Form 8868

(Rev. January 2025)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

must use	Form 7004 to request an extension of time to file incom	ne tax retu	rns.			
Part I - Io	lentification					
Type or	Name of exempt organization, employer, or other file	r, see instr	ructions.	Taxpayer	r identification nun	nber (TIN)
Print						
File by the	CLOTHES TO KIDS OF DENVER, INC.				26-21487	33
due date for	Number, street, and room or suite no. If a P.O. box, s					
filing your return. See	2890 S. COLORADO BLVD. SUI					
instructions.	City, town or post office, state, and ZIP code. For a f DENVER , CO 80222	oreign add	Iress, see instructions.			
Enter the	Return Code for the return that this application is for (fi	le a separa	ate application for each return)			01
Applicati	on Is For	Return	Application Is For			Return
		Code				Code
Form 990	or Form 990-EZ	01	Form 4720 (other than individual)			09
Form 472	0 (individual)	03	Form 5227			10
Form 990	PF	04	Form 6069			11
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12
Form 990	-T (trust other than above)	06	Form 5330 (individual)			13
Form 990	-T (corporation)	07	Form 5330 (other than individual)			14
Form 104	1-A	08	Form 990-T (governmental entities)		15
Pla	n Name n Number n Year Ending (MM/DD/YYYY)					
	utomatic Extension of Time To File for Exempt Organ	nizations	see instructions)			
The bo	ooks are in the care of KATHLEEN PHILLIP	S	,			
			#M3 - DENVER, CO 8	0222		
Teleph	none No. 720-379-4630		Fax No.			
• If the d	organization does not have an office or place of busines	s in the Ur	nited States, check this box			
• If this	is for a Group Return, enter the organization's four-digit	Group Exe	emption Number (GEN)	If this is fo	r the whole group,	check this
box [\square . If it is for part of the group, check this box $__$			f all memb	ers the extension	is for.
1 I re	quest an automatic 6-month extension of time until $\ \underline{\mathbf{N}}$	OVEMB:	ER 15 , 20 25 , to file	e the exem	npt organization re	turn for
	organization named above. The extension is for the org	anization'	s return for:			
X	calendar year 20 24 or					
	tax year beginning	, 20	, and ending		. ,2	20
2 If th	ne tax year entered in line 1 is for less than 12 months, o	check reas	on:	Final retur	n	
	Change in accounting period	-				
	his application is for Forms 990-PF, 990-T, 4720, or 6069	9, enter the	e tentative tax, less			0
	nonrefundable credits. See instructions.			3a	\$	0.
	nis application is for Forms 990-PF, 990-T, 4720, or 6069					0
	imated tax payments made. Include any prior year over			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa				^	0.
usi	ng EFTPS (Electronic Federal Tax Payment System). Se	e instructio	ons.	3c	\$	υ.

Department of the Treasury

** PUBLIC DISCLOSURE COPY ** **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Interi	nal Reve	nue Service Go to www.irs.gov/Form990 for instructions and the	latest in	formation.	Inspection	
A	For th	e 2024 calendar year, or tax year beginning and end	ding			
B a	Check if applicab	e: C Name of organization		D Employer identification	on number	
	Addre	E CLOTHES TO KIDS OF DENVER, INC.				
	Name chang	e Doing business as	26-2148733			
	Initial		om/suite	E Telephone number		
	Final return	2890 S. COLORADO BLVD. SUITE #M3		303-257-89		
	termii ated Amer	, , , ,	ļ	G Gross receipts \$	2,432,514.	
	return	DENVER, CO = 00222		H(a) Is this a group retur		
	tion pendi	F Name and address of principal officer: DODD1 MOETILENT AT		for subordinates?		
<u> </u>		SAME AS C ABOVE		H(b) Are all subordinates includ		
		empt status: 🚺 501(c)(3) 🔄 501(c) () (insert no.) 🔄 4947(a)(1) or [te: WWW.CLOTHESTOKIDSDENVER.ORG	527	If "No," attach a list		
	Websi	organization: X Corporation Trust Association Other		H(c) Group exemption not formation: 2008 M St		
	art I	Summary	L Year o		ale of legal domicile: CO	
	1	Briefly describe the organization's mission or most significant activities: THE MI	SSTO	N OF CLOTHES	TO KIDS	
Activities & Governance	'	OF DENVER, INC. IS TO PROVIDE NEW AND QUAL	. <u>דידי</u> ו	USED CLOTHING		
nar	2	Check this box if the organization discontinued its operations or disposed				
ver	3	Number of voting members of the governing body (Part VI, line 1a)		15		
ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			15	
s S	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)			11	
/itie	6	Total number of volunteers (estimate if necessary)			477	
cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.	
4		Net unrelated business taxable income from Form 990-T, Part I, line 11		0.		
				Prior Year	Current Year	
Ð	8	Contributions and grants (Part VIII, line 1h)		1,837,191.	2,341,892.	
enu	9	Program service revenue (Part VIII, line 2g)		0.	0.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		13,784.	23,587.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		169,125.	-9,708.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,020,100.	2,355,771.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,409,515.	1,490,285.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	<u> </u>	
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		434,144.	514,890.	
Expenses		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 50, 118		0.	0.	
Ä		5 1 () () 1		145,638.	144,391.	
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,989,297.	2,149,566.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		30,803.	206,205.	
JC SS	19	Revenue less expenses. Subtract line 18 from line 12		jinning of Current Year	End of Year	
ance	20	Total assets (Part X, line 16)		1,139,181.	1,311,537.	
Assu Bal	20		····	119,259.	85,410.	
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		1,019,922.	1,226,127.	
		Signaturo Block		_, , , , , , , , , , , , , , , , , ,	_,,,	

