIOUS CITIES

THROUGHOUT THE UNITED STATES ACHIEVING SUCCESS IN THE APPLICATION PROCESS (ASAP) SEMINARS - THE ASAP PROGRAM PREPARES TALENTED, MOTIVATED, YET UNDER-REPRESENTED STUDENTS TO GAIN ADMISSION TO AND SUCCEED IN LAW SCHOOL THE PROGRAM CURRICULUM FOCUSES ON ASPECTS OF THE LAW SCHOOL APPLICATION PROCESS THAT ARE COMMONLY OVERLOOKED OR UNDERVALUED BY STUDENTS WHEN APPLYING TO LAW SCHOOL THESE SEMINARS ARE OPEN TO

COLLEGE JUNIORS AND SENIORS, AS WELL AS POST-GRADUATES THESE SEMINARS ARE HELD IN VARIOUS CITIES THROUGHOUT THE UNITED STATES SUMMER

INSTITUTE PROGRAM - THIS PROGRAM IS A FOUR-WEEK SIMULATION OF THE FIRST YEAR OF LAW SCHOOL HELD ON THE CAMPUS OF MAJOR UNIVERSITY IN THE UNITED. EXPERIENCE TO BUILD SELF-CONFIDENCE AND SELF-ASSURANCE FOR THE ATTENDEES. THE PROGRAM DEVELOPS ABSTRACT THINKING, ANALYSIS, AND SYNTHESIZING

STATES EACH YEAR PRE-LAW SCHOOL STUDENTS PARTICIPATE IN A RIGOROUS AND DEMANDING FULL-TIME PROGRAM THAT HELPS DEMYSTIFY THE LAW SCHOOL

SKILLS

CLICKS MENTORING PROGRAM - CLEO LEGALLY INSPIRED COLLEGE KOHORTS OF STUDENTS MENTORING PROGRAM IS A MULTI-STATE PROGRAM THAT EMPOWERS UNDERSERVED HIGH SCHOOL STUDENTS THROUGH STRUCTURED MENTORSHIP AND EXPOSURE TO THE LEGAL, SPORTS. AND HEALTH PROFESSIONS

Form 990, Part III, Line 4c:

efil	e GR/	APHIC pri	nt - DO NOT	PROCESS	As Filed Data -				3493196004089			
SCI	HED	ULE A		Public (Charity Statu	s and Pul	blic Supp		OMB No 1545-0047			
Forr	n 990	or 990EZ)	l		rganization is a sect				2017			
epartr	nent of th	he Treasury			4947(a)(1) nonexe ▶ Attach to Form				2017			
		e Service	► Infor	nation abou	ıt Schedule A (Form			ictions is at	Open to Public Inspection			
		<mark>he organiza</mark> LEGAL EDUCA						Employer identific	ation number			
	RTUNIT							45-4462410				
	rt I				us (All organization e it is (For lines 1 thro			see instructions.				
1	- gamz		•		sociation of churches	-	•	(A)(i).				
2		•		·	1)(A)(ii). (Attach Sch			(,(-,-				
3						•	• •	iii).				
4		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's										
		name, city,	and state									
5			ation operated f (iv). (Complete		t of a college or unive	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170			
6		A federal, s	state, or local go	vernment or	governmental unit de	scribed in secti e	on 170(b)(1)(<i>A</i>	\)(v).				
7	✓		ation that norma '0(b)(1)(A)(vi		a substantial part of it Part II)	s support from a	ı governmental ι	ınıt or from the genera	al public described in			
8		A communi	ty trust describe	ed in section	170(b)(1)(A)(vi)	(Complete Part I	Ι)					
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a			
.0		from activit	ies related to its income and un	s exempt fur related busin	(1) more than 331/39 octions—subject to cer- less taxable income (leading)	taın exceptions,	and (2) no more	than 331/3% of its su	pport from gross			
l 1					d exclusively to test fo	r public safety S	See section 509	(a)(4).				
2		more public	cly supported or	ganizations (d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a				
a		Type I. A s organizatio	supporting orgai	nization oper to regularly a	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by				
b		Type II. A manageme	supporting orga	anızatıon sup tıng organıza	ervised or controlled i ation vested in the sar							
С		Type III f	unctionally int	egrated. A s	supporting organizatio				ted with, its			
d		Type III n	on-functionall	y integrate e organizatio	ions) You must com d. A supporting organi n generally must satis t IV, Sections A and	Ization operated fy a distribution	in connection wi requirement and	th its supported organ				
e	П		•	-	ved a written determir	•		pe I, Type II, Type II	I functionally			
f	Enter		or Type III non of supported or	•	integrated supporting	organization	·		·			
g	Provi	de the follow	ing information	about the su	ipported organization(s)						
	(i) N	(i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions)) (iv) Is the organization listed in your governing document? (see instructions)						(vi) Amount of other support (see instructions)				
						Yes	No					
				_								
ota	1											
		work Reduc	tion Act Notice	s see the Ti	nstructions for	Cat No 1128!	<u> </u> 5F	 Schedule A (Form 9º	 90 or 990-E7\ 2017			

