Form **990**

Return of Organization Exempt From Income Tax

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

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.

2023 Open to Public

Department of the Treasury Internal Revenue Service

A	For th	e 2023 calendar year, or tax year beginning and ending		Inspection
	Check it	C Name of organization	D Employer identif	ication number
_	epplicat	106.	- Lingitoyor raonan	ioution manager
Ļ	Addr	SPECIAL SPACES, INC.		
F	Nam- chan- Initia		42-16415	74
F	return	Number and street (or P.D. box if mail is not delivered to street address) Room/sui		
L		448 N. CEDAR BLUFF ROAD 350	865-249-	
г	Amer	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	2,609,696.
F	return Appli tion	KNOXVILLE, IN 37923	H(a) Is this a group r	eturn
L	Ition pend	- 1		s? Yes X No
-	Tayay	448 N. CEDAR BLUFF ROAD #350, KNOXVILLE, TN (sempt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 501(c)	H(b) Are all subordinates i	ncluded? Yes No
÷	Websi	te: WWW.SPECIALSPACES.ORG (insert no.) 4947(a)(1) or 5	27 If "No," attach a	list. See instructions
-	Miles	forceminations V Company	H(c) Group exemption	on number
P	art I	forganization: X Corporation Trust Association Other L Ye.	ar of formation: 2004	M State of legal domicile; TN
di	1			
Activities & Governance		Briefly describe the organization's mission or most significant activities: TO PROVID CHILDREN WITH CANCER.	E DREAM BEDR	OOMS FOR
rns	2			
ove	3		ore than 25% of its net as	ssets.
ত	4	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals and individuals are lined in the control of the governing body (Part VI, line 1b)		6
50	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	4	6
viti	6	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Bort VIII and the COV line 40	5	3
10ti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	6	1014
- 100	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
			Prior Year	0 . Current Year
9	8	Contributions and grants (Part VIII, line 1h)	1,078,430.	1,174,919.
Revenue	9	Program service revenue (Part VIII, line 2g)	0.	0.
Rei	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	16.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	779,683.	976,266.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) line 12)	1,858,129.	2,151,185.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	886,996.	1,007,832.
	150	benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 179,637.	315,005.	550,205.
ben	ioa	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ŭ	17	Other superson (P. + 1) Other		
	18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	456,632.	360,684.
	19	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,658,633.	1,918,721.
PS OF		Revenue less expenses. Subtract line 18 from line 12	199,496.	232,464.
ssets or Balances	20	Total assets (Part X, line 16)	leginning of Current Year	End of Year
t As	21	Total liabilities (De + V F - 00)	1,783,157.	1,910,407.
원	22	Net assets or fund balances. Subtract line 21 from line 20	1,544,790.	133,153.
	art II	Signature Block		1,777,254.
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules and state	ments and to the hest of my	knowledge and hellef it is
true.	COLLEC	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowledge	Knowledge and Deller, it is
		(Aristopher) wain Signature of officer	10/2	0/20011
Sig			Date /	9007
Her	е	CHRIS SWAIN, EXECUTIVE DIRECTOR Type or print name and title	38	
VXVIII -	-			
Paid	ľ	Print/Type preparer's name BRANDON T. BARRY, CPA Preparer's signature CPA	06/24/24 Gheck If	PTIN
	ares	Firm's name PUGH & COMPANY, P.C.	sell-employa	
	Only	Circle add 2 2 1 E NT CITIES TO THE STATE OF	Firm's EIN 6	2-1142155
	9/5	KNOXVILLE, TN 37923	2	
May	the IF	S discuss this return with the preparer shown above? See instructions	Phone no. (8)	65)769-0660
LHA	For	Paperwork Reduction Act Notice and the second second		X Yes No
		332001 12-21-23		Form 990 (2023)

