Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2018

G Do not enter social security numbers on this form as it may be made public. G Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public Inspection Department of the Treasury Internal Revenue Service 2018, and ending For the 2018 calendar year, or tax year beginning 8/31 2019 Check if applicable: D Employer identification number Address change DURANGO EARLY LEARNING CENTER 84-0852955 890 EAST 3RD AVENUE DURANGO, CO 81301 Telephone number Name change Initial return 970-259-1483 Final return/terminated Amended return G Gross receipts \$ 486, 640. H(a) Is this a group return for subordinates F Name and address of principal officer: $X|_{No}$ Application pending Yes H(b) Are all subordinates included? If "No," attach a list. (see instructions) Same As C Above Yes No Tax-exempt status: X 501(c)(3))H (insert no.) 4947(a)(1) or 501(c) (DURANGOEARLYLEARNI NG. COM Website: G H(c) Group exemption number G Form of organization: Trust OtherG 1981 M State of legal domicile: CO X Corporation L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: NURTURI NG CHI LD DEVELOPMENT I N PARTNERSHIP WITH FAMILIES OF DIVERSE BACKGROUNDS Check this box G 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). 0 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 15 Total number of volunteers (estimate if necessary)..... 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 38. 0. Prior Year **Current Year** Contributions and grants (Part VIII, line 1h). 22.093 19, 611. Program service revenue (Part VIII, line 2g) 434, 665 451, 308. Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 10 2, 115 6, 108. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 8, 956. 4, 586 Total revenue ' add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 12 465, 347 484, 095 Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 403, 735 383, 470 16a Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) G Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 95, 144 83, 112 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)... 486, 847 478, 614 Revenue less expenses. Subtract line 18 from line 12..... -21, 500. 5, 481 End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16). 873, 728 868, 718. 21 Total liabilities (Part X, line 26) 3, 243 2, 111. Net assets or fund balances. Subtract line 21 from line 20. 22 866, 607 870, 485 Part II 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. Signature of officer Date Sign JASON AUSTIN

Type or print name and title Here Treasurer Print/Type preparer's name Preparer's signature Hei di Trai nor 10/14/19 P00193356 self-employed Paid

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address G 1 W MAIN ST STE 5

Preparer

Use Only

Firm's name

GHEIDI A TRAINOR CPA,

CORTEZ, CO 81321-3100

Yes

Nο

Firm's EIN G 46-4040179 Phone no. 970-565-2435

Form 990 (2018) DURANGO EARLY LEARNING CENTER	84-0852955	Page 2
Part III Statement of Program Service Accomplishments		
Check if Schedule O contains a response or note to any line in this Part III		
NURTURING CHILD DEVELOPMENT IN PARTNERSHIP WITH FAMILIES OF D	NIVERSE BACKCROHINDS	
NORTORING CHIED DEVELOPMENT IN PARTNERSHIP WITH PAWLETES OF L	I VERSE DACKGROUNDS.	
2 Did the organization undertake any significant program services during the year which were not listed on		
Form 990 or 990-EZ?	Yes	X No
3 Did the organization cease conducting, or make significant changes in how it conducts, any progra	am services? Yes	X No
If "Yes," describe these changes on Schedule O.	103	<u> </u>
4 Describe the organization's program service accomplishments for each of its three largest program Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo and revenue, if any, for each program service reported.	n services, as measured by ex cations to others, the total exp	penses. enses,
4a (Code:) (Expenses \$ 362, 223. including grants of \$) (Revenue \$)
THE DURANGO EARLY LEARNING CENTER SERVED 66 TODDLER AND PRESC	HOOL AGE CHILDREN F	OR
THE 2018/2019 SCHOOL YEAR AND 57 CHILDREN FOR THE SUMMER PROG		
BASED OFF OF THE COLORADO EARLY LEARNING AND DEVELPMENT GUIDE		<u> </u>
OBSERVATIONS ON EACH CHILD'S INTERESTS AND DEVELOPMENTAL NEED		
INDIVIDUALIZED LEARNING EXPERIENCES AND ADAPTATIONS TO THE CL	ASSRUUM ENVI RUNMENI	·
THE EARLY LEARNING CENTER CHANGED TO A YEAR-ROUND PROGRAM STA	RTING AUGUST 2019.	
A DATABASE WAS IMPLEMENTED TO TRACK CURRENT AND ALUMNI FAMILI		
VOUNTEER HOURS, GRANT INFORMATION AND A METHOD FOR NOTIFING F	<u> AMILIES OF AN EMERG</u>	<u>ENCY</u>
SITUATION.		
4 b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
	<u> </u>	
Az (Codo:) (Europeos \$ including grants of \$) (Revenue \$	```
4 c (Code:) (Expenses \$ including grants of \$		
	· 	
4 d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue)	۱۵. \$	
(Expenses \$ including grants of \$) (Revenue 4 e Total program service expenses G 362 223	ις ψ <u>)</u>	

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Χ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Χ	
k	Did the organization report an amount for investments 'other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
C	Did the organization report an amount for investments 'program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Χ
c	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d	Χ	
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Χ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Χ
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
k	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	Χ	
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
k	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Χ
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х

Form 990 (2018) DURANGO EARLY LEARNING CENTER

Part IV Checklist of Required Schedules (continued)

Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organizations current and formal officers, directors, inustees, key employees, and highest compensated employees? If Yes, complete 23 3 3 4 and the registration have an tex-example bent sizes with an odistanting principal amount of forme the 13 100.000 as of the least day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If No., go to line 23b b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d and any tax exempts bonds? 24c d Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d and confidence on the organization area of the process of the organization expects and the organization area of the organization organization area of the organization organization area of the organization organization organization organization organization organiz				Yes	No
and former officers, directors, fustees, key employees, and highest compensated employees? If Yes, complete 23 2/4 a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after becomed \$1, 2002? If Yes, "answer lines 24b through 24d and 24b 1 bid the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 2 bid the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d 2 cb 1 bid the organization invest any proceeds of tax exempt bonds outstanding at any time during the year to defease any tax-exempt bonds? 24d 2 cb 2 cb 25 a Section \$01(6)(3), \$01(6)(3), \$01(6)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes, complete Schedule 1, Part 1 cb 1 bis the organization aware that lengaged in an excess benefit transaction with a disqualified person during the year? If Yes, complete Schedule 1, Part 1 cb 1 bis the organization aware that lengaged in an excess benefit transaction with a disqualified person during the year? If Yes, complete Schedule 1, Part 1 cb 1 bis the organization aware that lengaged in an excess benefit transaction with a disqualified person of the organization aware that the ransaction with a disqualified person of the organization aware that the ransaction organization organization organization aware that the organization provide a grant or organization provide against a contribution of employee thereof, a grant exceptions? 25b 2 bit the organization provide a grant or organization organization provides against a contribution of employee thereof, a grant exceptions? 26c 2 complete Schedule 1, Part IV complete S	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Χ
complete Schedule K, If 'No, 'go to line 25a. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any lax-exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? defease any lax-exempt bonds? d Did the organization act as an 'on behalf of' Issuer for bonds outstanding at any time during the year? d Did the organization account and the preson during the year? If 'Ves', complete Schedule L, Part I. 55a b School E, Part II. 25b b School E, Part II. 25b b School E, Part II. 25c b Did the organization export any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, frustees, key employees, highest compensated employees, substantial contributor or employee thereof a grant selection committee member or to a 3% contributor or employee thereof a grant selection committee member or to a 3% contributor or employee thereof a grant selection committee member or to a 3% contributor or employee thereof a grant selection committee member or to a 3% contributor or former officer a grant selection committee member or to a 3% contributor or employee thereof a grant selection committee member or to a 3% contributor or employee thereof a grant selection committee member or to a 3% contributor or employees and the selection of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 27	23	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete	23		Х
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 24d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization with a disqualified person during the year? If Yes,' complete Schedule I., Part II. 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes,' complete Schedule I., Part II. 25a bits the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the finansaction has not been reported on any of the organization's prior Forms 990 or 990-t-27 if Yes,' complete Schedule I., Part II. 26 Did the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any current or Yes,' complete Schedule I., Part II. 27 Did the organization provide a grant for other assistance to an officer, director, frustee, key employee, subtantial contribution or employee thereof. a grant selection promittee member, or for a 33% controlled entity or family member of any of these persons? If Yes, complete Schedule I., Part IV. 28a bit A family member of a current or former officer, director, frustee, or key employee? If Yes, complete Schedule I., Part IV. 28b bit A family member of a current or former officer, director, frustee, or key employee? If Yes, complete Schedule I., Part IV. 28c bit he organization receive more than \$25,000 in non-cash contributions? If Yes, complete Schedule M. 29 Did the organization receive more than \$25,000 in non-cash contributions? If Yes, complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Yes, complete Schedule R. Part II. 31 Did the organization or value of the similar seasets or the organization related	24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
any tax-exempt bonds? 24d d I bil the organization at as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if 'Yes,' complete Schedule L, Part I. 25 b Is the organization aware that the negaged in an excess benefit transaction with a disqualified person during the year? if 'Yes,' complete Schedule L, Part I. 25 b Is the organization aware that the negaged in an excess benefit transaction with a disqualified person and that the transaction share that the transaction are a manual to part X, line S, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II. 26 Did the organization provide a grant or other assistance to an officer, director, flustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 33% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV 28 a complete Schedule L, Part IV 27 and Complete Schedule L, Part IV 28 a complete Schedule R, Part IV 30 a complete Schedule R, Part IV 31 a complete Schedule R, Part IV	-		24b		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. 25a bis the organization have that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E72 If "Yes," complete Schedule L, Part I. 25b bis the organization report any amount on Part X, line \$, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II. 27c Did the organization proport any amount on Part X, line \$, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employee, substantial contributor or employees thereof, a grant selection committee member, or to a 55% controlled entity or family member of any of those persons? If "Yes," complete Schedule L, Part IV. 28c Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV. 29d Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV. 29d Did the organization excelve more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV. 20d Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than \$25% of its net assets? If "Yes," complete Schedule N, Part II. 32 Did t	•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. 25a 25b 15 she organization experts that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II. 25b 25c 25		d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
that the fransaction has not been répôrted on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I. 25b 2 2 2 2 2 2 2 2 2	25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Χ
If Yes,' complete Schedule L, Part II. 26 Joint be 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 of any of these persons? If Yes,' complete Schedule L, Part III. 27 Joint be organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV. 28 John A family member of a current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV. 28 John A family member of a current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV. 28 John A family member of a current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If Yes,' complete Schedule M. 29 John Bold the organization inductate, terminate, or dissolve and cease operations? If Yes,' complete Schedule N. 20 Did the organization inductate, terminate, or dissolve and cease operations? If Yes,' complete Schedule N, Part I. 31 John Bold the organization will only of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If Yes,' complete Schedule R, Part I. 33 John Bold the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.701-2 and 301.701-3? If Yes,' complete Schedule R, Part V. Ine 2. 34 Was the organization related to any tax-exempt or taxable entity? If Yes,' complete Schedule R, Part V. Ine 2. 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 510((3) organizations. Did the organizatio	l	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete	25b		Χ
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If Yes,' complete Schedule L, Part IV Instructions for applicable filing thresholds, conditions, and exceptions): 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 a Current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. 28 b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28 c	26	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? If 'Yes,' complete Schedule L, Part II.	26		X
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. 28a	27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		Х
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Job the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part I. 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II. 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, line 1. 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization of Trees, "complete Schedule R, Part V, line 2. 37 Did the organization complete Schedule O and provide explanations in Schedule O, for Part VI, lines 1. 38	28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Job the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 30.1.7701-2 and 301.7701-37 If 'Yes,' complete Schedule R, Part II. 32 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization organization meceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization or Press, complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,'		a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Χ
officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. 31 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 31 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part II. 33 3 Did the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part III. III, or IV, and Part IV, line 1. 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a	ı		28b		Χ
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I I. Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?	•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
contributions? If 'Yes,' complete Schedule M. 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 31 32 Schedule N, Part II. 32 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part II. III, or IV, and Part V, line 1. 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?. 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part V. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. 38 Did the organization complete Schedule O. 39 Did the organization organized in Box 3 of Form 1096. Enter -0- if not applicable. 20 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Χ
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I. 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization. Sa, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. 35 b If 'Yes,' complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 36 J Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. 37 J Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. 38 A V Part 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. 10 Expert the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 10 D D D D D D D D D D D D D D D D D D D	30		30		Х
Schedule N, Part II. 32 33 33 30 33 30 30 30	31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I. 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 If 'Yes,' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. 29 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V. 10 Description of Forms W-2G included in line 1a. Enter -0- if not applicable. 11 Description of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Χ
and Part V, line 1. 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 5 b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 36 Joint the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part V . 37 Joint the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O more than 5% of the organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers ar	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		Χ
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. 28 Part 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 N 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c X		and Part V, line 1	34		Х
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
organization? If 'Yes,' complete Schedule R, Part V, line 2		o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Χ
Note. All Form 990 filers are required to complete Schedule O	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Χ
Check if Schedule O contains a response or note to any line in this Part V. Yes N 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Note. All Form 990 filers are required to complete Schedule O	38	Χ	
Ta Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Pa				
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Check if Schedule O contains a response or note to any line in this Part V		Ves	No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
		c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
FILL GOLD CONTROL CONT	3A <i>A</i>				(2018)