▶ ☑

Schedule A (Form 990 or 990-EZ) 2017

▶□

Page 2

III. If the organization fails to qualify under the tests listed below, please complete Part III.)

9	ection A. Public Support						
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(0) 2013	(u) 2010	(e) 2017	(1) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	305,175	1,307,937	652,994	1,112,182	409,693	3,787,981
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	305,175	1,307,937	652,994	1,112,182	409,693	3,787,981
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)						1,119,156
6	Public support. Subtract line 5 from line 4						2,668,825
9	ection B. Total Support	•		•	•	•	
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f)Total
7	(or fiscal year beginning in) ▶	(a)2013 305,175	(b) 2014	(c)2015 652,994	(d)2016	(e)2017 409,693	(f) Total 3,787,981
8	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	` ,		` -		` '	
-	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the	` ,	1,307,937	652,994	1,112,182	409,693	3,787,981
8	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business	` ,	1,307,937	652,994	1,112,182	409,693	3,787,981
8	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10	305,175	1,307,937 6,866	652,994	1,112,182	409,693	3,787,981
9	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10	305,175	1,307,937 6,866	652,994	1,112,182	409,693	3,787,981 75,103
9 10 11	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	305,175 atc (see instruction the organization's	1,307,937 6,866 ns) s first, second, thin	652,994 21,950 d, fourth, or fifth	1,112,182 19,910 tax year as a secti	409,693 26,377 12 on 501(c)(3) orga	3,787,981 75,103 3,863,084 737,110
9 10 11 12 13	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, et First five years. If the Form 990 is fo check this box and stop here	305,175 atc (see instruction	1,307,937 6,866 ns) s first, second, thin	652,994 21,950 d, fourth, or fifth	1,112,182 19,910 tax year as a secti	409,693 26,377 12 on 501(c)(3) orga	3,787,981 75,103 3,863,084 737,110
9 10 11 12 13	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, e First five years. If the Form 990 is fo check this box and stop here Section C. Computation of Public	atc (see instruction the organization's	1,307,937 6,866 ns) s first, second, thin	652,994 21,950 d, fourth, or fifth	1,112,182 19,910 tax year as a secti	409,693 26,377 12 on 501(c)(3) orga	3,787,981 75,103 3,863,084 737,110
9 10 11 12 13 	(or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, e First five years. If the Form 990 is fo check this box and stop here Section C. Computation of Public	atc (see instruction the organization's Support Perce e 6, column (f) div	1,307,937 6,866 ns) s first, second, thin entage	652,994 21,950 d, fourth, or fifth	1,112,182 19,910 tax year as a secti	409,693 26,377 12 on 501(c)(3) orga	3,787,981 75,103 3,863,084 737,110

33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

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

h 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 gualifies 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

organization

instructions

supported organization

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

15 Public support percentage for 2016 Schedule A, Part II, line 14

16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
-	the organization fails to	qualify under	the tests listed	below, please co	omplete Part II.)	
36	ection A. Public Support Calendar year		Γ	I	I	I	
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 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	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
C.	from line 6) ection B. Total Support						
-	Calendar year			1	1	I	1
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ь	Unrelated business taxable income						
_	(less section 511 taxes) from						
	businesses acquired after June 30,						
_	1975						
11	Add lines 10a and 10b Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
13							
	11, and 12)				1		L
14	First five years. If the Form 990 is for	r the organization	n's first, second, ti	nird, fourth, or fift	n tax year as a se	ection 501(c)(3) o	
_	check this box and stop here						▶⊔
	ection C. Computation of Public S Public support percentage for 2017 (lin			column (f))		1.4=1	
15		,		column (1))		15	
16	Public support percentage from 2016 S					16	
	ection D. Computation of Investr			line 12 (C	5//	1 4- 1	
17	Investment income percentage for 201	•	• • • • • • • • • • • • • • • • • • • •	iine 13, column (f	"))	17	
18	Investment income percentage from 20	·	•			18	
19a	33 1/3% support tests—2017. If the o	organization did i	not check the box	on line 14, and lir	ne 15 is more thar	n 33 1/3%, and lin	_
	more than 33 $1/3\%$, check this box and s	-					▶ □
b	33 1/3% support tests—2016. If the	e organization did	not check a box	on line 14 or line	19a, and line 16 is	more than 33 1/	
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	janization	▶ □
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	l9a, or 19b, check	this box and see	instructions	ightharpoons

