

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2012 calendar year, or tax year beginning **2012**, and ending **2012**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **SPECIAL KIDS INC**
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
202 ARNETTE STREET
 City, town or post office, state, and ZIP code
MURFREESBORO, TN 37130

D Employer identification no. **62-1718638**
E Telephone number **(615) 890-1003**
G Gross receipts \$ **1,844,384**

F Name and address of principal officer: **CHRIS TRUELOVE**
SAME AS C ABOVE

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶ _____

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **SPECIALKIDSTN.COM**

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: **1998** **M** State of legal domicile: **TN**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVIDE SKILLED CARE		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	84
	6	Total number of volunteers (estimate if necessary)	6	900
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	372,371	521,265
	9	Program service revenue (Part VIII, line 2g)	1,005,981	1,018,207
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	522	(37)
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	183,702	231,393
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,562,576	1,770,828
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14		Benefits paid to or for members (Part IX, column (A), line 4)		0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,316,084	1,415,266
16a		Professional fundraising fees (Part IX, column (A), line 11e)		0
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 262,882		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	184,012	212,560
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,500,096	1,627,826
19	Revenue less expenses. Subtract line 18 from line 12	62,480	143,002	
Fund Balances or Net Assets or	20	Total assets (Part X, line 16)	789,806	939,808
	21	Total liabilities (Part X, line 26)	162,780	61,573
	22	Net assets or fund balances. Subtract line 21 from line 20	627,026	878,235

Part II Signature Block

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

Sign Here

CHRIS TRUELOVE
Signature of officer Date **05-14-2013**

CHRIS TRUELOVE, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name H A BEASLEY	Preparer's signature H A BEASLEY	Date 06-06-2013	Check <input checked="" type="checkbox"/> if PTIN self-employed P00094107
Firm's name ▶ H A Beasley and Company PC	Firm's EIN ▶		Phone no. 615-895-5675
Firm's address ▶ 111 MTCS Drive Murfreesboro TN 37129			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

PROVIDE SKILLED CARE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes 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? Yes 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 \$ 1,259,495 including grants of \$ _____) (Revenue \$ 1,029,715)

PROVIDE OUT-PATIENT REHABILITATION AND SKILLED NURSING SERVICES TO CHILDREN WITH SPECIAL NEEDS.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 1,259,495

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)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		
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		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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
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 Schedule J		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 Schedule K. If "No," go to line 25		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	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 Schedule L, Part I		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		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		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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		X
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		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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question number, description, and Yes/No responses. Includes questions 1a through 14b regarding IRS filings and tax compliance.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1a	19		
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	19		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
8a		X	
8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X
9			X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a		X
b		
10b		
11a		X
b		
11a		X
12a	X	
b	X	
12b	X	
c	X	
12c	X	
13	X	
14	X	
15		
a	X	
b	X	
15a	X	
b	X	
15b	X	
16a		X
b		
16a		X
b		
16b		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **TN**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **SHARON JONES (615) 893-4565** **202 ARNETTE STREET MURFREESBORO, TN 37130**