25440001

Form 990 (2023) SPECIAL SPACES, INC.
Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
	If "Yes," complete Schedule A	1	x	
2	of the structions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organizations.		7.50	
4	to the distriction of the broadle in innoving activities or have a cootion for the distriction in			X
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		X
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
	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		x
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		STITUTE STITUTE	
8	bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes " complete	7		X
9	Schedule D, Part III Did the organization report an amount in Bort X line 21, for any line	8		X
38	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 Did the organization, directly or through a related experience held seven in the			V
10	and a series of the court of th	9		X
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		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	11a	A	7,
C	bid the diganization report an amount for investments - program related in Part X line 13, that is 5% or more of its total	11b		X
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	11c		Х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	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			х
12a	Did the organization obtain separate, independent audited financial statements for the tay year? If "Yes " complete	11f		
ь	Schedule D, Parts XI and XII Was the organization included in consolidated independent audited fine collision.	12a	X	
776	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			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
b	bit the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business	14a	_	X
	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			v
15	and a significant report on Fart IA, Column (A), line 3, more than \$5 million of grants or other positions as to a start of the significant of the	14b		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate greats as at her assistance.	15		X
00000	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	column (A) lines 6 and 41-0 (#1/ca if more than \$15,000 or expenses for professional fundraising services on Part IX,			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions and provide the second s	17		X
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	X	
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "You " complete Schedule II.	19		X
b		20a		X
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			v
332003	12-21-23	21 Form	990	X
	4	rom	330 (2023)

Form 990 (2023) SPECIAL SPACES, INC. Part IV Checklist of Required Schedules (continued)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
10000	Falt IX, Column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	old the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization is suggested to the organization of the organization is suggested to the organization of the organization organization of the organization of the organization of the organi		22	-
	and former officers, directors, trustees, key employees, and highest compensated employees. If "Vee " nemarks to			
24 a	Schedule J	23		X
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		E ANADES	
	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a town received.			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
c	and the organization maintain an escrow account other than a refunding escrow at any time during the	24b		
	any tax-exempt bonds?	240		
O.F.	or benall of issuer for bonds outstanding at any time during the year?	24d		_
25 a	. Security 50 1(C)(4), and 501(C)(29) organizations. Did the organization engage in an event benefit			-
	transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25a		X
~	to digurization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year and			300
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		X
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	Controlled entity or family member of any of those persons? If "Ves." seem lets 0.4.4.4.5.4.4.			77
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		X
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I. Part III	27		X
28	was the organization a party to a business transaction with one of the following parties? (See the Schedule I. Part IV		William	
-	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
b	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28-2 if "Vos." complete Schedule L, Part IV	28a		X
c	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If	28b		X
	"Yes," complete Schedule L, Part IV			**
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	28c	X	X
30	of the organization receive contributions of art, historical treasures, or other similar assets, or qualified assets.	29	Α_	
	contributions? If "Yes," complete Schedule M	30		X
31 32	and the state of t	31		X
32	but the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	00		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II. III. or IV. and	33		Λ
05	Part V, line 1	34		X
ooa h	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receives an entity of the organization receives a section 512(b)(13)?	35a		X
J	to the order of the order in the order in the order in the order of th			
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organizations and a section 501(c)(3) organizations.	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2			2000
37	Did the organization conduct more than 5% of its activities through an entity that is not a related a varieties	36		X
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI			v
38	and provide explanations on Schedule O for Port VI. lines 11h and 100	37	-	<u>X</u>
-	Note: All Form 990 filers are required to complete Schedule O	38	x	
Par	The state of the s		(0.7)	
	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in box 3 of Form 1000 February 2		Yes	No
b				
c	the organization comply with backup withholding rules for reportable payments to vendors and reportable gaments.			
	garibility) winnings to prize winners?	1c	x	
332004	12-21-23	Form 9		00201
	5	· OIIII	12	1023)

