

H A Beasley and Company PLLC

111 MTCS Road
Murfreesboro, TN 37129
murfreesboro@habeasley.com
Phone: (615)895-5675 | Fax: (615)895-5660

Special Kids Inc

**Tax Return for
Tax Year 2021**

H A Beasley and Company PLLC

111 MTCS Road
Murfreesboro, TN 37129
murfreesboro@habeasley.com
Phone: (615)895-5675 | Fax: (615)895-5660

June 28, 2022

Special Kids Inc
2132 E Main Street
Murfreesboro, TN 37130

Special Kids Inc:

Enclosed is the 2021 federal return for a tax-exempt organization, prepared for Special Kids Inc from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-TE, IRS e-file Signature Authorization for an Exempt Organization.

The federal return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (615)895-5675.

Sincerely,

Bryan Blair
H A Beasley and Company PLLC

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Special Kids Inc
2132 E Main Street
Murfreesboro, TN 37130

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (615)895-5675.

Sincerely,

Bryan Blair
H A Beasley and Company PLLC

Return of Organization Exempt From Income Tax

2021

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.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the **2021** calendar year, or tax year beginning , **2021**, and ending , **20**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final 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
2132 E MAIN STREET
 City or town, state or province, country, and ZIP or foreign postal code
MURFREESBORO, TN 37130

D Employer identification number
62-1718638

E Telephone number
(615) 809-2632

G Gross receipts
\$ **4,905,908**

F Name and address of principal officer: **MACK BARRETT**
SAME AS C ABOVE

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates 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		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDE THERAPEUTIC REHABILITATION AND PROFESSIONAL NURSING SERVICES TO CHILDREN WITH SPECIAL NEEDS.		
	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	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	84
	6 Total number of volunteers (estimate if necessary)	6	472
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	1,436,231	2,123,468
	9 Program service revenue (Part VIII, line 2g)	1,219,408	1,726,931
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	123,518	120,336
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,126,051	779,275
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,905,208	4,750,010
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	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)	2,461,855	2,647,419
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 361,362		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	445,753	499,982
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,907,608	3,147,401
19 Revenue less expenses. Subtract line 18 from line 12	997,600	1,602,609	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 6,382,729	End of Year 7,931,360
	21 Total liabilities (Part X, line 26)	413,574	269,014
	22 Net assets or fund balances. Subtract line 21 from line 20	5,969,155	7,662,346

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

▶ **CHRIS TRUELOVE, EXECUTIVE DIRECTOR**
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Bryan Blair	Preparer's signature Bryan Blair	Date 06-28-2022	Check <input type="checkbox"/> if self-employed	PTIN P00631975
Firm's name ▶ H A Beasley and Company PLLC	Firm's EIN ▶		Phone no. 615-895-5675	
Firm's address ▶ 111 MTCS Road Murfreesboro TN 37129				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2021)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
PROVIDE THERAPEUTIC REHABILITATION AND PROFESSIONAL NURSING SERVICES TO CHILDREN WITH SPECIAL NEEDS.

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 \$ 1,610,042 including grants of \$ _____) (Revenue \$ 1,182,283)
PROVIDE THERAPEUTIC REHABILITATION TO CHILDREN WITH SPECIAL NEEDS.

4b (Code: _____) (Expenses \$ 724,243 including grants of \$ _____) (Revenue \$ 543,097)
PROVIDE PROFESSIONAL NURSING SERVICES TO CHILDREN WITH SPECIAL NEEDS.

4c (Code: _____) (Expenses \$ 34,299 including grants of \$ _____) (Revenue \$ 1,550)
CAMPABILITY - FOUR WEEK DAY CAMP THAT ENCOURAGES CAMPERS, CHILDREN AND YOUTH AGES 6-25, TO PARTICIPATE IN AN INTERACTIVE, SOCIAL, AND FUN ENVIRONMENT.