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

Check if Schedule O contains a response to any question 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 instructions for definition of "key employee."
- List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Former			
(1) AIMEE BOLINGER CHAIRMAN	5.00	X		X					0	0	0
(2) BEN HALL MCFARLIN JR DIRECTOR	5.00	X							0	0	0
(3) BEN PHILLIPS IMMEDIATE PAST CHAIRMAN	5.00	X		X					0	0	0
(4) BEVERLY DAVIS SECRETARY	5.00	X		X					0	0	0
(5) BRIAN JIMENEZ DIRECTOR	5.00	X							0	0	0
(6) CAM BIVENS DIRECTOR	5.00	X							0	0	0
(7) CARRIE M GOODWIN CO-FOUNDER	5.00	X		X					0	0	0
(8) CRAIG CONYERS DIRECTOR	5.00	X							0	0	0
(9) ELIZABETH SMITH DIRECTOR	5.00	X							0	0	0
(10) EMILY PEGG DIRECTOR	5.00	X							0	0	0
(11) JERRY SCOTT DIRECTOR	5.00	X							0	0	0
(12) JULIE BYRNES DIRECTOR	5.00	X							0	0	0
(13) KIM SOKOYA CHAIRMAN-ELECT	5.00	X		X					0	0	0
(14) KRISTA HAWKINS DIRECTOR	5.00	X							0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual director	Individual trustee	Individual officer	Key employee	Highest compensated employee	Former	Other			
(15) LISA STILWELL DIRECTOR	5.00	X							0	0	0
(16) MACK BARRETT TREASURER	5.00	X		X					0	0	0
(17) PAUL SMITH DIRECTOR	5.00	X							0	0	0
(18) ROB GOODWIN DIRECTOR	5.00	X							0	0	0
(19) SHERI MORGAN DIRECTOR	5.00	X							0	0	0
(20) CHRIS TRUELOVE EXECUTIVE DIRECTOR	40.00			X	X				66,292	0	0
(21)											
(22)											
(23)											
(24)											
(25)											
1b Sub-total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)									66,292	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns					
	1b	Membership dues					
	1c	Fundraising events					
	1d	Related organizations					
	1e	Government grants (contributions)					
	1f	All other contributions, gifts, grants, and similar amounts not included above	521,265				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f	521,265				
Program Service Revenue	2a	INSURANCE PROVIDERS					
		Business Code					
		621300	852,770	852,770			
	b	PATIENT SERVICE FEES					
		621300	165,437	165,437			
	c						
	d						
e							
f	All other program service revenue						
g	Total. Add lines 2a-2f	1,018,207					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	962	962			
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			(999)				
	b	Less: cost or other basis and sales expenses					
c	Gain or (loss)						
d	Net gain or (loss)	(999)	(999)				
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	304,949				
b	Less: direct expenses	b	73,556				
c	Net income or (loss) from fundraising events		231,393		231,393		
9a	Gross income from gaming activities. See Part IV, line 19	a					
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	a					
		b	Less: cost of goods sold	b			
		c	Net income or (loss) from sales of inventory				
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions		1,770,828	1,018,170	0	231,393	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	66,292	29,831	36,461	
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	1,132,236	907,827	33,427	190,982
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	113,048	88,442	6,592	18,014
10	Payroll taxes	103,690	81,121	6,046	16,523
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	10,850		10,850	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,800	1,800		
12	Advertising and promotion				
13	Office expenses	19,625	15,353	1,144	3,128
14	Information technology				
15	Royalties				
16	Occupancy	14,778	10,961	1,907	1,910
17	Travel	3,369	2,636	196	537
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,053			3,053
20	Interest	105	25	80	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	30,837	24,125	1,798	4,914
23	Insurance	22,617	17,694	1,319	3,604
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	SUPPLIES	43,371	33,931	2,529	6,911
b	FAMILY SUPPORT	4,164	4,164		
c	SUBSCRIPTIONS	23,252	18,191	1,356	3,705
d	REPAIRS AND MAINTENANCE	25,577	20,010	1,492	4,075
e	All other expenses	9,162	3,384	252	5,526
25	Total functional expenses. Add lines 1 through 24e	1,627,826	1,259,495	105,449	262,882
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A)		(B)	
		Beginning of year		End of year	
Assets	1	Cash - non-interest-bearing	118,758	1	259,342
	2	Savings and temporary cash investments	98,351	2	126,016
	3	Pledges and grants receivable, net		3	14,130
	4	Accounts receivable, net	74,429	4	14,485
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	35,373	9	23,404
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 716,263		
	b	Less: accumulated depreciation	10b 223,166	457,992	10c 493,097
	11	Investments - publicly traded securities	4,903	11	9,334
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	789,806	16	939,808	
Liabilities	17	Accounts payable and accrued expenses	162,780	17	14,904
	18	Grants payable		18	
	19	Deferred revenue		19	46,669
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	162,780	26	61,573
Net Assets of Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	627,026	27	774,310
	28	Temporarily restricted net assets		28	103,925
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	627,026	33	878,235	
34	Total liabilities and net assets/fund balances	789,806	34	939,808	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,770,828
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,627,826
3	Revenue less expenses. Subtract line 2 from line 1	3	143,002
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	627,026
5	Net unrealized gains (losses) on investments	5	(802)
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	109,009
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	878,235

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

Depreciation and Amortization (Including Information on Listed Property)

2012

Attachment
Sequence No. **179**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

SPECIAL KIDS INC

FORM 990 - 1

62-1718638

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	22,452

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	3,937
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property STM 50						
c 7-year property STM 51						
d 10-year property						
e 15-year property STM 52						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a	Class life					
b	12-year		12 yrs.		S/L	
c	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	30,948
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