Form 990 (2023) SPECIAL SPACES, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Yes	No
	Illed for the calendar year onding with as within the	IN		
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	3	1100	
3a	and dispersional lides unfelated business gross income of \$1,000 or more distinct.	2b	X	
b	If Yes," has it filed a Form 990-T for this year? If "No" to line 3h, provide an exploration on Cabanda Co.	3a	- 8	X
4a	At any time during the calendar year, did the organization have an interest in or a signature or other authority area.	3b		
	interictal account in a foreign country (such as a bank account, securities account, or other financial account)	1		77
b	If "Yes," enter the name of the foreign country	4a		X
	See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FRAR)			
5a	was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			v
b	and taxable party notify the organization that it was or is a party to a prohibited tay shotter transaction	5a		X
C	1 100 to line of 5b, did the organization file Form 8886-T?	5b		X
6a	garaged and did the second street are normally dreater than \$100,000, and did the second street in the second stre	5c	_	
	any contributions that were not tax deductible as charitable contributions?			*V*
b	and the organization include with every solicitation an express statement that such contributions or sitte	6a		X
	were not tax deductible? Organizations that may receive deductible contributions and a series of the series deductible contributions and a series of the series deductible contributions and the series of the seri			
7	and the control of th	6b	rear .	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the appearance.		х	OH TO
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b	Δ	-
	to file Form 8282?			Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c	V 18.	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7-	State of	Y
f	bid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		X
g	the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	_	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h	-	****
	sponsoring organization have excess business holdings at any time during the year?		201031	
9	Sponsoring organizations maintaining donor advised funds.	8	5 7	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	THE SEC	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	obetion so itely of gardations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	8.0		
.,	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders Gross income from other sources (No not not not not not not not not not no			
b	the first state sources. (but not net amounts due or paid to other sources against			
120	amounts due or received from them.)			
IZd h	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
u	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	The instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which the			
c	organization is licensed to issue qualified health plans			
14a	Enter the amount of reserves on hand Did the organization reserves and and 13c			
b	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes " has it filed a Form 700 to repeat the	14a		X
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
5(20)	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?			
	excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
	The state of the form 4720, Schedule IV.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17	Section 501(c)(21) organizations. Did the trust or any disquested and			
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4051, 4050 are 40500.			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		
	12-21-23			
		Form (300 "	20001

Form **990** (2023)

Form 990 (2023) SPECIAL SPACES, INC.

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.

<u>sec</u>	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			X
10	Entoy the analysis of the second seco		Yes	No
Id	Enter the number of voting members of the governing body at the end of the tax year	5	1.00	1
	in viola are material differences in voting rights among members of the governing hody, or if the governing	100		File
b	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
2	Enter the number of voting members included on line 1a, above, who are independent	5		
	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?			
3		2		X
	and a second delegate control over management duries customarily performed by an under the street			
4	of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant observed to the property of the propert	3		X
5	The state of the s	4		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stackly allows:	5		X
	and an additional make thembers of stockholders?	6		X
	and the property of the persons are the property of the property of the property of the persons are			A Wallette
b	more members of the governing body? Are any governance decisions of the organization recoved to for orbital to see the control of the organization recoved to for orbital to see the control of the organization recoved to for orbital to see the control of the organization recoved to for orbital to see the control of the organization recoved to for orbital to see the control of the organization recoved to for orbital to see the control of the organization recoved to for orbital to see the control of the organization recovered to see the control of the organization recoved to for orbital to see the control of the organization recoved to see the control of the organization recovered to see the control of the control	7a		X
8	persons other than the governing body? Did the organization contemporaneously document the meetings hald or written actions undertaken during the design of	7b		X
а				
b	The governing body? Each committee with authority to got as bob of 44th	8a	X	
9	Each committee with authority to act on behalf of the governing body?	8b	X	John Away
0.75	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	150		
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
58.00	(mile decider b requests information about policies not required by the Internal Revenue Code.)			
10a	Did the organization have local chapters, branches, or offiliates?		Yes	No
b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a	X	
	and branches to ensure their operations are consistent with the organization's exempt purposes?		120	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Water St		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	X	
	on Schedule O how this was done Did the organization have a written whistleblower policy?			
13	Did the organization have a written whistleblower policy?	12c	X	
14	Did the organization have a written document retention and destruction policy?	13		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	14		X
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official		v	
b	and officer of help chiployees of the organization	15a	X	20
	and the process on scriedule O. See instructions	15b	Δ	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	40-		v
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		X
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
1200	exempt status with respect to such arrangements?	466	PLES S	
300	ion C. Disclosure	16b		100
17	List the states with which a copy of this Form 990 is required to be filed FL, IA, IL, MO, NE, NY, OH, TN, WI	TN	H-1007 F-007 F-107	
10	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990 T (section FOLL) (1024)	c ontro	oveile	hl-
	Tyles in spectrum. Indicate now you made these available. Check all that apply.	s Office	avalla	Die
	Own website X Another's website X Upon request X Other (explain on School up 0)			
19	pescribe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pality	d finan	cial	
	available to the public during the tax year.	a milali	icial	
	State the name, address, and telephone number of the person who possesses the organization's books and records CHRIS SWAIN - 865-249-6079			
	448 N. CEDAR BLUFF ROAD #350, KNOXVILLE, TN 37923	7.00 H		
-93 - 100	12-21-23			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