Part II | Signature Block

Т

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date				
	BOBBY MOEHLENPAH, TREASURER							
	Type or print name and title	_						
	Preparer's name	Preparer's signature	Date	Check PTIN				
Paid	KARL FLOWER			self-employed P01589970				
Preparer	Firm's name WATSON COON RYAN,			Firm's EIN 82-3543701				
Use Only	Firm's address 6025 SOUTH QUEBEC	STREET, SUITE 260						
	CENTENNIAL, CO 80	111		Phone no. 303 - 792 - 3020				
May the I	May the IRS discuss this return with the preparer shown above? See instructions							
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 432001 12-10-24 Form 990 (2024)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2024) CLOTHES TO KIDS OF DENVER, INC. 26-2148733 Page	ge 2
Pa	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	
	THE MISSION OF CLOTHES TO KIDS OF DENVER, INC. IS TO PROVIDE NEW AND	
	QUALITY USED CLOTHING TO STUDENTS FROM LOW-INCOME OR IN-CRISIS	
	FAMILIES IN THE DENVER METRO AREA, FREE OF CHARGE.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2,013,447. including grants of \$ 1,490,285.) (Revenue \$)
	IN 2024, CTKD DISTRIBUTED 13,950 WARDROBES AND 41,359 POUNDS OF EXTRA	
	ITEMS, WITH 93% OF SHOPPERS SELECTING A COMPLETE WARDROBE (ALL 21	
	NON-OPTIONAL PIECES). AS OF DECEMBER 31, 2024, CTKD HAS PROVIDED	
	118,257 WARDROBES TO STUDENTS IN NEED SINCE OPENING IN 2008. THIS	
	EQUATES TO NEARLY 2,500,000 PIECES OF CLOTHING AND SHOES.	
	TO DE ELICIPIE EOD OLOTUINO, OMUDENTO MUOT LIVE IN METRO DENVED, DE	
	TO BE ELIGIBLE FOR CLOTHING, STUDENTS MUST LIVE IN METRO DENVER, BE	
	ENROLLED IN GRADES PRESCHOOL-12 OR PURSUING A GED (21 YEARS OLD AND NOUNCER) AND BE CONCLORED IN NEED OF ACCLEMANCE DECAUSE.	
	YOUNGER) AND BE CONSIDERED IN NEED OF ASSISTANCE BECAUSE:	
	- THEIR FAMILY IS IN CRISIS OR EXPERIENCING ECONOMIC HARDSHIP (DUE TO	
	ILLNESS, JOB LOSS, DISASTER, POVERTY, HOMELESSNESS OR DISPLACEMENT,	
	- THEY ARE ELIGIBLE FOR FREE OR REDUCED LUNCH (FRL) AT SCHOOL,	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	_)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	<u> </u>
		′
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 2,013,447.	
	Form 990 (2	:024)
	CEE COMPTINE O FOD COMPTNIANTON(C)	

SEE SCHEDULE O FOR CONTINUATION(S)

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⊢orm	990	(2024)

Form 990 (2024) CLOTHES TO KIDS OF DENVER, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
0	If "Yes," complete Schedule A	1	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2		
5	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	•		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Rev. Proc. 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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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 donor-restricted endowments			v
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		х	
b	Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	120		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	u		<u> </u>
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			37
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	Δ	
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
20-2	complete Schedule G, Part III	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 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	(2024)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		37	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
d	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		x
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		- 23
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
20	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	21		- 23
28	instructions for applicable filing thresholds, conditions, and exceptions):			
2	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
Ū	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	Х	

Form 990	(2024)
Part V	Sta

 O24)
 CLOTHES TO KIDS OF DENVER, INC.

 Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					
5a						X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut		-			
-	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the arganization receive a payment in average of $$75$ made partly as a contribution and partly for goods and so	nuinna	arouidad to the power?	7-	Х	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a 7b	X	
b			wired	7b	<u>л</u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w to file Form 8282?		-	70		x
A	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7c		- 23
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		1 ct2	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of the per			76 7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Fi			7g		
h						
8				7h		
	sponsoring organization have excess business holdings at any time during the year?					
9						
а						
b						
10	Section 501(c)(7) organizations. Enter:		_			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
b	Note: See the instructions for additional information the organization must report on Schedule O.					
D	Enter the amount of reserves the organization is required to maintain by the states in which the	126	I			
~	organization is licensed to issue qualified health plans	13b 13c				
	Enter the amount of reserves on hand	L	I	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14a		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			1 10		
	excess parachute payment(s) during the year?			15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmer	nt inco	me?	16		х
-	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	ctivitie	S			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

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Se 17 18

		EN PHILLI				•	C C	
890	S	COLORADO	BLVD	#M3,	DENVER,	CO	80222	

CLOTHES TO KIDS OF DENVER, INC. Form 990 (2024) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 15 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. 15 **b** Enter the number of voting members included on line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10a **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? 10b **11a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14

ба	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	X	ŝ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	able entity during the year? 16a 'es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation into venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16a 'es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation into venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b 'es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation into venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b 'feb C. Disclosure 16b 'the states with which a copy of this Form 990 is required to be filed NONE tion 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) is public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Own website X Upon request Other (explain on Schedule O) cribe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and finance			
	exempt status with respect to such arrangements?	16b		
ec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed NONE			
3	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. X Own website X Upon request Other (explain on Schedule O)			
Э	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			

Did the process for determining compensation of the following persons include a review and approval by independent

a The organization's CEO, Executive Director, or top management official

b Other officers or key employees of the organization

persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.

X

No

х

Х

Х

X

х

Х

х

х

No

Χ

х

Х

Yes

Х

Х

Х

х

Χ

Х

Х

15a

15b

Х

Yes

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than

List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe nd a d	rson	is bot	h an	compensation	compensation	amount of
	week (list any	<u> </u>						from the	from related organizations	other compensation
	hours for	Individual trustee or director				p		organization	(W-2/1099-MISC/	from the
	related	tee or	Istee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	I trus	nal tru		oyee	ompe		1099-NEC)		and related
	below	ividua	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1)	line)	lnd	lns	0ffi	Key	en Hig	Ъ.			
(1) KATHLEEN PHILLIPS EXECUTIVE DIRECTOR	30.00			x				63,544.	0.	0.
(2) JOYCE MEYERS	10.00			^				05,544.	0.	0.
FOUNDER	10.00	x						0.	0.	0.
(3) MARY OVERINGTON	5.00							0.		<u>0.</u>
FOUNDER	5.00	x						0.	0.	0.
(4) RANDI LEWIS	2.00									
DIRECTOR		x						0.	0.	0.
(5) TONY PIERANGELI	2.00									
DIRECTOR		x						0.	0.	0.
(6) CAMILLE COX	2.00									
DIRECTOR		x						0.	0.	0.
(7) BOBBY MOEHLENPAH	5.00									
DIRECTOR		X						0.	0.	0.
(8) JENNIFER ZUCKER	2.00									
DIRECTOR		Х						0.	0.	0.
(9) SCOTT SPICHER	2.00								_	_
DIRECTOR		X						0.	0.	0.
(10) SUSAN GERSHWIN	2.00									
DIRECTOR		X						0.	0.	0.
(11) MARCI MEYER	2.00									<u>^</u>
DIRECTOR	0.00	X						0.	0.	0.
(12) MARY VALENTI	2.00	.,								0
BOARD CHAIR	E 00	X		X				0.	0.	0.
(13) TYLER SAMPLES	5.00	x		v				0.	0.	0
TREASURER (14) AMY BENTZ	2.00	<u>^</u>		X				0.	0.	0.
(14) AMY BENTZ SECRETARY	2.00	x		x				0.	0.	0.
SECRETARI		<u> </u> ^							0.	0.
		1								