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **▶ 2,368,584**

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Form W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	84		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	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? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	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, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed - Tennessee
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records - CHRISTY BELL (615)893-4565, 2132 E MAIN 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 or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week 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/ 1099-NEC)	(E) Reportable compensation from related organizations W-2/ 1099-MISC/ 1099-NEC	(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			
(1) CHRIS TRUELOVE EXECUTIVE DIRECTOR	40.00			X	X			92,927	0	19,462
(2) GINNA FOLLIS EX-OFFICIO MEMBER	3.00	X						0	0	0
(3) VICKI EASTHAM EX-OFFICIO MEMBER	3.00	X						0	0	0
(4) DR. JERRY COLLINS DIRECTOR	3.00	X						0	0	0
(5) BRIAN WILLIAMS DIRECTOR	3.00	X						0	0	0
(6) RICK THIGPEN DIRECTOR	3.00	X						0	0	0
(7) ASHLEY STEARNS DIRECTOR	3.00	X						0	0	0
(8) ANGIE KLEINAU DIRECTOR	3.00	X						0	0	0
(9) CARRIE M GOODWIN DIRECTOR AND CO-FOUNDER	3.00	X						0	0	0
(10) A J GOODWIN DIRECTOR	3.00	X						0	0	0
(11) BEVERLY DAVIS DIRECTOR	3.00	X						0	0	0
(12) MARY E POLK CHAIR	3.00	X		X				0	0	0
(13) EMILY PEGG TREASURER	3.00	X		X				0	0	0
(14) ELIZABETH SMITH SECRETARY AND HISTORIAN	3.00	X		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 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							92,927	0	19,462	

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, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such person</i>		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 **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	40,828					
	d Related organizations	1d						
	e Government grants (contributions) . .	1e						
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,082,640					
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,909					
	h Total. Add lines 1a-1f ▶			2,123,468				
Program Service Revenue			Business Code					
	2a PATIENT SERVICE FEES	621300	1,726,931	1,726,931				
	b _____							
	c _____							
	d _____							
	e _____							
	f All other program service revenue							
g Total. Add lines 2a-2f ▶			1,726,931					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		121,957	121,957				
	4 Income from investment of tax-exempt bond proceeds . . . ▶							
	5 Royalties ▶							
	6a Gross rents	6a	(i) Real					
			(ii) Personal					
			b Less: rental expenses	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss) ▶							
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities					
			(ii) Other					
			b Less: cost or other basis and sales expenses	7b	1,621			
			c Gain or (loss)	7c	(1,621)			
	d Net gain or (loss) ▶			(1,621)		(1,621)		
	8a Gross income from fundraising events (not including \$ 40,828 of contributions reported on line 1c). See Part IV, line 18	8a		411,152				
b Less: direct expenses			8b	154,277				
c Net income or (loss) from fundraising events ▶				256,875		256,875		
9a Gross income from gaming activities, See Part IV, line 19	9a							
		b Less: direct expenses	9b					
		c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a							
		b Less: cost of goods sold	10b					
		c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue			Business Code					
	11a OTHER REVENUE	110000	9,668	9,668				
	b PPP LOAN/GRANT	900099	512,732	512,732				
	c _____							
	d All other revenue							
e Total. Add lines 11a-11d ▶			522,400					
12 Total revenue. See instructions ▶			4,750,010	2,371,288	0	255,254		

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 or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	92,927	18,585	37,171	37,171
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	2,134,930	1,678,361	253,205	203,364
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .				
9	Other employee benefits	249,539	189,532	39,938	20,069
10	Payroll taxes	170,023	129,300	21,292	19,431
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
c	Accounting	15,040		15,040	
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.) . .	46,625	35,642	9,214	1,769
12	Advertising and promotion	5,969	2,824		3,145
13	Office expenses	37,001	23,377	5,841	7,783
14	Information technology				
15	Royalties				
16	Occupancy	25,302	19,998	3,543	1,761
17	Travel	2,182	570		1,612
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	822	273	301	248
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	133,351	97,732	8,723	26,896
23	Insurance	60,714	43,222	12,823	4,669
24	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 O.)				
a	SUPPLIES	45,397	41,492	1,805	2,100
b	DEVELOPMENT	15,152			15,152
c	SUBSCRIPTIONS	48,342	46,278	574	1,490
d	REPAIRS AND MAINTENANCE	33,636	24,446	3,629	5,561
e	All other expenses _____	30,449	16,952	4,356	9,141
25	Total functional expenses. Add lines 1 through 24e. .	3,147,401	2,368,584	417,455	361,362
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 or note to any line in this Part X