X Check this box if neither the organiz (A) Name and title	(B) Average hours per week	(do	not o	Pos	itior more		one	(D) Reportable compensation from	(E) Reportable compensation	(F) Estimated amount of
	(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)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) CHRISTOPHER SWAIN	40.00	10111800								
BOARD CHAIR/EXECUTIVE DIRE		X		X	LI LOOMIN			0.	0.	0
(2) CID RHOMBERG	5.00									U U
DIRECTOR		X		erce session				0.	0.	0
(3) MARY LINEHAN	5.00									- 0
TREASURER		X						0.	0.	0 .
(4) GRETA KASSAM	5.00		5							U .
DIRECTOR		X						0.	0.	0
(5) KRISTINA MELLIN DIRECTOR	5.00	X	//007==0					0.		
(6) JULIE TOLAN	5.00			-					0.	0.
DIRECTOR		X						0.	0.	0.

(A) Name and title	Average hours per week (list any) (c	do not o ox, unle	Pos check	c) sition more	n than is bot	one	ompensated Employe (D) Reportable compensation from the	(E) Reportabl compensat from relate	lon ed	Estin amo ot	F) nated unt of ner
	hours for related organization below line)	20 98	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	organizatio (W-2/1099-M 1099-NEC	ISC/	fron organ and r	nsation the ization elated zations
					•							
1b Subtotal								0.	N	0.		0
c Total from continuation sheets to Part d Total (add lines 1b and 1c) Total number of individuals (including bu compensation from the organization								0. 0. ceived more than \$100,	,000 of reportab	0. 0.		0
3 Did the organization list any former offic	er, director, trus	itee,	key e	mpk	oyee	e, or	hìgh	est compensated empl	loyee on		Ye	s No
line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a received.	150,000? If "Yes	s," cc	omple	te S	uon che	ana dule	J for	er compensation from t r such individual	he organization		3	X
rendered to the organization? If "Yes," co Section B. Independent Contractors	omplete Schedu	ile J	tion ti for su	om ch p	any Serse	unre on	lated	d organization or individ	dual for services		5	x
1 Complete this table for your five highest the organization. Report compensation f (A)	compensated in or the calendar	ndep year	endei endir	nt co ng w	ontra ith o	actor or wit	s tha	he organization's tax y	\$100,000 of conear.	npensa	tion from	
Name and busine	ss address	N	ONE			et o a see	-	(B) Description of se	ervices	Co	(C) mpensa	ion
		1980			-		-					T000 - 54.50
				_								
				3715				# O.				
2 Total number of independent contractors										Mescop.		

Very Harrison	-	Check if Schedule O contains a response	or note to any line				
				(A) Total revenue	Related or exempt	(C)	(D) Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns 1a					Sections 5 12 - 5 14
SP D	b	Membership dues 1b					
ifts, r Ai	C	Fundraising events 1c					
s, G	a	Related organizations 1d					
Sir	f	Government grants (contributions) All other contributions, gifts, grants, and					
but		similar amounts not included above 1f	1,174,919.				
d di	g	TO SECOND CONTRACTOR OF THE PROPERTY OF THE PR	170,178.				
a C	h	Total. Add lines 1a-1f		1,174,919.			
			Business Code				
ice	2 a						
erv	b				- William - Will		10000
Program Service Revenue	С						
gra	d						
Pro	e						
	1	F-3-11. Colling to to luc					
	3	Total. Add lines 2a-2f Investment income (including dividends, intere	at and				
		other similar amounts)	- 22				
	4	Income from investment of tax-exempt bond p	proceeds				***
	5	Royalties	-		27/4		
		(i) Real	(ii) Personal				
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	//3 O45				
	, a	assets other than inventory 7a	(ii) Other				
	b	Less: cost or other basis					
ine l		and sales expenses 7b					
Ver	c	Gain or (loss) 7c					
R	d	Net gain or (loss)		-			
Other Revenue	8 a	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
	h	Part IV, line 18 8a	1,394,857.				
		Less: direct expenses 8b Net income or (loss) from fundraising events	458,511.	026.016			
	9 a	Gross income from garning activities. See		936,346.			936,346.
		Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	C	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns			A Commence of the Commence of		
		and allowances 10a					
	ь	Less: cost of goods sold 10b					
-	C	Net income or (loss) from sales of inventory	AND THE RESERVE TO THE PARTY OF				
snc	11 a	MISCELLANEOUS REVENUE	Business Code				
I e	b	MIGGELBANEOUS REVENUE	900099	39,920.			39,920.
Revenue	c		-				
N N		All other revenue					
-	e	Total, Add lines 11a-11d		39,920.			
	12	Total revenue. See instructions		2,151,185.	0.		
	12-21-					0.	976, 266. Form 990 (2023)