Form 990 (2024)	CLOTHES '						-			26-21	487	733	Pa	age 8
	ers, Directors, Trus		oloy	ees,			ghe	st C	Compensated Employe					
(A) Name and	title	(B) Average hours per week	box,	not cl , unles	ss per	i tion more rson i	than o is botl pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount o other		
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS(1099-NEC)	SC/ from the			e on ed
			Ir	I	0	K	Ε	H						
											_			
									63,544.		0			
1b Subtotal c Total from continuati <u>d Total (add lines 1b ar</u>		II, Section A							03,544.		0. 0. 0.			0.
	duals (including but n								eceived more than \$100		-			0
•			ee, k	key e	empl	oye	e, or	hig	hest compensated emp	ployee on			Yes	No
line 1a? If "Yes," compFor any individual listeand related organization	d on line 1a, is the su	um of reportabl	e co	ompe	ensa	ation	n and	d oth	her compensation from	the organization		3		x x
5 Did any person listed of	on line 1a receive or a	accrue comper	nsati	ion f	rom	any	unr	elat	ed organization or indiv			5		X
Section B. Independent C														
	ort compensation for								hat received more than the organization's tax		pensa			
	(A) Name and business	address	NC	ONE	2				(B) Description of s	services	Сс	(C) ompens		<u>ו</u>
2 Total number of indep \$100,000 of compensi	,	•	ot lir	nite	d to	tho:	-	sted	l above) who received n	nore than				

Part VIII Statement of Revenue										
			Check if Schedule O contains a resp	onse	or note to any li					
						(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1	b d e f	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants, and similar amounts not included above1fNoncash contributions included in lines 1a-1f1gTotal. Add lines 1a-1f1	2, \$1,	293,073. 048,819. 325,668.	-				
Program Service Revenue		g	All other program service revenue Total. Add lines 2a-2f							
	3 4 5		Investment income (including dividends, other similar amounts) Income from investment of tax-exempt b Royalties	ond p	roceeds	23,587.			23,587.	
			Gross rents 6a Less: rental expenses 6b Rental income or (loss) 6c Net rental income or (loss)							
Revenue	7	b	Gross amount from sales of assets other than inventory (i) Secur Less: cost or other basis and sales expenses 7b Gain or (loss) 7c	ities	(ii) Other					
Rev			Net gain or (loss)	I						
Other	8	а	Gross income from fundraising events (not including \$ 293,073. of contributions reported on line 1c). See Part IV, line 18	8a	67,035. 76,743.					
			Less: direct expenses			-9,708.			-9,708.	
	9		Gross income from gaming activities. Se Part IV, line 19	e					577000	
			Less: direct expenses							
			Net income or (loss) from gaming activitie	es						
	10	а	Gross sales of inventory, less returns							
		h	and allowances			-				
			Less: cost of goods sold							
		<u> </u>		<u> </u>	Business Code					
sno	11	а			240					
Miscellaneous Revenue		b								
sells		С		[
Alisc B		d	All other revenue							
<			Total. Add lines 11a-11d							
	12		Total revenue. See instructions			2,355,771.	0.	0.	13,879.	

CLOTHES TO KIDS OF DENVER, INC.

Form 990 (2024)

26-2148733 Page 9

CLOTHES TO KIDS OF DENVER,

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

INC.

	Check if Schedule O contains a respons not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D)
2	Quanta and athen assistance to demostic superioritisms		expenses	general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
3	Grants and other assistance to domestic				
3	individuals. See Part IV, line 22	1,490,285.	1,490,285.		
	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,	60 544			
	trustees, and key employees	63,544.	52,599.	5,665.	5,280.
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	393,627.	326,522.	34,763.	32,342.
8	Pension plan accruals and contributions (include	0 500		1 000	C O O
	section 401(k) and 403(b) employer contributions)	9,582.	7,857.	1,037.	688.
9	Other employee benefits	40 125	20 005	4.046	4 21 6
10	Payroll taxes	48,137.	38,975.	4,846.	4,316.
11	Fees for services (nonemployees):				
	Management				
	Legal	20.020		20.020	
	Accounting	20,928.		20,928.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)	9,959.	6,243.	87.	3,629.
12	Advertising and promotion	6,195.	3,791.	1,833.	5,029
13	Office expenses	6,532.	5,415.	942.	175
14	Information technology	0,552.	J,41J.	942.	1/3
15	Royalties	75,883.	74,004.	612.	1,267.
16		664.	610.	54.	1,207
17	Travel	004.	010.	J4•	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings				
19 00					
20 21	Interest Payments to affiliates				
21	Depreciation, depletion, and amortization	7,301.		7,301.	
22		2,297.		1,675.	622.
23 24	Other expenses. Itemize expenses not covered	-,25,.			
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а		5,773.		5,773.	
b	VOLUNTEER APPRECIATION	3,634.	3,001.	,	633.
c	BACKGROUND CHECKS ON VO	2,905.	2,905.		
d		2,320.	1,240.	485.	595.
	All other expenses	,	,		
25	Total functional expenses. Add lines 1 through 24e	2,149,566.	2,013,447.	86,001.	50,118.
26	Joint costs. Complete this line only if the organization	- •	- •	<u>·</u>	
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Eorm 990 (202

CLOTHES	то	KIDS	OF	DENVER,	INC.
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26-2148733 Page 11

Iu			to to cr	w line in this Dart V			
		Check if Schedule O contains a response or no	te to ar		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			280,458.		181,784.
	2	Savings and temporary cash investments			548,310.	2	741,056.
	3	Pledges and grants receivable, net			15,000.	3	67,129.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe				6	
ŝ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			169,772.	8	215,873.
As	9					9	14,228.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	126,022.			
	ь	Less: accumulated depreciation		68,348.	123,441.	10c	57,674.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			2,200.	15	33,793.
	16	Total assets. Add lines 1 through 15 (must equ			1,139,181.	16	1,311,537.
	17	Accounts payable and accrued expenses			6,907.	17	52,975.
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ŝ	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
abil		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line					
		of Schedule D			112,352.	25	32,435.
	26	Total liabilities. Add lines 17 through 25			119,259.	26	85,410.
		Organizations that follow FASB ASC 958, cho					
ces		and complete lines 27, 28, 32, and 33.					
an	27				925,018.	27	1,131,377.
Ba	28				94,904.	28	1,131,377. 94,750.
pui		Organizations that do not follow FASB ASC 9					
Ę		and complete lines 29 through 33.					
s ol	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or e				30	
As	31	Retained earnings, endowment, accumulated ir				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,019,922.		1,226,127.
_	33	Total liabilities and net assets/fund balances			1,139,181.	33	1,311,537.
	•				-	•	Eorm 990 (2024)