		(A)		(B)		
		Beginning of year		End of year		
Assets	1	Cash - non-interest-bearing	1,040,308	1	680,539	
	2	Savings and temporary cash investments	890,422	2	1,948,678	
	3	Pledges and grants receivable, net	40,098	3	12,785	
	4	Accounts receivable, net	37,832	4	55,907	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	59,192	9	36,282	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,561,560		
	b	Less: accumulated depreciation	10b	1,024,697	10c	2,536,863
	11	Investments - publicly traded securities	42,428	11	46,959	
	12	Investments - other securities. See Part IV, line 11	1,916,341	12	2,613,347	
	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 33)	6,382,729	16	7,931,360		
Liabilities	17	Accounts payable and accrued expenses	260,062	17	215,741	
	18	Grants payable		18		
	19	Deferred revenue	153,512	19	53,273	
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	413,574	26	269,014	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions	4,273,981	27	5,150,253	
	28	Net assets with donor restrictions	1,695,174	28	2,512,093	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		29		
	30	Paid-in or capital surplus, or land, building, or equipment fund		30		
	31	Retained earnings, endowment, accumulated income, or other funds		31		
	32	Total net assets or fund balances	5,969,155	32	7,662,346	
33	Total liabilities and net assets/fund balances	6,382,729	33	7,931,360		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,750,010
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,147,401
3	Revenue less expenses. Subtract line 2 from line 1	3	1,602,609
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,969,155
5	Net unrealized gains (losses) on investments	5	90,582
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	7,662,346

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <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 on 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 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	
b	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	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on 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
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE A
(Form 990)**

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

2021

**Open to Public
Inspection**

Name of the organization SPECIAL KIDS INC	Employer identification number 62-1718638
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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 12, 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 (Form 990).)
- 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 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: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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 organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 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 2021 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2021. 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 - 2020. 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 - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization 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 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,926,972	1,734,352	2,271,488	1,778,043	2,534,020	10,244,875
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	2,422,126	1,924,939	2,112,787	1,219,408	1,726,931	9,406,191
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	4,349,098	3,659,291	4,384,275	2,997,451	4,260,951	19,651,066
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	64,584	43,776	64,829	21,750	28,788	223,727
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	852,266	914,752	941,295	552,397	639,705	3,900,415
c Add lines 7a and 7b	916,850	958,528	1,006,124	574,147	668,493	4,124,142
8 Public support. (Subtract line 7c from line 6.)						15,526,924

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	4,349,098	3,659,291	4,384,275	2,997,451	4,260,951	19,651,066
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	17,404	33,570	45,869	128,376	121,957	347,176
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	17,404	33,570	45,869	128,376	121,957	347,176
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.)	2,777	4,450	1,830	784,239	523,000	1,316,296
13 Total support. (Add lines 9, 10c, 11, and 12.)	4,369,279	3,697,311	4,431,974	3,910,066	4,905,908	21,314,538
14 First 5 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 2021 (line 8, column (f), divided by line 13, column (f))	15	72.85 %
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	73.04 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	2.00 %
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	1.00 %

- 19a 33 1/3% support tests - 2021.** 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 - 2020.** 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 . . ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a	
b A family member of a person described in line 11a above?	11b	
c A 35% controlled entity of a person described in 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3 By reason of the relationship described in 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	2a	
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required) - <i>provide details in Part VI</i>	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2021

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

SPECIAL KIDS INC

62-1718638

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 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?.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?, 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" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue included on Form 990, Part VIII, line 1, Assets included in Form 990, Part X. Rows include: 1a If the organization elected, as permitted under FASB 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., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on 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 FASB ASC 958 relating to these items: a Revenue included on 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 make 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" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 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, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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	1,798,750	1,317,747	678,204	347,820	15,134
b Contributions	610,905	296,869	474,498	372,435	305,438
c Net investment earnings, gains, and losses	216,956	194,059	171,301	(38,310)	28,621
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	13,264	9,925	6,256	3,741	1,373
g End of year balance	2,613,347	1,798,750	1,317,747	678,204	347,820

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Term endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---------------------------------------|-----|----|
| (i) Unrelated organizations | x | |
| (ii) Related organizations | | x |
- b If "Yes" on line 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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		358,340		358,340
b Buildings		2,509,070	591,664	1,917,406
c Leasehold improvements		185,770	45,762	140,008
d Equipment		384,010	322,552	61,458
e Other		124,370	64,719	59,651
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				2,536,863

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) THE COMMUNITY FOUNDATION OF MIDDLE	2,184,073	FMV
(B) RESTRICTED CASH	429,274	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	2,613,347	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	4,842,213
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	90,582	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	1,621	
e	Add lines 2a through 2d			2e 92,203
3	Subtract line 2e from line 1			3 4,750,010
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 4,750,010

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,149,022
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	1,621	
e	Add lines 2a through 2d			2e 1,621
3	Subtract line 2e from line 1			3 3,147,401
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 3,147,401

Part XIII Supplemental Information.