Name of the organization

SPECIAL KIDS INC

Employer identification number

62-1718638

Part I 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 11, 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 section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally 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.)
- 9 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.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	654,549	684,848	560,326	606,391	896,178	3,402,292
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	841,271	1,055,689	971,867	1,005,981	1,029,715	4,904,523
3 Gross receipts from activities that are not an unrelated trade or bus. under sec 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,495,820	1,740,537	1,532,193	1,612,372	1,925,893	8,306,815
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						8,306,815

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	1,495,820	1,740,537	1,532,193	1,612,372	1,925,893	8,306,815
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,910	2,268	598	522	(38)	6,260
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2,910	2,268	598	522	(38)	6,260
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	1,498,730	1,742,805	1,532,791	1,612,894	1,925,855	8,313,075
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	99.92	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	99.80	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	0.08	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	0.20	%

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

SPECIAL KIDS INC

Employer identification number

62-1718638

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (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 in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 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's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? 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" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages in 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:
- | | Yes | No |
|-----------------------------|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. 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	119,404			119,404
b Buildings	430,919		123,624	307,295
c Leasehold improvements				
d Equipment	165,940		99,542	66,398
e Other <i>STMDIE</i>				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				493,097

Part VII Investments - Other Securities. 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)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. FIN 48 (ASC 740) Footnote. 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI		Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	
1	Total revenue, gains, and other support per audited financial statements	1	1,770,828
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,770,828
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,770,828

Part XII		Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
1	Total expenses and losses per audited financial statements	1	1,627,826
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,627,826
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,627,826

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

Employer identification number

SPECIAL KIDS INC

62-1718638

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1 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
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a 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? Yes No
- b If "Yes," list the ten 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 address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		15K (event type)	GOLF CLASSIC (event type)	1 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	113,571	38,823	152,555	304,949
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	113,571	38,823	152,555	304,949
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	34,505	10,622	28,429	73,556
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				(73,556)
11	Net income summary. Combine line 3, column (d), and line 10 ▶				231,393	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				()
8	Net gaming income summary. Combine line 1, column d, and line 7 ▶				

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

Federal Supporting Statements

2012 PG01

Name(s) as shown on return

FEIN

SPECIAL KIDS INC

62-1718638

FORM 4562 - LINE 19B

STM 50

BASIS	RP	CV	METHOD	DEDUCTION
1,682	5	HY	SL	168
5,500	5	HY	SL	550
14,801	5	HY	SL	1,480
4,732	5	HY	SL	473
2,799	5	HY	SL	280
599	5	HY	SL	60
TOTALS				<u><u>3,011</u></u>

FORM 4562 - LINE 19C

PG01
STM 51

BASIS	RP	CV	METHOD	DEDUCTION
2,100	7	HY	SL	150
321	7	HY	SL	23
1,000	7	HY	SL	71
1,000	7	HY	SL	71
4,000	7	HY	SL	286
TOTALS				<u><u>601</u></u>

FORM 4562 - LINE 19E

PG01
STM 52

BASIS	RP	CV	METHOD	DEDUCTION
7,600	15	HY	SL	253
2,808	15	HY	SL	94
18,000	15	HY	SL	600
TOTALS				<u><u>947</u></u>

Federal Supporting Statements

2012 PG01

Name(s) as shown on return

FEIN

SPECIAL KIDS INC

62-1718638

FORM 990, SCHEDULE D, PART VI, LINE 1E
INVESTMENTS - OTHER

STATEMENT #D1E

DESCRIPTION OF INVESTMENT	COST/BASIS (INVESTMENT)	COST/BASIS (OTHER)	DEPR	BOOK VALUE
LAND, BUILDING, EQUIP.	0	0	0	0
TOTAL	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

SPECIAL KIDS INC

62-1718638

01. Form 990 governing body review (Part VI, line 11)

THE BOARD OF DIRECTORS DOES NOT REVIEW THE 990 BEFORE IT IS FILED.

02. Conflict of interest policy compliance (Part VI, line 12c)

THE BOARD COMPLIES WITH ITS PRE-ESTABLISHED CONFLICT OF INTEREST POLICY. ALL BOARD

MEMBERS MUST DISCLOSE ANY RELATIONSHIPS THAT MAY CONFLICT WITH THE ORGANIZATION.