Form **990** (2024)

Form 990 (2024) Part X Balance Sheet

	Foi	m	990	(20	2
-				-1		_

432012	12-10-24	

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	,35	5,7	71.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	,14	9,5	66.	
3	Revenue less expenses. Subtract line 2 from line 1	3			6,2		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	,01	9,9	22.	
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)						
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	1	,22	6,1	27.	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					Х	
					Yes	No	
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🖾 Accrual 🔲 Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basi	s,				
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audi	t,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule	О.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	udit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

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

Form **990** (2024)

Form 990 (2024) CLOTHES TO Part XI Reconciliation of Net Assets

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990)

Total

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2024
Open to Public Inspection

Name of the organization Employer identification number										
		CLOT	HES TO KID	S OF	DENVER,	INC.			2	6-2148733
Pa	rt I	Reason for Public	Charity Status.	(All orgar	nizations must c	complete t	his part.) S	See instruction	าร.	
The	organ	ization is not a private found	lation because it is: (For lines	1 through 12, o	check only	one box.)			
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in sect	ion 170(b)(1)(A)(ii).	Attach S	chedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service org	anization	described in s	ection 170)(b)(1)(A)(i	ii).		
4		A medical research organiz	ation operated in co	njunctior	n with a hospita	l describe	d in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
		city, and state:								
5		An organization operated for	or the benefit of a co	llege or u	university owne	d or opera	ted by a g	overnmental	unit descrik	bed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local go	vernment or governr	nental ur	nit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	Illy receives a substa	ntial parl	t of its support	from a gov	ernmental	l unit or from	the general	public described in
		section 170(b)(1)(A)(vi). (C								
8		A community trust describe	ed in section 170(b)	(1)(A)(vi).	. (Complete Par	t II.)				
9		An agricultural research org					ed in conju	unction with a	land-grant	college
		or university or a non-land-	grant college of agric	ulture (se	ee instructions)	. Enter the	name, cit	y, and state o	f the colleg	e or
		university:								
10		An organization that norma	Illy receives (1) more	than 33	1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from
		activities related to its exen								
		income and unrelated busi	ness taxable income	(less sec	ction 511 tax) fr	om busine	esses acqu	uired by the o	rganization	after June 30, 1975.
		See section 509(a)(2). (Con	mplete Part III.)						-	
11		An organization organized	and operated exclus	ively to t	est for public sa	afety. See	section 50	09(a)(4).		
12		An organization organized	and operated exclus	ively for	the benefit of, t	o perform	the functio	ons of, or to c	arry out the	e purposes of one or
		more publicly supported or	ganizations describe	ed in sec	tion 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3).	Check the box on
		lines 12a through 12d that	describes the type of	of suppor	ting organizatio	on and con	nplete line:	s 12e, 12f, an	d 12g.	
а		Type I. A supporting orga	anization operated, s	upervise	ed, or controlled	by its sup	ported or	ganization(s),	typically by	' giving
		the supported organization	on(s) the power to re	gularly a	ppoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting
		organization. You must o	complete Part IV, Se	ections A	A and B.					
b		Type II. A supporting org	anization supervised	l or contr	rolled in connec	tion with it	ts support	ed organizatio	on(s), by ha	iving
		control or management of	of the supporting org	anization	vested in the s	same perso	ons that co	ontrol or mana	age the sup	ported
		organization(s). You mus	t complete Part IV,	Section	s A and C.					
с		Type III functionally inte	grated. A supportin	g organiz	zation operated	in connec	tion with,	and functiona	ally integrate	ed with,
		its supported organizatio	n(s) (see instructions	s). You m	nust complete	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	y integrated. A supp	orting or	ganization oper	rated in co	nnection v	with its suppo	orted organi	zation(s)
		that is not functionally int	tegrated. The organiz	zation ge	nerally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requirement (see instruct	ions). You must cor	nplete P	art IV, Section	s A and D,	and Part	V .		
е		Check this box if the orga	anization received a	written d	etermination fro	om the IRS	that it is a	а Туре I, Туре	e II, Type III	
		functionally integrated, o								
f	Ente	er the number of supported of	organizations							
g	Pro	vide the following information	n about the supporte	ed organi	ization(s).					
	(i) Name of supported	(ii) EIN	(iii) Type	e of organization ed on lines 1-10		inization listed ing document?	(v) Amount o		(vi) Amount of other
		organization			ee instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)

Schedule A (Form 990) 2024

CLOTHES TO KIDS OF DENVER, INC.

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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,116,264.	1,346,175.	1,545,718.	1,837,191.	2,384,712.	8,230,060.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,116,264.	1,346,175.	1,545,718.	1,837,191.	2,384,712.	8,230,060.
5		, ,	, ,	, ,	, ,	, ,	
-	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)						86,996.
6	Public support. Subtract line 5 from line 4.						8,143,064.
	ction B. Total Support						0,110,001.
	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 4	1,116,264.	1,346,175.	1,545,718.	1,837,191.	2,384,712.	8,230,060.
		1,110,201.	1,340,173.	1,343,710.	1,007,101.	2,304,712.	0,230,000.
0	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	925.	1,408.	1,845.	13,784.	23,587.	41,549.
•	and income from similar sources	545.	1,400.	1,045.	13,704.	23,307.	41,549.
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.)						
	Total support. Add lines 7 through 10						8,271,609.
	Gross receipts from related activities,	,	,			12	
13	First 5 years. If the Form 990 is for th	•	st, second, third, fo	ourth, or fifth tax y	ear as a section t	501(c)(3)	
_	organization, check this box and stop		•				L
-	ction C. Computation of Publ						00.45
	Public support percentage for 2024 (I					14	98.45 %
	Public support percentage from 2023					15	99.70 %
16a	33 1/3% support test - 2024. If the c						
	stop here. The organization qualifies						
k	33 1/3% support test - 2023. If the c						
	and stop here. The organization qual						
17 a	10% -facts-and-circumstances test	t - 2024. If the orga	anization did not ch	neck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop her	e. Explain in Part	VI how the organiza	ation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pul	olicly supported o	rganization		
k	0 10% -facts-and-circumstances test	t - 2023. If the orga	anization did not ch	neck a box on line	13, 16a, 16b, or	17a, and line 15 is ⁻	10% or
	more, and if the organization meets th	ne facts-and-circum	istances test, chec	k this box and sto	op here. Explain ii	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organ	ization	
18	Private foundation. If the organizatio						