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)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

SPECIAL KIDS INC

Employer identification number

62-1718638

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

- 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...
b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (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. Rows 1-10 and a Total row.

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" on 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
		RACE (event type)	BANQUET (event type)	<u>2</u> (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	217,688	100,431	133,861	451,980
	2 Less: Contributions	8,186	27,004	5,636	40,826
	3 Gross income (line 1 minus line 2)	209,502	73,427	128,225	411,154
Direct Expenses	4 Cash prizes				
	5 Noncash prizes		1,444	4,884	6,328
	6 Rent/facility costs	540		19,176	19,716
	7 Food and beverages	8,728	5,742	3,248	17,718
	8 Entertainment		7,500		7,500
	9 Other direct expenses	76,328	13,502	13,185	103,015
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				154,277
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				256,877	

Part III Gaming. Complete if the organization answered "Yes" on 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))
Revenue	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. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct 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: _____

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

SPECIAL KIDS INC

Employer identification number

62-1718638

01. Officer, directors, etc. family relationship (Part VI, line 2)

CARRIE GOODWIN IS THE MOTHER OF A J GOODWIN.

ANGIE KLEINAU IS THE MOTHER OF CARRIE GOODWIN.

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

THE BOARD OF DIRECTORS APPROVES THE 990 BEFORE IT IS FILED.

03. 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.

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

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

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

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

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

ANNUAL REPORTS AND CHARITABLE SOLICITATIONS ARE AVAILABLE TO THE PUBLIC.

07. List of other fees for services expenses (Part IX, line 11g)

CONSULTING - 31,929

PAYROLL PROCESSING FEES - 14,696

Depreciation and Amortization

(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return SPECIAL KIDS INC	Business or activity to which this form relates FORM 990 - 1	Identifying number 62-1718638
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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)
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	
9	Tentative deduction. Enter the smaller of line 5 or line 8	
10	Carryover of disallowed deduction from line 13 of your 2020 Form 4562	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	
13	Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 ▶ 13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't 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	123,420

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2021	17	3,359
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 2021 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	#567					424
c 7-year property	#568					925
d 10-year property						
e 15-year property		288,632	15	MQ	SL	2,405
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			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	1,975
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	132,508
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.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No				24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							25	
26 Property used more than 50% in a qualified business use:								
NISSAN NV3500	07-07-2015	100.0%	30,830	30,830	5	S/L-MQ	1,975	
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L-		
		%				S/L-		
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	1,975
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (don't include commuting miles) . . .												
31 Total commuting miles driven during the year .												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2021 tax year (see instructions):					
43 Amortization of costs that began before your 2021 tax year				43	843
44 Total. Add amounts in column (f). See the instructions for where to report				44	843

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

▶ **Attach to your tax return.**
▶ **Go to www.irs.gov/Form4797 for instructions and the latest information.**

Name(s) shown on return SPECIAL KIDS INC	Identifying number 62-1718638
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1 Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions **1**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	Statement #603			797	101,529	103,947	(1,621)

3 Gain, if any, from Form 4684, line 39 **3**

4 Section 1231 gain from installment sales from Form 6252, line 26 or 37 **4**

5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 **5**

6 Gain, if any, from line 32, from other than casualty or theft **6**

7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows **7** **(1,621)**

Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years. See instructions **8**

9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions **9**

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

CIP - PARKING EXPANSION	12-31-2020	12-31-2021				
			7,103		7,103	0

11 Loss, if any, from line 7 **11** **(1,621)**

12 Gain, if any, from line 7 or amount from line 8, if applicable **12**

13 Gain, if any, from line 31 **13**

14 Net gain or (loss) from Form 4684, lines 31 and 38a **14**

15 Ordinary gain from installment sales from Form 6252, line 25 or 36 **15**

16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 **16**

17 Combine lines 10 through 16 **17** **(1,621)**

18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.