Page 4

5b

5c

6

7

8

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Schedule A (Form 990 or 990-EZ) 2017

organization's organizing document?

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

6

7

8

10a

answer line 10b below

_			
		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 decignation. If historic and continuing relationship, explain	 	├

describe the designation If historic and continuing relationship, explain	1	Ι
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		
ın section 509(a)(1) or (2)	2	Ι

	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		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
_			$\overline{}$

	(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
•	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(R) numbers?		

	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		
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 Part VI what controls the organization put in place to ensure such use	3с		
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		

	determination	3b	1	
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 Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	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 Part VI what controls the organization used to ensure that all support		1	

		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		
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 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 (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)			
			<u> </u>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			

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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
```

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (1) its supported organizations, (11) 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

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
organization had an interest? If "Yes," provide detail in Part VI.
                                                                                                                                 9b
```

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Pa	Supporting Organizations (continued)			
			Yes	No
	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		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	Section B. Type I Supporting Organizations			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in P VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	art		
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			
	Carting C. Tong II Comparing Operations			
3	Section 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 each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	s of	103	
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	Section 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 tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of 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)	ın		
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in organization's investment policies and in directing the use of the organization's income or assets at all times during the year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
_	Section 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 instr	uctions)		
_	a The organization satisfied the Activities Test Complete line 2 below	,		
	b The organization is the parent of each of its supported organizations Complete line 3 below			
	c The organization supported a governmental entity Describe in Part VI how you supported a government entity is	see instru	ctions)	
			,	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	ed 2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization involvement	′s 2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	-5		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI .	of 3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI. the role played by the organization in this regard</i>	3b		

Sched	ule A (Form 990 or 990-EZ) 2017			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	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		
l	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrat	ed Type III supporting oi	rganızatıon (see

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in Part VI) See instructio			
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to wh details in Part VI) See instructions			
Distributable amount for 2017 from Section C, line 6			
Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017		
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whole details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions

details in Part VI) See instructions	Terraine organization is respons	sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 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 Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
b From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j 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 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Additional Data

Software ID: Software Version:

EIN: 45-4462410

COUNCIL ON LEGAL EDUCATION

Page 8

OPPORTUNITY INC.

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI 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)

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
SCHEDULE D | Supplemental Finar

(Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.qov/form990.

OMB No 1545-0047

2017

DLN: 93493196004089

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Employer identification number

	NCIL ON LEGAL EDUCATION ORTUNITY INC				45-44	62410	
Pa	rt I Organizations Maintaining Donor Adv	ised Funds or C	ther	Similar Fun			
	Complete if the organization answered "Ye						
	-	(a) Don	or advi	sed funds		(b)Funds and other accounts	
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's e			ets held in don	or advised fu	nds are the Yes No	
6	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?					ng impermissible	
					F 000	☐ Yes ☐ No	
	Conservation Easements. Complete if t				Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the orga	•	that ap		- 6 .	-11	
	Preservation of land for public use (e g , recreation	n or education)				ally important land area	
	☐ Protection of natural habitat		Ш	Preservation (of a certified	historic structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conserva	tion co	ntribution in th	ne form of a o	conservation Held at the End of the Year	
а	Total number of conservation easements				2a	neid at the End of the Year	
b	Total acreage restricted by conservation easements				2b		
С	Number of conservation easements on a certified histor	nc structure include	ed in (a)	2c		
d	Number of conservation easements included in (c) acquistructure listed in the National Register	ured after 8/17/06	and n	ot on a historic	2d		
3	Number of conservation easements modified, transferred tax year ▶	ed, released, extin	guished	l, or terminate	d by the orga	anization during the	
	Number of states where property subject to conservation	on escement is loc	ated 🏲				
4			-				
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		ring, in	spection, nand	lling of violat	Yes No	
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of v	/iolatio	ns, and enforci	ng conservat	ion easements during the year	
7	Amount of expenses incurred in monitoring, inspecting	, handling of violati	ons, ar	nd enforcing co	nservation e	asements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements						
Par	Complete if the organization answered "You				Other Sim	ilar Assets.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items						
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items						
(i) Revenue included on Form 990, Part VIII, line 1					> \$	
(i	i)Assets included in Form 990, Part X					▶ \$	
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS				financial gai	in, provide the	
а	Revenue included on Form 990, Part VIII, line 1					▶ \$	
b	Assets included in Form 990, Part X					> \$	
For I	Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.		Cat	No 52283D	Schedule D (Form 990) 201	