Schedule A (Form 990) 2024

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	6	e) 2024	(f) Total
	Amounts from line 6	(u) 2020	(8) 2021		(4) 2020		57 2 52 1	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b							
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)	(3) organizat	ion,
	ale and the last and all all and an				·			
Sec	ction C. Computation of Publ							
15	Public support percentage for 2024 (I	ine 8. column (f).	divided by line 13.	column (f))		15		%
	Public support percentage from 2023					16		%
	ction D. Computation of Invest					1.01		,,
	Investment income percentage for 20		•			17		%
	Investment income percentage from 2					18		%
	33 1/3% support tests - 2024. If the						% and line .	
	more than 33 1/3%, check this box a							
h	33 1/3% support tests - 2023. If the						n 33 1/3%	and
Ň	line 18 is not more than 33 1/3%, che							
20								
20	Private foundation. If the organization	n did not check a		a, or 190, check t	INS NOT AND SEE IN	อแนติป		

Schedule A (Form 990) 2024 CLOTE Part IV Supporting Organizations

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

Section A. All Supporting Organizations

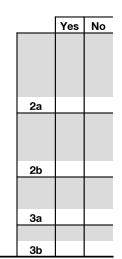
- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *If* "*No*," *describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship,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

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

Schedule A (Form 990) 2024 CLOTHES TO KIDS OF DENVER, INC.

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization</i> (s) <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i>			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			_
		_	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	supported organizations played in this regard.		I	
		c)		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions	5).		

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. Complete line 3 below.
- **c** The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*
- 2 Activities Test. Answer lines 2a and 2b below.
- 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.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.



432025 01-14-25

Schedule A (Form 990) 2024

LOTHES TO	KIDS	OF	DENVER,	INC.
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1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 1 Net short-term capital gain Recoveries of prior-year distributions 2 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or 6 collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** 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 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 4 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035. 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, column A) 1 1 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 4 Enter greater of line 2 or line 3. 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions). 6

7 \perp Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2024

C Schedule A (Form 990) 2024 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V

CLOTHES	то	KIDS	OF	DENVER,	INC.
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-	dule A (Form 990) 2024 CLOTHES TO KID			2	6-2148733 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ued)	
Sect	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2024 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	r	1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2024	ns	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2024 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2024				
а	From 2019				
b	From 2020				
с	From 2021				
d	From 2022				
е	From 2023				
f	Total of lines 3a through 3e				
-	Applied to under distributions of prior years				
	Applied to 2024 distributable amount				
i	Carryover from 2019 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2024 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2024 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2025. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2020				
-	Excess from 2021				
-	Excess from 2022				
	Excess from 2023				
-	Excess from 2024				

Schedule A (Form 990) 2024

Schedule A	. (Form 990) 2024	CLOTHES	TO KIDS	OF DENVER	R, INC.	26-2148733 Page 8
Part VI	Part IV, Section A, lin line 1; Part IV, Sectio	es 1, 2, 3b, 3c, 4b, n D, lines 2 and 3; F	4c, 5a, 6, 9a, 9t Part IV, Section I	o, 9c, 11a, 11b, and E, lines 1c, 2a, 2b,	d 11c; Part IV, Section 3a and 3b; Part V, line	ne 17a or 17b; Part III, line 12; B, lines 1 and 2; Part IV, Section C, 1; Part V, Section B, line 1e; Part V, ny additional information.

Sched	ule B
(Form	990)

(Rev. December 2024) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Emplo	ver id	entific	ation	number
Linbio	yci iu	CITCINC	auon	number

CI	LOTHES '	то	KIDS	OF	DENVER,	INC.	26-2148733
Organization type (check one):							
Filers of:	Section:						

Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set is the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set is the set in the set

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (Rev. 12-2024) Name of organization

Part I

CLOTHES TO KIDS OF DENVER, INC.

(a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 150,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 61,150. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 3 X Person Payroll 50,101. Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (a) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Page 2

26-2148733

Schedule B (Form 990) (Rev. 12-2024)

Nomo	of	organization
INALLIE	UI.	organization

Employer identification number

26 - 2148733

CLOTHES TO KIDS OF DENVER, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	ii if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990) (Rev. 12-2024)

Schedule	B (Form 990) (Rev. 12-2024)			Page 4
Name of o	organization		E	mployer identification number
CLOTH	ES TO KIDS OF DENVER, IN	IC.		26-2148733
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) th	ns to organizations described in se	ection 501(c)(7), (8), or (10) tha	t total more than \$1,000 for the year
	completing Part III, enter the total of exclusively religious, cha Use duplicate copies of Part III if additional sp	aritable, etc., contributions of \$1,000 or I	ess for the year. (Enter this info. onc	e.) \$
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held
			[
		(e) Transfer of gif	I	
	Transferee's name, address, and	d ZI P + 4	Relationship of trans	feror to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held
Part I				
	I	(e) Transfer of gift	I	
		() 0		
	Transferee's name, address, and	d ZIP + 4	Relationship of trans	feror to transferee
		[
(a) No.				
`fŕom Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held
		(e) Transfer of gif	:	
	Transferee's name, address, and	1 ZIP + 4	Relationship of trans	feror to transferee
			p • • • • • •	
		[
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Dosoriu	otion of how gift is held
Part I				
		(a) Transfer of sif		
		(e) Transfer of gif		
	Transferee's name, address, and	d ZIP + 4	Relationship of trans	feror to transferee
		[

(Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name	of the	organization
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CLOTHES TO KIDS OF DENVER, INC. Employer identification number 26-2148733