a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions **18a**

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 **18b**

For Paperwork Reduction Act Notice, see separate instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

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

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

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

Type or print	Name of exempt organization or other filer, see instructions. SPECIAL KIDS INC	Taxpayer identification number (TIN) 62-1718638
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2132 E MAIN STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MURFREESBORO TN 37130	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

• The books are in the care of ▶ **CHRISTY BELL, 2132 E MAIN STREET MURFREESBORO TN 37130**

Telephone No.▶ **615-893-4565** FAX No.▶ **615-893-4923**

- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box ▶ . If it is for part of the group, check this box. . . . ▶ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 11-15, 20 22, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year 20 21 or
- ▶ tax year beginning _____, 20 _____, and ending _____, 20 _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

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

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Federal Supporting Statements

2021 PG01

Name(s) as shown on return

Tax ID Number

SPECIAL KIDS INC

62-1718638

FORM 4562 - LINE 19B

Statement #567

BASIS	RP	CV	METHOD	DEDUCTION
999	5	MQ	SL	75
1,391	5	MQ	SL	35
2,632	5	MQ	SL	66
2,632	5	MQ	SL	66
4,865	5	MQ	SL	122
1,216	5	MQ	SL	30
1,216	5	MQ	SL	30
TOTAL				<u>424</u>

FORM 4562 - LINE 19C

PG01
Statement #568

BASIS	RP	CV	METHOD	DEDUCTION
13,555	7	MQ	SL	726
1,442	7	MQ	SL	77
910	7	MQ	SL	49
579	7	MQ	SL	10
1,957	7	MQ	SL	35
800	7	MQ	SL	14
800	7	MQ	SL	14
TOTAL				<u>925</u>

Federal Supporting Statements

2021 PG01

Name(s) as shown on return

Tax ID Number

SPECIAL KIDS INC

62-1718638

FORM 4797 - PART 1

Statement #603

DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
PREDATORS GRANT EQUIPMENT	07-01-2006	12-31-2021	0	8,081	8,081	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
TERMINAL SERVER	02-07-2007	07-31-2021	0	5,506	5,506	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL SERVERS-ARNETTE ST & E MAIN	04-14-2009	07-31-2021	0	2,401	2,401	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL COMP-TONI, ANDRE, JULIE, STEPH, SHARO, S	08-19-2009	07-31-2021	0	4,266	4,266	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL COMPUTERS	10-15-2009	07-31-2021	0	2,075	2,075	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
SOFTWARE FOR SERVER AT ANNEX-FROM TECHSO	03-01-2009	07-31-2021	0	370	370	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL-2LAPTOPS, 3PC'S, 14MONI-SP, DEV, CT, SJ,	07-13-2010	07-31-2021	0	5,837	5,837	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
PROJECTOR MITSUBISHI	08-01-2010	07-31-2021	0	1,253	1,253	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
5 DELL COMPUTERS	08-19-2010	07-31-2021	0	3,646	3,646	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL POWER EDGE 1900 SERVER	01-01-2012	07-31-2021	0	2,799	2,799	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
4 OPTIPLEX 3010 MINTOWER PC'S	04-01-2013	07-31-2021	0	2,527	2,527	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
LAPTOP DELL XPS 12 FOR NURSING	08-07-2014	07-31-2021	0	983	983	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
31 LESRO NEWPORT MODERN CHAIRS PENNY	10-01-2014	12-31-2021	0	7,421	7,421	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
PORTABLE SINK FOR CHURCH & RENOVATED BLD	10-07-2014	07-31-2021	0	5,326	5,520	(194)
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
SHED FOR SHERI'S SUPPLIES & GOLF CART	10-16-2014	12-31-2021	0	511	1,100	(589)
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
3 IPAD 2'S - THERAPY CENTER	10-29-2014	07-31-2021	0	1,068	1,068	0