Par	t IIII	Organizations Maintaining Col	lections of Art,	Histor	ical T	reas	ures, or	Other	Similar A	ssets (continue	ed)
3		the organization's acquisition, accession (check all that apply)	n, and other record	ls, check	any of	the fo	ollowing t	hat are a	significant i	use of its	s collecti	on
а		Public exhibition		d		Loar	or excha	ange prog	ırams			
b		Scholarly research		e		Othe	er					
С		Preservation for future generations										
4	Provi Part :	de a description of the organization's col XIII	lections and explai	n how the	ey furtl	her th	ie organiz	ation's ex	kempt purpo	se in		
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							nılar	□ Ye	es [] No
Pa	rt IV											
		Complete if the organization answ X, line 21.	vered "Yes" on Fo	orm 990	, Part	: IV, I	ine 9, or	reporte	ed an amoi	unt on I	Form 99	90, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other interme	ediary for	contri	bution	ns or othe	er assets	not	☐ Ye	es [] No
ь	If "Y€	es," explain the arrangement in Part XIII	and complete the	following	table		[Α	lmount		
С		nning balance	·	,			ļ	1c				
d	Addıt	ions during the year						1d				
е	Distri	butions during the year						1e				
f	Endır	ng balance						1f				
2a	Dıd tl	he organization include an amount on Fo	orm 990, Part X, lin	e 21, for	escrov	v or c	ustodial a	ccount lia	ability?		-] No
b	If "Y∈	es," explain the arrangement in Part XIII										
Pa	art V	Endowment Funds. Complete if	the organization	answei	red "Y	es" o	n Form	990, Par	t IV, line 1	10.		
_	_		(a)Current year	(b)P	rior yea	ar	(c)Two ye	ears back	(d)Three year	ars back	(e)Four	years back
	_	ing of year balance										
		outions										
		vestment earnings, gains, and losses										
		or scholarships										
	and pr	expenditures for facilities ograms										
		strative expenses										
g	End of	year balance										
2	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as											
а	Board	d designated or quasi-endowment >										
b		anent endowment ▶										
C	Temp	oorarily restricted endowment >										
_	•	percentages on lines 2a, 2b, and 2c shou	•									
3а		here endowment funds not in the posses nization by	ssion of the organiz	ation tha	t are h	ield ar	nd admini	stered fo	r the		TV.	es No
	-	nrelated organizations								3	a(i)	110
	(ii) r	elated organizations								3	a(ii)	
b	If "Y∈	es" on $3a(\Pi)$, are the related organization	ns listed as required	d on Sche	dule R	۱۶.				. [3b	
4	Desci	ribe in Part XIII the intended uses of the	organization's end	owment	funds							
Pa	rt VI	Land, Buildings, and Equipme										
	Docor	Complete if the organization answ		orm 990 st or other					rm 990, Pa		ne 10. (d) Book	valuo
	Descri	ption of property (a) Cost or oth (investme		ist of other	Dasis (otrier)	(C) Acci	umulated t	lepreciation		(a) Book	value
1 a	Land											
b	Buildin	gs										
c	Leaseh	nold improvements										
d	Equipn	nent				5,906	5		3,220			2,686
е	Other											
Tota	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colui	mn (B)), line	10(c)).		>			2,686