Sec	tion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All other	er organizations must co	molete column (A)	
	Check if Schedule O contains a respon-	se or note to any line in	this Part IY	implete column (A).	
Do 7b,	8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		CAPELISES	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,007,832.	1,007,832.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		=,00,,002.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(1)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	484,142.	347,490.	07 704	10.07
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	101,112.	347,430.	87,784.	48,868
9	Other employee benefits	40,950.	21,593.	13,959.	F 300
10	Payroll taxes	25,113.	14,605.	6,857.	5,398 3,651
11	Fees for services (nonemployees):		==/,	0,037.	3,031
а	Management				
b	Legal	3,302.	143.	1,383.	1,776
C	Accounting	45,190.	1,955.	18,927.	24,308
d	Lobbying				24,300
е	Professional fundraising services. See Part IV, line 17				-
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,	67 500	2 (2.8)		
12	column (A), amount, list line 11g expenses on Sch 0.)	67,593.	2,924.	28,310.	36,359
13	Advertising and promotion Office expenses	26,139.	14 610		
4	Information technology	20,139.	14,619.	11,520.	
5	Royalties				
6	Occupancy	27,125.	20,229.	2 440	
7	Travel	15,259.	15,259.	3,448.	3,448
	Payments of travel or entertainment expenses for any federal, state, or local public officials	20,200.	13,433.		
9	Conferences, conventions, and meetings				
0	Interest				

Check here _____ if following SOP 98-2 (ASC 958-720) 332010 12-21-23

25

21

1,713.

4,056.

50,060.

179,637.

5,140.

12,169.

99,615.

50,060.

3,741.

3,245.

2,106.

1,918,721.

Payments to affiliates Depreciation, depletion, and amortization

Insurance

Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a VOLUNTEER HOSPITALITY

b FUNDRAISING EXPENSES -

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation,

c STATE REGISTRATIONS

d BANK FEES

e Ali other expenses

1,713.

4,056.

99,615.

3,245.

2,106. 1,557,384.

1,714.

4,057.

3,741.

181,700.

		Check if Schedule O contains a response or n			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			1,566,649.		
	2	oavings and temporary cash investments			=/500/045.	1	1,684,757
	3	r reages and grants receivable, net			1,000.	2	27 500
	4	Accounts receivable, net			142,518.	3	27,500 75,000
	5	Lours and other receivables from any current	or former offi	cer, director	112,510.	4	75,000
		trustee, key employee, creator or founder, sub-	stantial cont	ributor or 35%			
		controlled entity or family member of any of the	ese persons			E .	
	6	Loans and other receivables from other disqua	lified person	s (as defined		5	
		under section 4958(f)(1)), and persons describe	ed in section	4958(c)(3)(B)		6	
25	7	Notes and loans receivable, net			The state of the s	7	
122612	8	inventories for sale or use				8	
•	9	repaid expenses and deterred charges			63,060.	9	70,059
	10a	Land, buildings, and equipment: cost or other				3	70,039
		basis, Complete Part VI of Schedule D	10a	73,544.			
	b	Less: accumulated depreciation	10h	73,544.	9,930.	10c	53 001
	11	Investments - publicly traded securities				11	53,091
	12	investments - other securities. See Part IV, line	11			12	
	13	investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
100	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ	ial line 33)		1,783,157.	16	1,910,407
	17	Accounts payable and accrued expenses		21,053.	17	5,355	
	18	Grants payable	_		18	2,333	
	19	Deferred revenue	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_	212,250.	19	120,857
	20	rax-exempt bond liabilities				20	120,037
10	21	escrow or custodial account liability. Complete	Part IV of Sc	hedule D		21	W
	22	Loans and other payables to any current or form	ner officer, d	irector.		21	
		trustee, key employee, creator or founder, subs	tantial contr	ibutor, or 35%			
	No. alexander	controlled entity or family member of any of the	se persons		Manager Service of Production of Production	22	
	23	Secured mortgages and notes payable to unrela	ated third pa	rties		23	
	24	Unsecured notes and loans payable to unrelate	d third partie	es		24	
	25	Other liabilities (including federal income tax, pa	vables to rel	ated third			
-		parties, and other liabilities not included on lines	s 17-24). Cor	nplete Part X			
1		of Schedule D			5,064.	25	6,941
+	20	Total habilities. Add lines 17 through 25			238,367.	26	133,153
		Organizations that follow FASB ASC 958, che	ck here	X			199,199
		and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions			1,402,272.	27	1,702,254
		rver assers with donor restrictions			142,518.	28	1,702,254 75,000
		Organizations that do not follow FASB ASC 9	58, check h	ere L			
	200	and complete lines 29 through 33,					
	29	Capital stock or trust principal, or current funds				29	
	30	raid-in or capital surplus, or land, building, or ec	uipment fun	d		30	1000
	31	Retained earnings, endowment, accumulated in	come, or oth	er funds		31	
- 1	32	Total net assets or fund balances			1,544,790.	32	1,777,254
	33	Total liabilities and net assets/fund balances			1,783,157.	33	1,910,407