Pa	rt I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		unds or Accounts.Complete if the			
		(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 v	writing that the assets held in donor	advised funds			
•	are the organization's property, subject to the organization's	-		No		
6	Did the organization inform all grantees, donors, and donor a					
•	for charitable purposes and not for the benefit of the donor o					
		a denor datteor, or for any other pa		No		
Pa		anization answered "Yes" on Form	990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization		, ,			
-	Preservation of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	ion of a historically important land area			
	Protection of natural habitat		ion of a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the	e form of a conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Y			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements					
с	Number of conservation easements on a certified historic stru					
d	Number of conservation easements included on line 2c acqu					
	on a historic structure listed in the National Register	-	2d			
3	Number of conservation easements modified, transferred, rel					
	year					
4	Number of states where property subject to conservation eas	sement is located				
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handli	ng of			
	violations, and enforcement of the conservation easements it	t holds?	Yes 🗌 I	No		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcin	g conservation easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing cor	nservation easements during the year			
8	Does each conservation easement reported on line 2d above					
	and section 170(h)(4)(B)(ii)?		Yes	No		
9	In Part XIII, describe how the organization reports conservation		-			
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial s	tatements that describes the			
	organization's accounting for conservation easements.					
Pa	rt III Organizations Maintaining Collections of		or Other Similar Assets.			
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 95					
	of art, historical treasures, or other similar assets held for pub					
_	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of					
	art, historical treasures, or other similar assets held for public	exhibition, education, or research i	in furtherance of public service,			
	provide the following amounts relating to these items.		^			
	(i) Revenue included on Form 990, Part VIII, line 1					
~						
2	If the organization received or held works of art, historical treation of the following the followin		nancial gain, provide			
	the following amounts required to be reported under FASB A	-	•			
a L						
	Assets included in Form 990, Part X					
⊢or F	Paperwork Reduction Act Notice, see the Instructions for F	orm 990.	Schedule D (Form 990) (Rev. 12-20	24)		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets a Using the organization accussion, and other records, check any of the following that make significant use of its a Public exhibition b Scholarly research c Description of turue generations c Provide accimption of the organization solections and explain how they further the organization's exempt purpose in Part XIII. 5 Using the organization accussion, and CutsOdial Arrangements Complete if the organization accelection? c Description of the organization accelection? response that make any anagent, trustee, cutsofain, or other intermedary for contributions or other assets not included on form 900, Part X, line 21. Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Armount Id Actionacting they are Id Id Im Te Im Te Im Te Te No If 'Yes," explain the arrangement in Part XIII and complete the rolewand table. Im Im<	Sche	dule D (Form 990) (Rev. 12-2024) CLOTHE							26-21			age 2
a Club collection atems (check all that apply). a Club collection tames (check all that apply). b Schdarly research b Club collections c Provide acciption of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 Uning the year, did the organization solucit or receive donations of art, historical treasures, or other similar assets ves No 7 Provide acciption of the organization collection? ves No 9 Line organization acciption of the organization collection? ves No 9 Line organization angent, fusite, custodian, or other intermediary for contributions or other assets not included on form 900, Part X, line 21, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Ves No b Both organization include an amount on Form 900, Part X, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII Check here If the explanation has been provided in Part XIII Provide the estimated parcentage of the current year end balance (line 10, column (al) held as: Amount Provide the estimated parcentage of the current year end balance (line 10, column (al) held as: a Boginning of year balance (a) Current year (b) Prior year 1 Ima Ima Ima Ima	Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, o	r Other	r Simila	ir Asse	ts (contii	nued)	
a Public exhibition d Can or exchange program b Schalary research e Other	3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following that	t make sig	gnificant ı	use of its			
b Scholary research e Other		collection items (check all that apply).										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered 'Yes' or Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization angent, trustee, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X? 1a Is the organization angent, trustee, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: C Beginning balance C Beginning for year balance C Beginning of year balance C Beginning balance C Beginning of year balance C Beginning of year balance C Beginning balance C Begi	а	Public exhibition	c	ı 🛄	Loan or exc	hange progra	m					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be add to raise funds rather than to be maintained as part of the organization answered "Ves" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X2, Beginning balance Celleginning balance Reginning balance Reginning balance Reginning balance Reginning balance Reginning balance Reginning of year balance	b	Scholarly research	e		Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets is to be cold to raise funds rather than to be maintained as part of the organization's collection? 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 980, Part X, line 21. 1a Is the organization an agent. It nustee, custodian, or other intermediary for contributions or other assets not included on Form 980, Part X Ves No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount Amount c Beginning balance 1d 1d 1d 2a Other songanzation include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,' explain the arrangement in Part XII. Check here if the explanation has been provided in Part XII. Pert V Fordowent TundBS Complete If the organization askeed 'Yes' on Form 900, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,' explain the arrangement in Part XII. Check here if the explanation has been provided in Part XII. Pert V Information adveced 'Yes' on Form 900, Part X, line 21, for escrow or custodial account liability? Yes No fa Beginning of year balance (a) Current year (b) Prior year (c) Two years back (c) There years back (c) Four years back (c) Four years back (c) Four years back (c) Four year b	С	Preservation for future generations										
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Part W 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. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X // line 21. Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21. No b If Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete intermediate intermedintermediate intermediate	5									-		-
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1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X7 Yes No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount 1 c Beginning balance 1 4 d Additions during the year 1 1 e Distributions during the year 1 1 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,'' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII. Pert V Endowment FundS Complete if the organization answered 'Yes' or Form 990, Part IV, line 10. Ta Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (a) Fure years back 1a Beginning of year balance (b) Prior year (c) Two years back (d) (d) Fure years back (e) Four years back 1a Beginning of year balance (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (b) Prior year (e) Two years back (d) Three yea	Par			te if the	organizatior	n answered "Y	es" on F	orm 990,	Part IV, li	ne 9, or		
on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1d d Additions during the year 1d e Distributions during the year 1d 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part X, line 10. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part X, line 10. Image: Part XIII. Image: Part XIII. a Beginning of year balance (e) Ourrent year (b) Prior year (d) Three years back (e) Four years back if (e) Four years ba		•										
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c Beginning balance Id d Additions during the year Id e Distributions during the year Id 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation answered "Yes" on Form 990, Part X, line 10. Image: State St		on Form 990, Part X?							∟	Yes		No
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(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance]
1a Beginning of year balance Image: Contributions Image: Contributions b Contributions Image: Contributions Image: Contributions c Net investment earnings, gains, and losses Image: Contributions Image: Contributions c Net investment earnings, gains, and losses Image: Contributions Image: Contributions d Grants or scholarships Image: Contributions Image: Contributions Image: Contributions d Grants or scholarships Image: Contributions Image: Contributions Image: Contributions d Administrative expenses Image: Contributions Image: Contributions Image: Contributions g End of year balance Image: Contributions Image: Contributions Image: Contributions g End of year balance Image: Contributions Image: Contributions Image: Contributions g End of year balance Image: Contributions Image: Contributions Image: Contributions g End of year balance Image: Contributions Image: Contributions Image: Contributions Image: Contributions g End of year balance Image: Contributions Image: Co	Fai								are back		voare	hack
b Contributions	4.	Device in a factor balance	(a) Current year	(0) -	nor year			J Thee ye	ais Dack	(e) 1 001	years	Jack
c Net investment earnings, gains, and losses	18											
d Grants or scholarships	D											
e Other expenditures for facilities and programs	C											
and programs												
f Administrative expenses	е	-										
g End of year balance												
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% b Permanent endowment% c Term endowment% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (ii) Related organizations? (ii) Related organizations, and Equipment 3a(i)												
a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:					a oolump (
b Permanent endowment % c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (ii) Inelated organizations? (ii) Belated organizations? (iii) Related organizations (isted as required on Schedule R? (iii) Cost or other (c) Accumulated (d) Book value dopreciation depreciation (iii) Description of property (iii) Cost or other (c) Accumulated (d) Book value dopreciation (iii) Buildings (iii) Land (ii) Buildings (ii) Accumulated (f) Accumulated (f) Book value dopreciation (ii) Buildings 					g, column (a	a)) neiù as.						
c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (ii) Related organizations? (iii) Related organizations? (iii) Related organizations are the related organizations listed as required on Schedule R? (iii) A Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other basis (other) (b) Cost or other depreciation (c) Accumulated depreciation (d) Book value basis (investment) basis (other) (c) Accumulated depreciation (d) Book value depreciation (d) Book value depreciation 1a Land (a) Cost or other basis (other) (b) Buildings (c) Leasehold improvements (c) 255, 729 · 21, 836 · 33, 893 · 4 (c) 233 · 46 · 512 · 23 · 781 · 46 · 512 · 23 · 781 · 46 · 512 · 23 · 781 · 40 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500 · 500	a h	· · · ·		70								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (ii) Related organizations? (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (ii) Buildings (c) Leasehold improvements (c) Leasehold improvements (c) Leasehold improvements (c	U C											
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations? 3a(i) 1 3a(i) 1 <td>C</td> <td></td>	C											
organization by: Yes No (i) Unrelated organizations? 3a(i) 3b 3c 3b 3c 3b 3c 3b 3c 3b 3c 3b 3c 3c <td< th=""><th>30</th><th></th><th></th><th>ation the</th><th>at are held a</th><th>nd administer</th><th>red for the</th><th>_</th><th></th><th></th><th></th><th></th></td<>	30			ation the	at are held a	nd administer	red for the	_				
(i) Unrelated organizations? 3a(i) (ii) Related organizations? 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 55,729. 21,836. 33,893. c Leasehold improvements 55,729. 21,836. 33,893. d Equipment 70,293. 46,512. 23,781.	Ja		ssion of the organiz	ation the	at are neid a			5		1	Yes	No
(ii) Related organizations? 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation b Buildings		с ,								3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1a Land 1a b Buildings 55,729. 21,836. 33,893. d Equipment 70,293. 46,512. 23,781. e Other 1a 1a </th <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>a (11)</td> <td></td> <td></td>										a (11)		
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings (d) Book value c Leasehold improvements 55,729. d Equipment 70,293. e Other 0	h											
Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	4									05		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	Par		<u> </u>	Switterit								
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land				0, Part IV	/, line 11a. S	See Form 990	, Part X, li	ne 10.				
b Buildings			(a) Cost or c	other	(b) Cost	or other	(c) Acc	cumulate	b	(d) Boo	k value	3
b Buildings	1a	Land										
c Leasehold improvements 55,729. 21,836. 33,893. d Equipment 70,293. 46,512. 23,781. e Other												
d Equipment 70,293. 46,512. 23,781. e Other					5	5,729.		21,83	36.	3	3,8	93.
e Other												
				X, line 1	0c, column	(<i>B</i>))				5	7,6	74.