03. CEO, executive director, top management comp (Part VI, line 15a)

GOVERNING BODY APPROVES SALARY AND SALARY CHANGES FOR THE EXECUTIVE DIRECTOR.

04. Other officer or key employee compensation (Part VI, line 15b)

GOVERNING BODY APPROVES SALARY AND SALARY CHANGES FOR ALL KEY EMPLOYEE COMPENSATION.

05. Governing documents, etc, available to public (Part VI, line 19)

ANNUAL REPORTS AND CHARITABLE SOLICITATIONS ARE AVAILABLE TO THE PUBLIC.

Name(s) as shown on return

SPECIAL KIDS INC

FEIN

62-1718638

ALL OTHER

Description	Amount
PRIVATE GIFTS AND GRANTS	\$ 479,630
IN-KIND DONATIONS	41,635
Total:	\$ 521,265

DIRECT FUNDRAISING EXPENSES

Description	Amount
DEVELOPMENT EXPENSES	\$ 147,947
LESS WEBSITE DESIGN/MAINTENANCE	(4,686)
LESS WEBSITE MAINT-DONOR SOFT	(150)
IN KIND EXPENSES	(69,555)
Total:	\$ 73,556

OFFICE EXPENSES-PROGRAM EXPENSES

Description	Amount
TELEPHONE AND INTERNET	\$ 11,807
POSTAGE	3,546
Total:	\$ 15,353

OFFICE EXPENSE-MANAGEMENT AND GENERAL

Description	Amount
TELEPHONE AND INTERNET	\$ 880
POSTAGE	264
Total:	\$ 1,144

OFFICE EXPENSE-FUNDRAISING

Description	Amount
TELEPHONE AND INTERNET	\$ 2,405
POSTAGE	723
Total:	\$ 3,128

Name(s) as shown on return

SPECIAL KIDS INC

FEIN

62-1718638

OTHER EXPENSES-PROGRAM EXPENSES

Description	Amount
BANK CHARGES	\$ 3,384
Total:	\$ 3,384

OTHER EXPENSES-MANAGEMENT AND GENERAL

Description	Amount
BANK CHARGES	\$ 252
Total:	\$ 252

OTHER EXPENSES-FUNDRAISING

Description	Amount
BANK CHARGES	\$ 690
WEBSITE MAINTENANCE	4,836
Total:	\$ 5,526

CASH

Description	Amount
INC	\$ 217,362
LLC	41,287
GIFT CARDS	693
Total:	\$ 259,342

A/P AND ACCRUED EXPENSES

Description	Amount
ACCOUNTS PAYABLE	\$ 6,718
CREDIT CARDS	595
ACCRUED PAYABLES	6,127
PAYROLL LIABILITIES	1,464
Total:	\$ 14,904

990

Overflow Statement

2012
Page 3

Name(s) as shown on return

SPECIAL KIDS INC

FEIN

62-1718638

UNRESTRICTED NET ASSETS

Description	Amount
INC	\$ 734,522
LLC	39,787
Total:	\$ 774,309

* Item was disposed of during current year.