Form 990 (2018) DURANGO EARLY LEARNI NG CENTER

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

			Yes	No
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 15			
k	of fat least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		Х
2.	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.	3 b		
	a 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)?			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country: G	4 a		X
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Χ
(: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	a 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?	6 a		Х
k	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
	services provided to the payor?	7 a		Χ
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.0		Х
	I If 'Yes,' indicate the number of Forms 8282 filed during the year	7 c		^
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Χ
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a 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?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders			
	o Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	o 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?	12.0		
•	Note. See the instructions for additional information the organization must report on Schedule O.	13 a		
ŀ	Ÿ '			
	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			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	טדו		
ıЭ	excess parachute payment(s) during the year?	15		Χ
	If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Χ
	If 'Yes,' complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI..... Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . 10 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 ... 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 Χ 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?..... Χ 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Χ Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders?..... Χ 6 7 a 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?. 7 a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a **b** Each committee with authority to act on behalf of the governing body?..... 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O. g Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates? Χ 10 a b 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?............ Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12 a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ to conflicts?. 12 b Χ 12 c 13 Did the organization have a written whistleblower policy?...... 13 Χ Did the organization have a written document retention and destruction policy?..... Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official... Χ b Other officers or key employees of the organization...See .Schedul e. .O..... X 15 b 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?..... Χ 16 a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed G None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) See Sch. 0 Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule 0 State the name, address, and telephone number of the person who possesses the organization's books and records G REBECCA TREFRY 890 EAST 3RD AVENUE DURANGO CO 81301 970-259-1483