Schedule D (Form 990) (Rev. 12-2024)

Complete if the organization	answered "Yes" or	1 Form 990. F	Part IV, line 11b.	See Form 990.	Part X, line 1

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.							
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value					
(1) Financial derivatives							
(2) Closely held equity interests							
(3) Other							
(A)							
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)							
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))							

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX **Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X | Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	LEASE COMMITMENTS - SHORT TERM	32,435.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	32,435.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) (Rev. 12-2024)

Sche	dule D (Form 990) (Rev. 12-2024) CLOTHES TO KIDS OF DENVI				2148733	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ments With	Revenue per R	eturr	า	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	12a.				
1	Total revenue, gains, and other support per audited financial statements			1	2,475,	334.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b	42,820.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d	76,743.			
е	Add lines 2a through 2d			2e		563.
3	Subtract line 2e from line 1			3	2,355,	.771 .
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				-
С	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,355,	,771.
Pa	rt XII Reconciliation of Expenses per Audited Financial State		n Expenses per	Retu	Irn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1					100
1	Total expenses and losses per audited financial statements			1	2,269,	130.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		40.000			
а	Donated services and use of facilities		42,820.			
b	Prior year adjustments			-		
С	Other losses			-		
d	, , , , , , , , , , , , , , , , , , , ,	2d	76,744.		110	564
е	Add lines 2a through 2d			2e		564.
3	Subtract line 2e from line 1			3	2,149,	566.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1				
а				-		
b	Other (Describe in Part XIII.)	4b				0
	Add lines 4a and 4b			4c	2 1 / 0	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).			5	2,149,	.000.
	rt XIII Supplemental Information					
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F			4; Part	X, line 2; Part X	KI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	additional inform	nation.			
D Δ Ι	RT XI, LINE 2D - OTHER ADJUSTMENTS:					
	ENT EXPENSES				76	743.
1 ۷ ن					10,	/4).

PART XII, LINE 2D - OTHER ADJUSTMENTS:	
EVENT EXPENSES	76,743.
ROUNDING	1.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	76,744.

432054 01-02-25

SCHEDULE G (Form 990)	v ities or if the	OMB No. 1545-0047								
(Rev. December 2024) Department of the Treasury	organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. Open to Public									
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.									
Name of the organizatio		TO KIDS OF DENVER	λ, I	NC.			Employer i 26–214	dentification number 18733		
	Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.									
 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations g Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. 										
(i) Name and addres or entity (fund		(ii) Activity	have c	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (or fi	Amount paid r retained b undraiser ed in col. (i)	y) to (or retained by)		
			Yes	No						
Total										
3 List all states in wh or licensing.	ich the organizatic	on is registered or licensed to solicit	contrit	outions	s or has been notified	d it is e	exempt fror	n registration		

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

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990, FZ lines 1 and 6b. List events with gross receipts greater than \$5.00

		of fundraising event contributions and gr)-EZ, lines 1 and 6b. List e		pts greater than \$5,000.
			(a) Event #1 BLUE JEAN BASH	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
ē			(event type)	(event type)	(total number)	– col. (c))
Revenue	1	Gross receipts	320,083.	40,025.		360,108.
	2	Less: Contributions	253,048.	40,025.		293,073.
	3	Gross income (line 1 minus line 2)	67,035.			67,035.
	4	Cash prizes				
S	5	Noncash prizes				
pense	6	Rent/facility costs	21,800.	2,028.		23,828.
Direct Expenses	7	Food and beverages	36,670.	5,580.		42,250.
ā		Entertainment		050		1,000. 9,211.
		Other direct expenses	e · · · · · · · · · · · · · · · · · · ·			76,289.
		Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from I				
Pa	art I	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				