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

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

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

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

X

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number SPECIAL SPACES, INC. 42-1641574 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other organization (described on lines 1-10 n your governing document? support (see instructions) support (see instructions) Yes above (see instructions)) No

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 failed to qualify under Part III. If the organization

	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(a) 0004			
1	and the second s	(4) 2010	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")	964,369.	428,916.	1,003,669.	1 079 431	1 454 545	
2	Tax revenues levied for the organ-		/3201	2,005,005.	1,078,431	1,174,919.	4,650,304
	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	964,369.	428,916.	1,003,669.	1,078,431	1,174,919.	4,650,304
5	The portion of total contributions					-,-,-,-,-,-	4,030,304
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the					101000000000000000000000000000000000000	
	amount shown on line 11,						
9 <u>4</u> 0	column (f)						
6	Public support. Subtract line 5 from line 4.						4,650,304
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020 428, 916.	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	964,369.	428,916.	1,003,669.	1,078,431.	1,174,919.	4,650,304
8	Gross income from interest,					100000000000000000000000000000000000000	
	dividends, payments received on						
	securities loans, rents, royalties,						
9	and income from similar sources						
3	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.)	210.	46,451.	196.	20 022	20 000	
11	Total support. Add lines 7 through 10	210.	40,451.	190.	28,833.	39,920.	115,610.
	Gross receipts from related activities,	etc (see instruction	mal.				4,765,914
13	First 5 years. If the Form 990 is for th	e organization's fir	et second third to			12	
	organization, check this box and stop	here	st, second, triird, 10	urin, or fifth tax ye	ear as a section 5	501(c)(3)	
		- C			*****************		
	tion C. Computation of Publi	c Support Per	centace				
Sec 14	tion C. Computation of Publi Public support percentage for 2023 (li	ne 6. column (f) di	vided by line 11 co	dump (f))			07 57
Sec 14 15	tion C. Computation of Public Public support percentage for 2023 (I Public support percentage from 2022	ne 6, column (f), di Schedule A. Part I	vided by line 11, co	2008 2003 SEPTEM		14	00 00
Sec 14 15	tion C. Computation of Public Public support percentage for 2023 (I Public support percentage from 2022	ne 6, column (f), di Schedule A. Part I	vided by line 11, co	2008 2003 SEPTEM			00 00
Sec 14 15 16a	tion C. Computation of Public Public support percentage for 2023 (li Public support percentage from 2022 33 1/3% support test - 2023. If the ostop here. The organization qualifies a	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly suppo	vided by line 11, co I, line 14 check the box on I	ine 13, and line 14	is 33 1/3% or n	15 nore, check this bo	98.23 % x and
Sec 14 15 16a b	Public support percentage for 2023 (li Public support percentage from 2022 33 1/3% support test - 2023. If the o stop here. The organization qualifies a 33 1/3% support test - 2022. If the o	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly supportanization did not	vided by line 11, co I, line 14 check the box on I orted organization	ine 13, and line 14	is 33 1/3% or m	15 nore, check this bo	98.23 % x and
Sec 14 15 16a b	Public support percentage for 2023 (li Public support percentage from 2022 Public support percentage from 2022 33 1/3% support test - 2023. If the o stop here. The organization qualifies a 33 1/3% support test - 2022. If the o and stop here. The organization quali	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly suppor rganization did not fies as a publicly si	vided by line 11, co I, line 14 check the box on I orted organization check a box on line	ine 13, and line 14	l is 33 1/3% or m	or more, check this bo	98.23 % x and X
Sec 14 15 16a b	Public support percentage for 2023 (li Public support percentage from 2022 33 1/3% support test - 2023. If the o stop here. The organization qualifies a 33 1/3% support test - 2022. If the o and stop here. The organization quali 10% -facts-and-circumstances test	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly suppor rganization did not fies as a publicly su - 2023, If the orga	vided by line 11, co I, line 14 check the box on I orted organization check a box on line upported organization	ine 13, and line 14 13 or 16a, and line on	e is 33 1/3% or m	nore, check this bo	98.23 % x and X