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

				(C)						
(A) Name and Title	(B) Average hours	thar	one i both	box, an o	unles fficer truste	eck moss pers and a ee)	on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) JASON AUSTIN	1									
Di rector	0	Χ						0.	0.	0.
(2) HEIDI MCGRATH	1									
Di rector	0	Χ						0.	0.	0.
_(3)_LINDA_BAKER	1									
Di rector	0	Χ						0.	0.	0.
_(4)_AMBER_POWELL	1							_	_	
<u>Di rector</u>	0	Χ						0.	0.	0.
_(5) KATE LACKERMANN	1									_
Director	0	Χ						0.	0.	0.
_(6) LEXI E _STETSON-LEE	1									_
Di rector	0	Χ						0.	0.	0.
_(7)_KRI STIN_THOMAS	1	ļ						•	•	
Vi ce Presi dent	0	-		Χ				0.	0.	0.
_(8)_KEVIN_HEINER	1			.,				•	•	0
Presi dent	0			Χ				0.	0.	0.
(9) KRI STI NA SI LADI	1			V				0	0	0
Secretary (10) STACK PEAUCH	0			Χ				0.	0.	0.
(10) STACY BEAUGH	'			Χ				0	0	0
Treasurer (11) LESLEY LACH	40			۸				0.	0.	0.
PAST EXEC DIR	0					Х		0.	0.	0.
(12) REBECCA TREFRY	40					^		0.	0.	0.
EXEC DI RECTOR	0 -	•				Χ		0.	0.	0.
(13)						/\		0.	0.	<u> </u>
		1								
(14)										
		•								

Part VII Section A. Officers, Directors, Tru		Key	ΕΠ	•		es, a	anc	a Hignest Con	ipensated Emp	oyee	s (cont	inued)
	(B)			(0	•							
(A)	Average hours	(do	not c	check	more	than	one h an	(D)	(E)	_	(F)	al
Name and title	per week		cer ar	nd a d	directo	or/trus	tee)	Reportable compensation from	Reportable compensation from	amo	stimate unt of o	ther
	(list any hours	or d	ibsni	Officer	Key	High emp	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	1	rom the	;
	for related	Individual or director	ution	œ	emp	est c loyed	ner			ar	id relate anizatio	ed
	organiza - tions below	individual trustee or director	म् ।		Key employee	omp						
	dotted line)	stee	institutional trustee		()	Highest compensated employee						
	,		4 D			bed						
(15)												
(16)												
(4.7)												
(17)												
(18)												
		•										
(19)												
(20)												
(04)												
(21)												
(22)												
(23)												
(24)												
(25)												
(20)												
1 b Sub-total						(G	0.	0.			0.
c Total from continuation sheets to Part VII, Section							G	0.	0.			0.
d Total (add lines 1b and 1c)								0.	0.			0.
2 Total number of individuals (including but not limited	to those I	isted	abo	ve) v	who I	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
from the organization G 0											Voc	No
2 Did the appropriation list any former officer discount			l.a.				ما مد	inhoot common co	had amamlayaa		Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	ior, or tru n individu	stee, al		, en	ibio	yee, 1		iignest compensa		. 3		Х
4 For any individual listed on line 1a, is the sum of	reportab	le co	aam	ensa	ition	and	oth	er compensation	from			
the organization and related organizations greate such individual	r than \$1	50,00	?00	If 'Y	'es,'	com	ıplet	te Schedule J for		4		X
5 Did any person listed on line 1a receive or accrue												^
for services rendered to the organization? If 'Yes	,' comple	te Sc	hed	lule	J fo	r suc	h pe	erson		. 5		Χ
Section B. Independent Contractors	4 1 ! 1		-l I		- 4		41		#100 000 -f			
Complete this table for your five highest compensation from the organization. Report compensation.	sated indestation for	epeni the ca	deni alen	dar y	ntrad year	ctors endii	ιna ng ν	t received more ti vith or within the or	nan \$100,000 of ganization's tax year			
(A) Name and business addr								(B)		_ (C)	
Name and business addr	ess							Description (of services	Compe	ensati	on
2 Total number of independent contractors (including b		ited to	o tho	se I	isted	abo	ve) v	who received more	than			
\$100,000 of compensation from the organization	G ₀											

	n 990 (2018) DURANGO EARLY LEARNING CEN	NTER		84-0852955	Page 9
Par	t VIII Statement of Revenue				
	Check if Schedule O contains a response or note	e to any line in this Part V (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue Contributions, Gifts, Grants	1 a Federated campaigns	451, 308.	451, 308.		
Other Revenue	3 Investment income (including dividends, interest are other similar amounts). 4 Income from investment of tax-exempt bond proce 5 Royalties. 6 a Gross rents. b Less: rental expenses c Rental income or (loss). d Net rental income or (loss). 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses. c Gain or (loss). d Net gain or (loss). d Net gain or (loss). d Net gain or (loss). sea Gross income from fundraising events (not including \$	G 6, 108. eds G 6, 108. ends G 6, 108. ends G 6 ends G 7 ends	6, 108.		
	c d All other revenue				

484, 095

457, 416.

0.

G

e Total. Add lines 11a-11d . . .