Depreciation Detail Listing

Program Services

For your records only

2012

PAGE 1

Name(s) as shown on return

SPECIAL KIDS INC

Social security number/EIN

62-1718638

No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
1	BUILDING	19980301	253,225		100.00		253,225	40	SL	2.5	6,331	94,861			6,331
3	50KW EMERGENCY GENERA	20010426	16,877		100.00		16,877	5		0		16,877			
4	CLIMBING WALL	20030508	1,307		100.00		1,307	5		0		1,307			
5	TREADMILL	20040123	4,905		100.00		4,905	5		0		4,905			
6	BARRELL ROLL	20040625	1,284		100.00		1,284	5		0		1,284			
7	LOBBY PLAY ISLAND	20040601	929		100.00		929	5		0		929			
8	GAIT TRAINER	20041008	705		100.00		705	5		0		705			
9	MOBILE STORAGE	20040601	536		100.00		536	5		0		536			
10	STACK CHAIRS	20040622	285		100.00		285	5		0		285			
11	HOOPEATS EQUIP	20050207	570		100.00		570	5		0		570			
12	8 SIDED LOFT	20050620	3,444		100.00		3,444	5		0		3,444			
13	ACS CART	20050822	1,957		100.00		1,957	5		0		1,957			
14	PREDATORS GRANT EQUIP	20060701	8,081		100.00		8,081	5		0		8,081			
15	202 ARNETTE STREET	20070215	130,987		100.00		130,987	39	SL	2.564	3,359	21,619			3,359
16	TERMINAL SERVER	20070207	5,506		100.00		5,506	5	200 DB HY	5.76	317	5,505			
17	TELEPHONE SYSTEM-COMD	20070227	3,551		100.00		3,551	5	200 DB HY	5.76	205	3,551			
18	PRINTER-ARNETTE ST	20070321	570		100.00		570	5	200 DB HY	5.76	33	570			
19	OFFICE FURNITURE-CHRI	20070507	400		100.00		400	5	200 DB HY	5.76	23	400			
20	SECURITY LIGHTS	20080331	2,068		100.00		2,068	7	SL	14.286	295	1,328			295
21	OFFICE RENOVATION ANN	20030630	16,232		100.00		16,232	15	SL	6.667	1,082	4,869			1,082
22	SAVIN COPY MACHINE	20080331	2,725		100.00		2,725	7	SL	14.286	389	1,751			389
23	CRIB&ACCESSORIES	20080124	3,113		100.00		3,113	7	SL	14.286	445	2,002			445
24	PEAVEY ESCORT 2000 PO	20080929	500		100.00		500	7	SL	14.286	71	320			71
26	DELL SERVERS	20090414	2,401		100.00		2,401	5	SL	20	480	1,680			480
27	COMPUTER-RACHEL	20090714	679		100.00		679	5	SL	20	136	476			136
28	COMPUTER-MEGAN	20090714	679		100.00		679	5	SL	20	136	476			136
29	COMPUTERS-TONI, ANDRE,	20090819	4,266		100.00		4,266	5	SL	20	853	2,986			853
30	COMPUTERS-JAMIE, ALEXI	20090819	2,445		100.00		2,445	5	SL	20	489	1,712			489
31	COMPUTERS	20091015	2,075		100.00		2,075	5	SL	20	415	1,453			415
32	REFRIGERATOR-KENMORE	20091101	845		100.00		845	7	SL	14.286	121	423			121

* Item was disposed of during current year.

Depreciation Detail Listing

Program Services
For your records only

2012

PAGE 2

Name(s) as shown on return

SPECIAL KIDS INC

Social security number/EIN

62-1718638

No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
33	OXYGEN CONCENTRATOR	20091101	596		100.00		596	7	SL	14.286	85	298			85
34	ELECTRIC DRYER	20091203	657		100.00		657	7	SL	14.286	94	329			94
35	DONOR MGMT SYSTEM(PRO	20090921	19,446		100.00		19,446	5	SL	20	3,889	13,612			3,889
36	SOFTWARE FOR SERVER A	20090301	370		100.00		370	5	SL	20	74	259			74
37	SKINS UPDATES	20091201	900		100.00		900	5	SL	20	180	630			180
38	GYM CABINETS	20091130	1,705		100.00		1,705	7	SL	14.286	244	854			244
40	TEAM ASK WEBSITE	20100610	9,800		100.00		9,800	5	SL	20	1,960	4,900			1,960
41	2LAPTOPS,3PC'S,14 MON	20100713	5,837		100.00		5,837	5	SL	20	1,167	2,918			1,167
42	46"TV&BLU RAY PLAYER	20100801	1,470		100.00		1,470	5	SL	20	294	735			294
43	RECEIVER DENON	20100801	550		100.00		550	5	SL	20	110	275			110
44	CAMERA CANON REBEL	20100801	960		100.00		960	5	SL	20	192	480			192
45	PROJECTOR HITSUBISHI	20100801	1,253		100.00		1,253	5	SL	20	251	627			251
46	5 COMPUTERS	20100819	9,646		100.00		9,646	5	SL	20	729	1,823			729
47	LYTEC SOFTWARE 2010	20101005	4,360		100.00		4,360	5	SL	20	872	2,180			872
48	3 COMPUTERS-HP 500B-P	20110531	1,110		100.00		1,110	5	SL	20	222	333			222
49	BALLS PIT	20110615	1,332		100.00		1,332	7	SL	14.286	190	380			190
50	VITAL SIGN MONITOR	20110805	2,778		100.00		2,778	5	SL	20	556	1,112			556
51	ANNEX ROOF	20120406	7,600		100.00		7,600	15	SL	3.333	253	253			253
52	LYTEC SERVER	20120416	1,682		100.00		1,682	5	SL	10	168	168			168
53	2006 CARGO TRAILER 12	20120507	2,100		100.00		2,100	7	SL	7.143	150	150			150
54	WHEEL CLAMP-CARGO(CAM	20120510	321		100.00		321	7	SL	7.143	23	23			23
55	2002 CHEVY EXPRESS VA	20120517	5,500		100.00		5,500	5	SL	10	550	550			550
56	IMPACT WEBSITE	20120630	14,801		100.00		14,801	5	SL	10	1,480	1,480			1,480
57	2 OUTSIDE GLASS DOORS	20120831	2,808		100.00		2,808	15	SL	3.333	94	94			94
58	3 HVAC UNITS	20120925	18,000		100.00		18,000	15	SL	3.333	600	600			600
59	7 DELL COMPUTERS	20121031	4,732		100.00		4,732	5	SL	10	473	473			473
60	DELL POWER EDGE 1900	20120101	2,799		100.00		2,799	5	SL	10	280	280			280
61	3 PIECE TOILET CHAIR	20121024	1,000		100.00		1,000	7	SL	7.143	71	71			71
62	2 PICNIC TABLES	20121203	1,000		100.00		1,000	7	SL	7.143	71	71			71
63	OTTOBOCK AQUANET TOIL	20121211	599		100.00		599	5	SL	10	60	60			60