	5 Other direct expenses					
	6 Volunteer labor	Yes%	Yes%	└── Yes% └── No		
	7 Direct expense summary. Add lines 2 throug	h 5 in column (d)				
	8 Net gaming income summary. Subtract line 7	' from line 1, column (d)				
9	Enter the state(s) in which the organization cond	ucts gaming activities:				
а	Is the organization licensed to conduct gaming a	ctivities in each of these	states?		. 🗌 Yes 🛄 N	ю

b If "No," explain:

 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?
 Image: Second Seco

432082 01-14-25

Sch	edule G (Form 990) (Rev. 12-2024) CLOTHES TO KIDS OF DENVER, INC. 26-2	148	733	Page 3
11	Does the organization conduct gaming activities with nonmembers?	,	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	 ,	Yes	No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility	13b		<u>%</u>
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			/0
14				
	Name			
	Address			
	Address			
1 5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
r	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
~	of gaming revenue retained by the third party \$			
	s If "Yes," enter the name and address of the third party:			
Ľ	, in res, enter the name and address of the third party.			
	Nama			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	<u> </u>	Yes	l No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III, lin	ies 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G (Form 990)

Concure a		
Part IV	V Supplemental Information (continued)	

SCHEDULE I (Form 990) (Rev. December 2024)		Gov	irants and Oth vernments, an ete if the organizatio	nd Individua	ls in the Ŭn	ited States		OMB No. 1545-0047			
Department of the Treasury Internal Revenue Service Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.											
Name of the organization Employer identif CLOTHES TO KIDS OF DENVER, INC. 26 -											
Part I General Ir	nformation on Grants a	Ind Assistance									
	zation maintain records award the grants or assis							tion			
	IV the organization's pro										
Part II Grants an	d Other Assistance to hat received more than	Domestic Organia	zations and Domesti	c Governments.	Complete if the org	anization answered "Y	/es" on Form 990, Par	t IV, line 21, for any			
• •	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (Rev. 12-2024) CLOTHES TO KIDS OF DENVER, INC.

26-2148733 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CLOTHING FOR SCHOOL-AGE KIDS	13950	0.	1,368,488.	THIFT SHOP VALUE	CLOTHING
Part IV Supplemental Information. Provide the information rec	uired in Part I, lir	ne 2; Part III, column	n (b); and any other a	dditional information.	•

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

24

6

2

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

Department of the Treasury Internal Revenue Service

Complete in the organizations answered	
Attach to F	Form 990.
Go to www.irs.gov/Form990 for instr	ructions and the latest information.

Open to Public . Inspection

Name of	f the	organization
---------	-------	--------------

						Employer	identification number
CLOTHES	то	KIDS	OF	DENVER,	INC.	2	6-2148733
ronerty							

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		•	\$
		applicable		Form 990, Part VIII, line 1g	noneasir contribe	nion a	nount	
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	Х		1,325,668.	THRIFT SHOP	VA	LUE	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other (
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for o	contributions				
	for which the organization completed Form 828							
							Yes	No
30a	During the year, did the organization receive by	/ contributio	on any property re	ported on Part I, lines 1 throu	ugh 28, that it			
	must hold for at least 3 years from the date of t	the initial co	ntribution, and wh	nich isn't required to be used	for			
	exempt purposes for the entire holding period?	>				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review	of any nonstandard contribu	itions?	31		Х
32a	Does the organization hire or use third parties of							
			-	,		32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.	. ,						
For F	Paperwork Reduction Act Notice, see the Inst	ructions fo	r Form 990.		Schedule M	1 (Forr	n 990)	2024

Schedule M (Form 990) 2024

26-2148733 Page 2

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

(Form 990)	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on		OMB No. 1545-0047					
(Rev. December 2024) Department of the Treasury	Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-FZ.	90 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.						
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection					
Name of the organization	CLOTHES TO KIDS OF DENVER, INC.		identification numbe					
FORM 990, PA	· · · · · · · · · · · · · · · · · · ·	SION:	140733					
STUDENTS FRO		VER ME	TRO					
AREA, FREE O			-					
FORM 990, PA	RT III, LINE 4A, PROGRAM SERVICE ACCOMPLISHME	NTG.						
	N KINSHIP OR FOSTER CARE, AND/OR	M10.						
	ECEIVING SERVICES FROM A SCHOOL, AGENCY, SHEL	TER. H	OSPITAL,					
	ACE OF WORSHIP.	<u></u>	001111111					
IN THE 11-CO	JNTY DENVER METRO AREA, MORE THAN 207,000 STU	DENTS	QUALIFY					
	· · · · ·		NFIDENT					
IN THE CLASS			UDIES					
	•		CHILDREN					
	•	АСН ҮЕ						
FORM 990, PA	RT VI, SECTION B, LINE 11B:							
		FORM 9	90 AND WORK					
TO ADDRESS A								
THE FINANCE	COMMITTEE IS AUTHORIZED BY THE BOARD TO APPRO	<u></u>	FORM 990					
		COPY.	10111 990					
FORM 990, PA								
OR POTENTIAL	TION REQUIRES WRITTEN DISCLOSURE OF ANY CONFL CONFLICTS OF INTEREST.	ICTS O	F INTEREST					
OK FOIENIIAL	CONFLICTS OF INTEREST.							
FORM 990, PA	RT VI, SECTION B, LINE 15:							
COMPARABILIT	Y DATA IS USED TO SET THE EXECUTIVE DIRECTOR'	S SALA	RY. THE					
BOARD OF DIR	ECTORS REVIEWS THE DATA AND APPROVES THE COMP	ENSATI	ON BUDGET.					
COMPARABILIT	Y DATA IS USED TO SET STAFF SALARIES. THE BOA	RD OF	DIRECTORS					
	PPROVE THE COMPENSATION BUDGET.							
FORM 990 PA	RT VI, SECTION C, LINE 19:							
	TIONS GOVERNING DOCUMENTS AND POLICIES ARE MA	DE AVA	TLABLE UPON					
WRITTEN REQU								
	RT XII, LINE 2C DF THE OVERSIGHT OF THE AUDIT OF ITS FINANCIA	T. STAT	EMENTS					
	N OF AN INDEPENDENT ACCOUTANT HAS NOT CHANGED							
YEARS.		1 1.011						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 432211 01-15-25