Total revenue. See instructions

Form 990 (2018) DURANGO EARLY LEARNING CENTER Part IX | Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4) organizations must	complete all colum	nns. All other organizations m	ust complete column	(A).
-------------------------------	----------------------	--------------------	--------------------------------	---------------------	------

	Check if Schedule O contains a re				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.			3	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	356, 581.	264, 693.	91, 888.	<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	330, 301.	204, 073.	71, 000.	
9	Other employee benefits				
10	Payroll taxes	26, 889.	20, 167.	6, 722.	
11	Fees for services (non-employees):	20,007.	207 1071	0, ,	
á	a Management				
	b Legal				
	c Accounting	1, 000.		1, 000.	
	d Lobbying.	1,000.		1,000.	
	e Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	665.		665.	
13	Office expenses	4, 897.		4, 897.	
14	Information technology	2, 315.		2, 315.	
15	Royalties				
16	Occupancy	19, 370.	17, 285.	2, 085.	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	21, 977.	18, 808.	3, 169.	
23	Insurance	15, 865.	13, 944.	1, 921.	
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.)			·	
á	³ JANI TORI AL	14, 130.	12, 717.	1, 413.	
	PROGRAM SUPPLIES	12, 046.	12, 046.	,	
	STAFF DEVELOPMENT	1, 350.	1, 350.		
	LICENSING	1, 213.	1, 213.		
	All other expenses	316.	1,210.		316.
25	Total functional expenses. Add lines 1 through 24e	478, 614.	362, 223.	116, 075.	316.
	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 G if following SOP 98-2 (ASC 958-720).	-, -, -,	,	.,	2.0.

Part X Balance Sheet

		Check if Schedule O contains a response or note to	any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash ' non-interest-bearing			81, 013.	1	82, 874.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	nployee	es. Complete		5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons (as defined under		6	
Ø	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		-		8	
As	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1	841, 412.			
		Less: accumulated depreciation.		181, 389.	678, 014.	10 c	660, 023.
	11	Investments ' publicly traded securities			070, 014.	11	000, 023.
	12	Investments ' other securities. See Part IV, line 11.		<u>L</u>		12	
	13	Investments ' program-related. See Part IV, line 11.		<u> </u>		13	
	14	Intangible assets.			14	4, 483.	
	15	Other assets. See Part IV, line 11		109, 691.	15	126, 348.	
	16	Total assets. Add lines 1 through 15 (must equal line	34)		868, 718.	16	873, 728.
	17	Accounts payable and accrued expenses			000, 710.	17	073, 720.
	18	Grants payable		18			
	19	Deferred revenue		1, 191.	19	2, 990.	
	20	Tax-exempt bond liabilities				20	
es.	21	Escrow or custodial account liability. Complete Part I'	V of Sc	hedule D		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	l disqua	lified persons		22	
	23	Secured mortgages and notes payable to unrelated th		-		23	
	24	Unsecured notes and loans payable to unrelated third		<u> </u>		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com		<u>L</u>	920.	25	253.
	26	Total liabilities. Add lines 17 through 25			2, 111.	26	3, 243.
ses		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.	re G	χ and complete			
ŭ	27	Unrestricted net assets			866, 607.	27	870, 485.
<u>ag</u>	28	Temporarily restricted net assets				28	
౼	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	eck her	e G 📗			
0	30	Capital stock or trust principal, or current funds				30	
Set	31	Paid-in or capital surplus, or land, building, or equipm		<u> </u>		31	
As	32	Retained earnings, endowment, accumulated income,	<u> -</u>		32		
et	33	Total net assets or fund balances	<u>-</u>	866, 607.	33	870, 485.	
Z	34	Total liabilities and net assets/fund balances	<u></u> .		868, 718.	34	873, 728.

Pai	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		48	84, C	95.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		4	78, 6	14.	
3	Revenue less expenses. Subtract line 2 from line 1	3			5, 4	81.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8	66, 6	07.	
5	Net unrealized gains (losses) on investments.	5			-1, 6	03.	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O).	9				0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8	70, 4	85.	
Pai	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.						
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a	a e				
1	b Were the organization's financial statements audited by an independent accountant?			2 b		Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	te					
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2 c			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a		Χ	
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b			
BAA	TEEA0112L 08/03/18			Form	990 ((2018)	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

G Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

vame or the	e organization					Empi	oyer identifica	ation numbe	r		
DURAN	GO EARLY LEARNING (CENTER				84-	-085295	5			
Part I	Reason for Public Cha	rity Status (All or	ganizations must o	comple	te this	part.) Se	e instruc	tions.			
The orga	nization is not a private found	dation because it is: (For lines 1 through 12,	check o	nly one	box.)					
1	A church, convention of church	es, or association of ch	nurches described in sect	ion 170(b)(1)(A)(i	i).					
2 X	X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)										
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	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	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	An organization that normally r in section 170(b)(1)(A)(vi).	receives a substantial p Complete Part II.)	eart of its support from a	governm	ental uni	t or from the	general pul	blic descri	bed		
8	A community trust described	•	A)(vi). (Complete Part I	1.)							
9	An agricultural research organi		•		oniunctio	n with a land	l-grant colle	eae			
· L	or university or a non-land-grai		(see instructions). Enter								
10	An organization that normally r			om conti	ibutions	momborshir	foot and	aross rocc			
	from activities related to its investment income and unre June 30, 1975. See section!	exempt functions' sub lated business taxable	oject to certain exception in the come (less section)	ns, and	(2) no r	more than 3	3-1/3% of i	ts suppor	t from gross		
11	An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	509(a)(4).					
12	An organization organized an or more publicly supported of lines 12a through 12d that de	rganizations describe	d in section 509(a)(1) c	r sectio	n 509(a)	(2). See se c	ction 509(a	ut the pur)(3) . Chea	poses of one ck the box in		
а	Type I. A supporting organization organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervise gularly appoint or elect	d, or controlled by its sup	ported o	rganizati	on(s), typical	lly by givino	the suppo on. You m	orted ust		
b	Type II. A supporting organiz management of the supporting	zation supervised or c organization vested in	ontrolled in connection the same persons that co	with its ontrol or	supporte manage	ed organizat	tion(s), by d organizat	having co	ontrol or u		
с	must complete Part IV, Section Type III functionally integrated organization(s) (see instruction)		ion operated in connection	n with, aı	nd functio	onally integrat	ed with, its	supported			
d	Type III non-functionally integ	rated. A supporting org	anization operated in cor	nection	with its s	supported ora	anization(s) that is no	ot		
	functionally integrated. The cinstructions). You must com	organization generally	must satisfy a distribu	tion req	uirement	t and an atte	entiveness	requirem	ent (see		
е	Check this box if the organiz integrated, or Type III non-fu	inctionally integrated:	supporting organizatior	١.		· .		e III funct	ionally		
	nter the number of supported	5									
	ovide the following information	n about the supported	d organization(s).	ı				1			
(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	overning	(v) Amount of support (see		` ' .	mount of other (see instructions)		
				Yes	No						
(A)											
(B)											
(C)											
(D)											
(E)											
T - 4 - 1											