* Item was disposed of during current year.

Depreciation Detail Listing

Program Services

2012

PAGE 3

For your records only

Name(s) as shown on return

SPECIAL KIDS INC

Social security number/EIN
62-1718638

No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
64	WALKER Asset (s) Sold	20121214	4,000		100.00		4,000	7	SL HY	7.143	286	286			286
39	TRAILER HOMESTANDER	20100601	1,399		100.00		1,399	7	SL HY	14.28	100	400			100
Totals															
Land Amount															
Net Depreciable Cost															
												598,258	223,566	30,948	30,370

ST ADJ:

* Item was disposed of during current year.

Depreciation Detail Listing

Management & General
For your records only

2012
PAGE 1

Name(s) as shown on return

SPECIAL KIDS INC

Social security number/EIN

62-1718638

No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
2	LAND	19970101	35,404	35,404	100.00		0	0		0					
25	LAND 202 ARNETTE STRE	20070215	84,000	84,000	100.00		0	0		0					
Totals															
Land Amount 119,404															
Net Depreciable Cost 119,404															

ST ADJ:

Depreciation Reconciliation for SPECIAL KIDS INC

	Cost	Basis	Current Depreciation	Accumulated Depreciation	Bonus Depreciation
Beginning of Year	650,720	531,316	26,389	219,007	
Placed in Service in Current Year	66,942	66,942	4,559	4,559	
Removed from Service in Current Year	1,399	1,399	100	400	
End of Year	716,263	596,859	30,848	223,166	