Federal Supporting Statements

2021 PG02

Name(s) as shown on return

Tax ID Number

SPECIAL KIDS INC

62-1718638

FORM 4797 - PART 1

Statement #603

DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
EPSON DS-510 SCANNER	11-04-2014	07-31-2021	0	280	280	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
2 DELL OPTIPLEX 3020 COMPUTERS-DEVELOPME	11-11-2014	07-31-2021	0	1,371	1,371	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
2 DELL OPTIPLEX 3020 COMPUTERS	11-11-2014	07-31-2021	0	1,372	1,372	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
MAYTAG BI DISHWASHER	12-05-2014	12-31-2021	0	567	570	(3)
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
3 DELL XPS 12 LAPTOPS	09-12-2014	07-31-2021	0	3,829	3,831	(2)
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
2 DELL COMPUTER/TABLETS	11-11-2014	07-31-2021	0	2,446	2,446	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL INSPIRON 17 COMPUT-ACCESS CONTROL S	11-11-2014	07-31-2021	0	1,208	1,208	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
COMPUTER FOR NURSING	12-05-2014	07-31-2021	0	1,343	1,343	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL INSPIRON 17 5000 LAPTOP-NURSING DEP	01-05-2015	07-31-2021	0	4,312	4,312	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL OPTIPLEX 3020-NURSING DEPT	01-05-2015	07-31-2021	0	5,742	5,742	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL XPS 12 LAPTOP	01-05-2015	07-31-2021	0	2,428	2,428	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
DELL 17" MONITOR	01-05-2015	07-31-2021	0	960	960	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
15" LAPTOP-FAMILY SERVICES	03-09-2015	07-31-2021	0	1,139	1,139	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
14 DELL OPTIPLEX 3020 COMPUTERS-PPSN&REH	06-05-2015	07-31-2021	0	10,060	10,060	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
3 DELL INSPIRON 15 LAPTOPS	06-05-2015	07-31-2021	0	3,716	3,716	0
DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
POWEREDGE T320 SERVER	07-05-2015	07-31-2021	0	2,294	2,294	0

Federal Supporting Statements

2021 PG03

Name(s) as shown on return

Tax ID Number

SPECIAL KIDS INC

62-1718638

FORM 4797 - PART 1

Statement #603

DESCRIPTION	ACQUIRED	SOLD	SALE PRICE	DEPR.	COST/BASIS	NET
LENOVA YOGA LAPTOP-CAMPABILITY	04-15-2015	07-31-2021	0	1,028	1,028	0
SURFACE PRO 4 BUNDLE	02-01-2016	07-31-2021	0	1,899	1,899	0
DELL XPS13.3 TOUCH SCR LAPTOP-B D SPEC-A	03-03-2017	07-31-2021	0	840	1,048	(208)
EXECUTIVE OFFICE FURNITURE-2 (OF 4) PIEC	05-31-2018	12-31-2021	0	625	1,250	(625)
CONSTRUCTION IN PROGRESS	12-31-2019	12-31-2021	797	0	797	0
TOTAL			<u>797</u>	<u>101,529</u>	<u>103,947</u>	<u>(1,621)</u>

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return

SPECIAL KIDS INC

FEIN

62-1718638

ALL OTHER

Description	Amount
HALO CONTRIBUTIONS	\$ 600
PRIVATE GIFTS AND GRANTS	1,751,342
HOPE DRIVE	245,126
THE BIG PAYBACK	26,495
IMPACT RACE	18,135
GOSPEL EVENT	11,019
IMPACT OTHER	22,830
SOCIAL LIGHT	1,213
OTHER	3,971
Total:	\$ 2,080,731

GROSS INCOME FROM FUNDRAISING EVENTS

Description	Amount
FUNDRAISING EVENTS	\$ 451,980
LESS FUNDRAISING DONATIONS	(40,828)
Total:	\$ 411,152

DIRECT FUNDRAISING EXPENSES

Description	Amount
FUNDRAISING EVENTS	\$ 154,277
Total:	\$ 154,277

OTHER FEES FOR SERVICES - PROGRAM SERVICES

Description	Amount
CONSULTING	\$ 24,129
PAYROLL PROCESSING FEES	11,513
Total:	\$ 35,642

OTHER FEES FOR SERVICES - MANAGEMENT & GENERAL

Description	Amount
CONSULTING	\$ 7,800
PAYROLL PROCESSING FEES	1,414
Total:	\$ 9,214