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

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

Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) G	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 The portion of total						
J	contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) G	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see in:	structions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	nird, fourth, or fifth t	ax year as a section	n 501(c)(3)	G 🔲
Sec	tion C. Computation of Pul	blic Support F	ercentage				
	Public support percentage for 20		-				
	Public support percentage from 2					ļl	%
	33-1/3% support test' 2018. If the and stop here. The organization	qualifies as a pul	blicly supported o	organization			G 📙
b	33-1/3% support test' 2017. If the and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a or 16a or 16a	, and line 15 is 3	3-1/3% or more, c	theck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as a	box and stop her a publicly support	e. Explain in Part ed organization	VI how the
18	Private foundation. If the organize	zation did not che	eck a box on line	13, 16a, 16b, 17a,	, or 17b, check th	s box and see ins	structionsG

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sac	tion A. Public Support	oto noted below,	please complete i	i ait ii.)			
		(a) 2014	(b) 201F	(c) 2016	(4) 2017	(0) 2010	(f) Total
	lar year (or fiscal year beginning in) G Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) G	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)(3	g) G 🗌
	tion C. Computation of Pul					, , , , , , , , , , , , , , , , , , ,	
	Public support percentage for 20	*					%
	Public support percentage from 2					16	%
	tion D. Computation of Inv					 	
17	Investment income percentage for	or 2018 (line 10c,	column (f), divide	ed by line 13, col	umn (f))		%
	Investment income percentage fi						%
	33-1/3% support tests' 2018. If t is not more than 33-1/3%, check	this box and sto	p here . The organ	ization qualifies	as a publicly supp	orted organization	
	33-1/3% support tests ' 2017. If t line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box	and stop here . Th	e organization qu	ualifies as a public	ly supported organ	nization G

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
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 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 <i>Part VI</i> 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		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <i>Part VI</i> 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 <i>Part VI</i> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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 <i>Part VI</i> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 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 Part VI .	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 <i>Part VI</i> .	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 Part VI .	9с		
0a	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		

Pa	irt IV Supporting Organizations (continued)			
	Healtha arranization accepted a gift or contribution from any of the fallowing paragraps		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? a 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		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in <i>Part VI</i> .	11c		
Sec	ction B. Type I Supporting Organizations			
	31 11 3 3		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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities.			
	If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
	applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <i>Part VI</i> how providing such			
	benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the	2		
Car	supporting organization.	2		
Sec	ction C. Type II Supporting Organizations		Yes	No
1	Was a majority of the agree instincts of the disasters of trustees during the tay year place a majority of the disasters of trustees		103	140
'	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <i>Part VI</i> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction 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	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				
	voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
	in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a The organization satisfied the Activities Test. Complete <i>line 2</i> below.			
	b The organization is the parent of each of its supported organizations. Complete <i>line 3</i> below.			
	$c \ \square$ The organization supported a governmental entity. Describe in $\it Part VI$ how you supported a government entity (see in	struct	tions).	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the			
	supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported			
	organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
	substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of			
	the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the			
	organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			
	each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its	26		
	supported organizations? If 'Yes,' describe in <i>Part VI</i> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganizati	ons	302,00
Check here if the organization satisfied the Integral Part Test as a qualifying trinstructions. All other Type III non-functionally integrated supporting organization.	rust on Not tions must	v. 20, 1970 (explain in complete Sections A	n Part VI). See A through E.
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 shot tax year or assets held for part of year):	ort		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in 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		
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 i (see instructions).	ntegrated	Type III supporting or	ganization
BAA		Schedule A (F	orm 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D ' Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required 'explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

G 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.

G Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

	DURANGO EARLY LEARNING CENTER	84-0852955
Par	t Organizations Maintaining Donor Advised Funds or Other Similar Fun	
	Organizations Maintaining Donor Advised Funds or Other Similar Fun Complete if the organization answered 'Yes' on Form 990, Part IV, line	6.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in do are the organization's property, subject to the organization's exclusive legal control?	nor advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund for charitable purposes and not for the benefit of the donor or donor advisor, or for any other impermissible private benefit?	s can be used only purpose conferring
Par		
ı aı	Complete if the organization answered 'Yes' on Form 990, Part IV, line	7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		f a historically important land area
		f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form last day of the tax year.	n of a conservation easement on the
		Held at the End of the Tax Year
á	Total number of conservation easements	2a
k	Total acreage restricted by conservation easements	2b
(: Number of conservation easements on a certified historic structure included in (a)	2c
(Number of conservation easements included in (c) acquired after 7/25/06, and not on a histor structure listed in the National Register.	ic 2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the tax year G	e organization during the
4	Number of states where property subject to conservation easement is located G	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har	dling of violations,
_	and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cor G	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conserv G\$	ation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec and section 170(h)(4)(B)(ii)?	etion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expension include, if applicable, the text of the footnote to the organization's financial statements that describe the control of the control of the control of the organization of the control of t	se statement, and balance sheet, and
Par	conservation easements. t Organizations Maintaining Collections of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line	8.
1 8	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rever art, historical treasures, or other similar assets held for public exhibition, education, or research in fu in Part XIII, the text of the footnote to its financial statements that describes these items.	nue statement and balance sheet works of rtherance of public service, provide,
ŀ	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue in historical treasures, or other similar assets held for public exhibition, education, or research in further following amounts relating to these items:	rance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1	
_	(ii) Assets included in Form 990, Part X	
	If the organization received or held works of art, historical treasures, or other similar assets for financial mounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
	Revenue included on Form 990, Part VIII, line 1	
k	Assets included in Form 990, Part X	

Part III Organizations Mainta	ining Collec	tions of Art, His	torical Treasures, o	r Other Similar Ass	sets (continu	.ed)		
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):								
a Public exhibition		d Loa	n or exchange programs					
b Scholarly research		e Oth	er					
c Preservation for future gener	rations							
4 Provide a description of the organize Part XIII.	zation's collectior	ns and explain how th	ney further the organization	's exempt purpose in				
5 During the year, did the organiza to be sold to raise funds rather t	han to be maint	ained as part of the	e organization's collection	?	Yes	No		
Part IV Escrow and Custodia line 9, or reported an	Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.							
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian	or other intermedia	ry for contributions or oth	er assets not included	Yes	No		
b If 'Yes,' explain the arrangement	t in Part XIII and	d complete the follo	wing table:			_		
	Amount							
c Beginning balance								
d Additions during the year								
e Distributions during the year								
f Ending balance								
2 a Did the organization include an a				•		No		
b If 'Yes,' explain the arrangement	t in Part XIII. Cr	neck nere if the expl	ianation has been provide	ed on Part XIII				
Part V Endowment Funds. C	`amplata if th	o organization	anguared Weet on Fr	orm 000 Dort IV/ I	no 10			
Part V Endowment Funds. C	(a) Current ye					e hack		
1 a Beginning of year balance	. , ,	(b) 11101 y	(c) Two years back	(u) Three years back	(e) Four year.	3 Dack		
b Contributions					_			
					-			
c Net investment earnings, gains, and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentag	e of the current	year end balance (line 1g, column (a)) held	as:				
a Board designated or quasi-endowm	nent G	%						
b Permanent endowment G	%							
c Temporarily restricted endowmen	nt G	<u></u> %						
The percentages on lines 2a, 2b, a	nd 2c should equ	ıal 100%.						
3 a Are there endowment funds not in organization by:	the possession o	f the organization tha	at are held and administered	d for the	Yes	No		
(i) unrelated organizations					3a(i)			
(ii) related organizations					3a(ii)			
b If 'Yes' on line 3a(ii), are the rela	ated organizatio	ns listed as require	d on Schedule R?		3b			
4 Describe in Part XIII the intende	d uses of the or	ganization's endow	ment funds.					
Part VI Land, Buildings, and Complete if the organ		ered 'Yes' on Fo	orm 990, Part IV, line	e 11a. See Form 99	90, Part X, li	ne 10.		
Description of property	(2) Cost or other basi (investment)	s (b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue		
1 a Land			305, 804.		305,	, 804.		
b Buildings			428, 142.	143, 023.		, 119.		
c Leasehold improvements			35, 879.	2, 392.	33,	, 487.		
d Equipment			69, 787.	35, 974.	33,	, 813.		
e Other			1, 800.		1,	, 800.		
Total. Add lines 1a through 1e. (Colum	nn (d) must equ	al Form 990, Part X	, column (B), line 10c.)	G	660,	, 023.		
BAA		<u> </u>		Scheo	dule D (Form 990)) 2018		