Next Year's Depreciation

2012

Name		FEIN					
SPECIAL KIDS INC		62-1718638					
Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	BUILDING	19980301	253,225	SL	40	6,331
MGT	1	LAND	19970101		NDA	0	
PRG	1	50KW EMERGENCY GENERATOR	20010426	16,877	SL	5	
PRG	1	CLIMBING WALL	20030508	1,307	SL	5	
PRG	1	TREADMILL	20040123	4,905	SL	5	
PRG	1	BARRELL ROLL	20040625	1,284	SL	5	
PRG	1	LOBBY PLAY ISLAND	20040601	929	SL	5	
PRG	1	GAIT TRAINER	20041008	705	SL	5	
PRG	1	MOBILE STORAGE	20040601	536	SL	5	
PRG	1	STACK CHAIRS	20040622	285	SL	5	
PRG	1	HOOFBEATS EQUIP	20050207	570	SL	5	
PRG	1	8 SIDED LOFT	20050620	3,444	SL	5	
PRG	1	ACS CART	20050822	1,957	SL	5	
PRG	1	PREDATORS GRANT EQUIPMEN	20060701	8,081	SL	5	
PRG	1	202 ARNETTE STREET	20070215	130,987	M	39	3,359
PRG	1	TERMINAL SERVER	20070207	5,506	M	5	
PRG	1	TELEPHONE SYSTEM-COMDIAL	20070227	3,551	M	5	
PRG	1	PRINTER-ARNETTE ST	20070321	570	M	5	
PRG	1	OFFICE FURNITURE-CHRIS	20070507	400	M	5	
PRG	1	SECURITY LIGHTS	20080331	2,068	SL	7	295
PRG	1	OFFICE RENOVATION ANNEX (20080630	16,232	SL	15	1,082
PRG	1	SAVIN COPY MACHINE	20080331	2,725	SL	7	389
PRG	1	CRIB&ACCESSORIES	20080124	3,113	SL	7	445
PRG	1	PEAVEY ESCORT 2000 PORTA	20080929	500	SL	7	71
MGT	1	LAND 202 ARNETTE STREET	20070215		NDA	0	
PRG	1	DELL SERVERS	20090414	2,401	SL	5	480
PRG	1	COMPUTER-RACHEL	20090714	679	SL	5	136
PRG	1	COMPUTER-MEGAN	20090714	679	SL	5	136
PRG	1	COMPUTERS-TONI, ANDRE, JUL	20090819	4,266	SL	5	853
PRG	1	COMPUTERS-JAMIE, ALEXIS, D	20090819	2,445	SL	5	489
PRG	1	COMPUTERS	20091015	2,075	SL	5	415
PRG	1	REFRIGERATOR-KENMORE	20091101	845	SL	7	121
PRG	1	OXYGEN CONCENTRATOR	20091101	596	SL	7	85
PRG	1	ELECTRIC DRYER	20091203	657	SL	7	94
PRG	1	DONOR MGMT SYSTEM(FROM A	20090921	19,446	SL	5	3,889
PRG	1	SOFTWARE FOR SERVER AT A	20090301	370	SL	5	74
PRG	1	SKIMS UPDATES	20091201	900	SL	5	180
PRG	1	GYM CABINETS	20091130	1,705	SL	7	244
PRG	1	TEAM ASK WEBSITE	20100610	9,800	SL	5	1,960
PRG	1	2LAPTOPS, 3PC'S, 14 MONITO	20100713	5,837	SL	5	1,167
PRG	1	46"TV&BLU RAY PLAYER	20100801	1,470	SL	5	294
PRG	1	RECEIVER DENON	20100801	550	SL	5	110
PRG	1	CAMERA CANON REBEL	20100801	960	SL	5	192
PRG	1	PROJECTOR MITSUBISHI	20100801	1,253	SL	5	251
PRG	1	5 COMPUTERS	20100819	3,646	SL	5	729
PRG	1	LYTEC SOFTWARE 2010	20101005	4,360	SL	5	872
PRG	1	3 COMPUTERS-HP 500B-P E5	20110531	1,110	SL	5	222
PRG	1	BALLS PIT	20110615	1,332	SL	7	190
PRG	1	VITAL SIGN MONITOR	20110805	2,778	SL	5	556
PRG	1	ANNEX ROOF	20120406	7,600	SL	15	507
PRG	1	LYTEC SERVER	20120416	1,682	SL	5	336

Next Year's Depreciation

2012

Name						FEIN	
SPECIAL KIDS INC						62-1718638	
Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	2006 CARGO TRAILER 12X5	20120507	2,100	SL	7	300
PRG	1	WHEEL CLAMP-CARGO (CAMPAB	20120510	321	SL	7	46
PRG	1	2002 CHEVY EXPRESS VAN	20120517	5,500	SL	5	1,100
PRG	1	IMPACT WEBSITE	20120630	14,801	SL	5	2,960
PRG	1	2 OUTSIDE GLASS DOORS-ST	20120831	2,808	SL	15	187
PRG	1	3 HVAC UNITS	20120925	18,000	SL	15	1,200
PRG	1	7 DELL COMPUTERS	20121031	4,732	SL	5	946
PRG	1	DELL POWER EDGE 1900 SER	20120101	2,799	SL	5	560
PRG	1	3 PIECE TOILET CHAIR	20121024	1,000	SL	7	143
PRG	1	2 PICNIC TABLES	20121203	1,000	SL	7	143
PRG	1	OTTOBOCK AQUANET TOILET	20121211	599	SL	5	120
PRG	1	WALKER	20121214	4,000	SL	7	571
		TOTAL					34,830