Sec 14 15 16a b	Public support percentage for 2023 (li Public support percentage from 2022 33 1/3% support test - 2023. If the o stop here. The organization qualifies a 33 1/3% support test - 2022. If the o and stop here. The organization quali 10% -facts-and-circumstances test and if the organization meets the facts	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly suppor rganization did not fies as a publicly su - 2023. If the orga s-and-circumstance	vided by line 11, co I, line 14 check the box on I orted organization check a box on line upported organization ization did not che es test, check this b	ine 13, and line 14 13 or 16a, and line on ock a box on line 1	ne 15 is 33 1/3% or m	nore, check this bo	98.23 % x and X
Sec 14 15 16a b	Public support percentage for 2023 (li Public support percentage from 2022 33 1/3% support test - 2023. If the o stop here. The organization qualifies a 33 1/3% support test - 2022. If the o and stop here. The organization qualifies 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly suppor rganization did not fies as a publicly su - 2023. If the orga s-and-circumstance st. The organization	vided by line 11, co I, line 14 check the box on I orted organization check a box on line upported organization nization did not che be test, check this both	ine 13, and line 14 13 or 16a, and line on ock a box on line 1 ox and stop here.	is 33 1/3% or m ne 15 is 33 1/3% 3, 16a, or 16b, a Explain in Part V	or more, check this bo or more, check th	98.23 % x and X is box or more,
Sec 14 15 16a b	Public support percentage for 2023 (li Public support percentage from 2022 33 1/3% support test - 2023. If the o stop here. The organization qualifies a 33 1/3% support test - 2022. If the o and stop here. The organization qualified 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test 10% -facts-and-circumstances test	ne 6, column (f), di Schedule A, Part I rganization did not as a publicly suppor rganization did not fies as a publicly su - 2023. If the orga sand-circumstance st. The organization	vided by line 11, co I, line 14	ine 13, and line 14 13 or 16a, and line on ock a box on line 1 ox and stop here, licly supported org	a is 33 1/3% or more 15 is 33 1/3% 3, 16a, or 16b, a Explain in Part Viganization	or more, check this bo or more, check th	98.23 % x and X is box or more,
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Schedule A (Form 990) 2023 SPECIAL SPACES, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	/ N 0000	T	
1 Gifts, grants, contributions, and	1-7-2-10	(6) 2020	(C) 2021	(d) 2022	(e) 2023	(f) Total
membership fees received. (Do not			[]			
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf				2.00		
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		e miller vi annum me				
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)		Charles and the same				
Section B. Total Support		46.7				
occasi B. Total Support						
	(a) 2019	(b) 2020	(a) 2021	(4) 2000		
Palendar year (or fiscal year beginning in) 9 Amounts from line 6	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans rents royalties	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 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.)						
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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 oxygnization to account	United States	Yes I	No
(3)	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	bid the organization have any supported organization that does not have an IRS determination of status			
	organization was described in section 509(a)(1) or (2).			
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	2		M
b	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3a		
	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.	3b		
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.	3c		1
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	4a		
	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	4b		
	tinder 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)			
F0.00	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	10		
	(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	5a		
	designated in the organization's organizing document?			
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	5c		_
	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			
7	Part VI.	_ 6		
	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).	23.63		
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).	7		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	8		
	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	9a		
	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	9b		
	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	9c		
	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	10a	20 1000	_
	determine whether the organization had excess business holdings.)	106		
32024	12-21-23	100		