Schedule D (Form 990) 2018

Part VII Investments ' Other Securities.		N/A	
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	f-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) G			
Part VIII Investments ' Program Related. Complete if the organization answered	L'Vos' on Form 000	N/A Dart IV ling 11c Soc Form 0	00 Dart V line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)	(b) Book value	(b) Method of Valuation. Good of one	or your market value
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) G			
Part IX Other Assets.			
Complete if the organization answered), Part IV, line 11d. See Form 9	
(1) MUTUAL FUNDS	scription		(b) Book value 126, 348.
(1) MOTOAL FUNDS (2)			120, 340.
(3)			
(4)			
(5)			
(-)			
(6)			
(6) (7)			
(6) (7) (8)			
(6) (7) (8) (9)			
(6) (7) (8) (9) (10)	2) I'm 45)		10/ 0/0
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (to the column (to	3) line 15.)	G	126, 348.
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (light part X Other Liabilities.			
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (left) Part X Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990, Part IV, line 11		
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (light part X Other Liabilities.			
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (left) Part X Other Liabilities. Complete if the organization answered 'Yes' on Figure (a) Description of liability (1) Federal income taxes	orm 990, Part IV, line 11 (b) Book value	e or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (left) Part X Other Liabilities. Complete if the organization answered 'Yes' on Figure (a) Description of liability (1) Federal income taxes	form 990, Part IV, line 11 (b) Book value	e or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (left) Part X Other Liabilities. Complete if the organization answered 'Yes' on Figure (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Rounding (4)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (left) Part X Other Liabilities. Complete if the organization answered 'Yes' on Factorial income taxes (2) PAYROLL TAX (3) Rounding (4) (5)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (I) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Roundi ng (4) (5) (6)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (I) Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Roundi ng (4) (5) (6) (7)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (I Part X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Roundi ng (4) (5) (6) (7) (8)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (to part X) Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Roundi ng (4) (5) (6) (7) (8) (9)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (to part X) Complete if the organization answered 'Yes' on Four (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Rounding (4) (5) (6) (7) (8) (9) (10)	form 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (left) Part X Other Liabilities. Complete if the organization answered 'Yes' on Factorial income taxes (2) PAYROLL TAX (3) Roundi ng (4) (5) (6) (7) (8) (9) (10) (11)	orm 990, Part IV, line 11 (b) Book value	le or 11f. See Form 990, Part X, line 25 O. 3.	
(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (to part X) Complete if the organization answered 'Yes' on Four (a) Description of liability (1) Federal income taxes (2) PAYROLL TAX (3) Rounding (4) (5) (6) (7) (8) (9) (10)	orm 990, Part IV, line 11 (b) Book value 25	e or 11f. See Form 990, Part X, line 25 0. 3.	

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.					
1 Total revenue, gains, and other support per audited financial statements	1				
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
a Net unrealized gains (losses) on investments					
b Donated services and use of facilities					
c Recoveries of prior year grants					
d Other (Describe in Part XIII.)					
e Add lines 2a through 2d.	2 e				
3 Subtract line 2e from line 1.	3				
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
a Investment expenses not included on Form 990, Part VIII, line 7b					
b Other (Describe in Part XIII.) 4 b					
c Add lines 4a and 4b	4 c				
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5				
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return N/A				
	itotairi. 10771				
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	Notarri. W. //				
	1				
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 Donated Services and Use of					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1				
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 2 e				
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	1 2 e				
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Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2018

SCHEDULE E (Form 990 or 990-EZ)

Schools

G Complete if the organization answered 'Yes' on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

G Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DURANGO EARLY LEARNING CENTER

Employer identification number

84-0852955

Par	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe. If 'No,' please explain. If you need more space, use Part II.	3	X	
	RACIAL NONDISCRIMINATION POLICY IS PUBLISHED IN SCHOOL LITERATURE AND PROMOTIONS.	3	X	
4	Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff?	4 a	X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4 b	Х	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4 c	X	
(d Copies of all material used by the organization or on its behalf to solicit contributions?	4 d	X	
5	Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?	5 a		X
	O Admissions policies?	5 b		X
C	Employment of faculty or administrative staff?	5 c		Χ
C	d Scholarships or other financial assistance?	5 d		Χ
6	e Educational policies?	5 e		Χ
f	Use of facilities?	5 f		Χ
Ç	g Athletic programs?	5 g		Χ
ŀ	Other extracurricular activities?	5 h		X
6 8	a Does the organization receive any financial aid or assistance from a governmental agency?	6 a		Χ
k 7	Has the organization's right to such aid ever been revoked or suspended?	6 b		Χ
,	4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If	7	V	

Schedule E (Form 990 or 990-EZ) 2018 DURANGO EARLY LEARNING CENTER 84-0852955

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

G Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

DURANGO EARLY LEARNING CENTER

Employer identification number

84-0852955

Form 990, Part VI, Line 11b - Form 990 Review Process

THE BOARD OF DIRECTORS IS PROVIDED A COPY OF THE TAX RETURN PRIOR THE MONTHLY BOARD MEETING TO APPROVING THE FILING.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

THE BOARD OF DIRECTORS REGULARLY REVIEWS RELATED PARTY ACITIVITY FOR COMPLIANCE WITH POLICY.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

THE BOARD OF DIRECTORS MEETS ANNUALLY TO DISCUSS THE EXECUTIVE DIRECTORS

COMPENSATION BASED ON A PERFORMANCE REVIEW.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

INFORMATION IS MAINTAINED AT 890 EAST THIRD AVENUE IN DURANGO, CO.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

ALL GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THE LEARNING CENTER.