	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value	Cos	(c) Method o st or end-of-ye	rvaluation ar market value
	al derivatives					
2) Closely- 3)Other	held equity interests	_				
4)						
3)						
E)						
))						
≣)						
·)						
G)						
٦)						
otal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	•				
art VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 9	990, P	art IV, lı	ne 11c. See F	orm 990, Pai	t X, line 13.
	·		ook value		(c) Method o	
L)					se or end or ye	ar market value
2)						
3)						
4)						
5)						
5)						
7)						
B)						
9)						
otal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)					
Part IX	Other Assets. Complete if the organization answered 'Yes'	on For	m 990, Pa	rt IV, line 11d	See Form 990,	
	Other Assets. Complete if the organization answered 'Yes' (a) Description	on For	m 990, Pa	rt IV, line 11d	See Form 990,	Part X, line 15 (b) Book value
-)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
1)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
1) 2) 3)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
2)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
2) 3) 1) 5)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
3)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
(i) (i) (ii) (iii)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
(i) (i) (ii) (ii) (iii)		on For	m 990, Pa	rt IV, line 11d	See Form 990,	
(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(a) Description		m 990, Pa		See Form 990,	(b) Book value
1) 2) 3) 4) 5) 7) 33) 9)	imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer					(b) Book value
1) 2) 3) 4) 5) 7) 3) otal. (Colu	(a) Description		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 8) otal. (Colu	imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 8) Part X) Federal ((a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
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Return Reference Explanation

See Additional Data Table

Schedule D (Form 990) 2017

Page 5		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software Version:

EIN: 45-4462410 Name: COUNCIL ON LEGAL EDUCATION

OPPORTUNITY INC.

XES CLEO HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR O BLIGATIONS AS OF AUGUST 31, 2018 AND 2017 FISCAL YEARS ENDING ON OR AFTER AUGUST 31, 2015

Supplemental Information

Explanation

REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES

Software ID:

Return Reference PART X, LINE 2 CLEO IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, CLEO HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A PRIVATE FOU NDATION WITHIN THE MEANING OF SECTION 509(A) OF THE CODE ACCORDINGLY, THE ACCOMPANYING FI NANCIAL STATEMENTS DO NOT REFLECT A PROVISION OR LIABILITY FOR FEDERAL AND STATE INCOME TA

efile GRAPH	C print - DO NOT PROCESS As Filed D	Data -	DLN:	93493196004089
SCHEDUL (Form 990 or 9 Department of the Tre- Internal Revenue Serv	2017 Open to Public Inspection			
Name of the org COUNCIL ON LEGA OPPORTUNITY INC 990 Schedul	fication number			
Return Reference	Explanation			
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD OF DIRECTORS IS PROVIDED A DRAFT COPY OF THE FORM 990 FOR THEIR REVIEW AND COMME NT BEFORE IT IS FILED WITH THE IRS ONCE THE REVIEW IS COMPLETE, THE BOARD INSTRUCTS THE C EO OF THE ORGANIZATION TO FILE THE FORM 990			

Return Explanation

990 Schedule O, Supplemental Information

FORM 990,
PART VI,
SECTION B,
LINE 12C
IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE IF ITS TAX EXEMPT PURPOSES THE BOARD ALSO CONDUCTS PERIODIC REVIEWS

THE ORGANIZATION REQUIRES AN ANNUAL WRITTEN STATEMENT FROM EACH BOARD MEMBER WHICH AFFIRMS
THAT EACH BOARD MEMBER RECEIVED A COPY OF THE POLICY, HAS READ AND UNDERSTANDS THE POLICY
AND UNDERSTANDS THE ORGANIZATION MUST ENGAGE PRIMARILY
IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE IF ITS TAX EXEMPT PURPOSES THE BOARD ALSO REQ
UIRES ALL CONFLICTS OF INTEREST TO BE DOCUMENTED IN THE BOARD MINUTES THE BOARD ALSO COND
UCTS PERIODIC REVIEWS

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION B, LINE 15

Return Explanation
Reference

990 Schedule O, Supplemental Information

LINE 18

FORM 990, PART VI, SECTION C.

Explanation Return Reference

FORM 990. THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMEN TS ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST PART VI.

SECTION C. LINE 19

990 Schedule O, Supplemental Information

990 Schedule O, Supplemental Information

Return Explanation

,	GRAPHIC DESIGN SERVICES PROGRAM SERVICE EXPENSES 19,048 MANAGEMENT AND GENERAL EXPENSES 5.061 FUNDRAISING EXPENSES 2.000 TOTAL EXPENSES 26.109 INDEPENDENT CONTRACT CONSULTANTS
LINE 11G	PROGRAM SERVICE EXPENSES 83,746 MANAGEMENT AND GENERAL EXPENSES 11,275 FUNDRAISING EXP
	ENSES 0 TOTAL EXPENSES 95,021 PRINTING PROGRAM SERVICE EXPENSES 17,503 MANAGEMENT AND
	GENERAL EXPENSES 903 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 18.406