	supporting Organizations (continued)	80	-	
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	1
ć	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?	18.020		
t	A family member of a person described on line 11a above?	11a		L
C	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	11b		
	detail it Part VI,			
e	ction B. Type I Supporting Organizations	110	l	
	CHA		Yes	1
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 regulative project as a last their official capacity, or membership of one or		103	H
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	operated, Supervised, Of Controlled the organization's activities of the organization in			
	and what conditions or restrictions, if any, applied to such powers during the tay year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	1000		-
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in			
	Part VI now providing such benefit carried out the purposes of the supported organization(s) that operated		A	
_	supervised, or controlled the supporting organization	2	-	
20	tion C. Type II Supporting Organizations	1 -		<u></u>
1	Were a majority of the annual trade in		Yes	1
76	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			1
	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			
ec	tion D. All Type III Supporting Organizations	1		
	The in Supporting Organizations			
Ĺ	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	١
	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 known filed on of the Form 990 that was most known filed on of the Form 990 that was most known filed on the form 990 that was most known filed on the			
	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, and (iii) copies of the		(F. 22)	
2	organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, extractors with a continuous con	1		
	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 hadren to the supported organization or the governing hadren to the supported organization or the supported organization organi	SHOW		
	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 solution to the continuous working solution and the continuous solution and the continuous working solution and the continuous s			
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, the supported organization of the relationship with the support of the support of the relationship with the support of the support of the support of the support of th	2		
Ŧ83	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.			
ec	tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	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 in		1070	
	Activities Test. Answer lines 2a and 2b below.	struction 1	1	77,000
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		Yes	N
	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.		1958	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	2a		
	one or more of the organization's supported organization activities that, but for the organization's involvement,	- Y E 4		
	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	F 7 7 8	- 193	
	in organization s position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement	26		
	these activities but for the organization's involvement.	2b		-
	Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
a	Parent of Supported Organization's involvement. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
a	Parent of Supported Organization's involvement. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI	3a		
a	Parent of Supported Organization's involvement. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			

	art V Type III Non-Functionally Integrated 500(a)(2) Communication			42-1641574 Page
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov 20 1970 (overlain in	
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	Tart vij. See instructions
Sec	ction A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
_1	Net short-term capital gain	11		(Optional)
_2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)			
7	Other expenses (see instructions)	6		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	7		
		8		
	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
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		
	Discount claimed for blockage or other factors	10		
B	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	3		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	4 4		
6	Multiply line 5 by 0,035.	5		
7	Recoveries of prior-year distributions	6		
8	Minimum Asset Amount (add line 7 to line 6)	7		
	ion C - Distributable Amount	8		
1	Adjusted net income for prior year (from Section A, line 8, column A)			Current Year
2	Enter 0.85 of line 1.	1		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	2		
4	Enter greater of line 2 or line 3.	3		
5	Income tax imposed in prior year	4		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	5		
- 2000	emergency temporary reduction (see instructions).	6		Ways a State of the Control of the C
7	Check here if the current year is the organization's first as a non-functional instructions).	ly integrated	d Type III supporting orga	anization (see

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Part V Type III Non-Functionally Integrate ection D - Distributions			Current Year
Amounts paid to supported organizations to accomp	olish exempt purposes		Current Year
2 Amounts paid to perform activity that directly further organizations, in excess of income from activity	rs exempt purposes of supported		-
	2 S 3		
Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets			
Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)			
Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.	Total annual distributions. Add lines 1 through 6		
8 Distributions to attentive supported organizations to (provide details in Part VI). See instructions.	Distributions to attentive supported organizations to which the organization is responsive		
9 Distributable amount for 2023 from Section C, line 6	Distributable amount for 2023 from Section C. line 6		
Line 8 amount divided by line 9 amount		9	
(i) (ii)			(iii)
Section E - Distribution Allocations (see instructions) Excess Distributions		Underdistributions	Distributable

Sec	etion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reason-			
_	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2023			
	From 2018			
Will Server	From 2019			
1000	From 2020			
	From 2021			
_	From 2022			***
	Total of lines 3a through 3e			
9	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
j	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7:			
a	Applied to underdistributions of prior years		Water Control of the	
b	Applied to 2023 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			MARKER PORCE
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			-
d	Excess from 2022			
	Excess from 2023			

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