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Overflow Statement

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Name(s) as shown on return

FEIN

SPECIAL KIDS INC

62-1718638

OFFICE EXPENSES-PROGRAM EXPENSES

<u>Description</u>	<u>Amount</u>
TELEPHONE AND INTERNET	\$ 22,799
POSTAGE	578
Total:	\$ 23,377

OFFICE EXPENSE-MANAGEMENT AND GENERAL

<u>Description</u>	<u>Amount</u>
TELEPHONE AND INTERNET	\$ 5,341
POSTAGE	500
Total:	\$ 5,841

OFFICE EXPENSE-FUNDRAISING

<u>Description</u>	<u>Amount</u>
TELEPHONE AND INTERNET	\$ 6,239
POSTAGE	1,544
Total:	\$ 7,783

OTHER EXPENSES - PROGRAM EXPENSES

<u>Description</u>	<u>Amount</u>
BANK CHARGES	\$ 3,634
LEASE EXPENSE	10,372
UNIFORMS	2,564
BAD DEBTS	382
Total:	\$ 16,952

OTHER EXPENSES - MANAGEMENT AND GENERAL

<u>Description</u>	<u>Amount</u>
BANK CHARGES	\$ 1,011
LICENSES, REGISTRATIONS AND TAXES	322
UNIFORMS	420
OTHER	350
LEASE EXPENSE	2,253
Total:	\$ 4,356

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return

SPECIAL KIDS INC

FEIN

62-1718638

OTHER EXPENSES - FUNDRAISING

Description	Amount
BANK CHARGES	\$ 5,569
WEBSITE MAINTENANCE	216
LICENSES, REGISTRATIONS AND TAXES	240
UNIFORMS	383
ENDOWMENT FUNDRAISING EXPENSE	973
LEASE EXPENSE	1,760
Total:	\$ 9,141

SCHEDULE A LINE 1 INCOME

Description	Amount
PRIVATE GIFTS AND GRANTS	\$ 1,751,342
IN KIND DONATIONS	1,909
SPECIAL EVENTS ACTIVITIES	297,046
SPECIAL EVENTS CONTRIBUTIONS	483,723
Total:	\$ 2,534,020

INVESTMENT EARNINGS

Description	Amount
INVESTMENT INCOME	\$ 49,163
REALIZED GAINS	81,034
UNREALIZED GAINS	86,759
Total:	\$ 216,956

TOTAL REVENUE PER AUDITED FINANCIAL STMTS

Description	Amount
TOTAL REVENUE AND SUPPORT	\$ 4,319,213
MISCELLANEOUS INCOME	10,268
PPP	512,732
Total:	\$ 4,842,213

OTHER REVENUES SCHEDULE D

Description	Amount
LOSS ON DISPOSAL OF EQUIPMENT	\$ 1,621
Total:	\$ 1,621

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Overflow Statement

2021

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Name(s) as shown on return

FEIN

SPECIAL KIDS INC

62-1718638

TOTAL EXPENSES PER AUDITED FINANCIAL STMTS

<u>Description</u>	<u>Amount</u>
TOTAL EXPENSES	\$ 3,147,401
LOSS ON DISPOSAL OF EQUIPMENT	1,621
Total:	\$ 3,149,022

* Item is included in UBIA
for Section 199A calculations.
See "UBIA" in lower right corner.

Depreciation Detail Listing

Program Services
(This page is not filed with the return. It is for your records only.)

2021

PAGE 1

Name(s) as shown on return

Social security number/EIN

SPECIAL KIDS INC

62-1718638

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
1	BUILDING	03011998	253,225		100.00			253,225	40	SL MM	2.5	145,509	6,331	151,840	6,331
3	50KW EMERGENCY GENERA	04262001	16,877		100.00			16,877	5		0	16,877		16,877	
4	CLIMBING WALL	05082003	1,307		100.00			1,307	5		0	1,307		1,307	
5	TREADMILL	01232004	4,905		100.00			4,905	5		0	4,905		4,905	
6	GAIT TRAINER	10082004	705		100.00			705	5		0	705		705	
8	202 ARNETTE STREET	02152007	130,987		100.00			130,987	39	SL MM	2.564	48,491	3,359	51,850	3,359
10	OFFICE FURNITURE-CHRI	05072007	400		100.00			400	5		0	400		400	
11	OFFICE RENOVATION ANN	06302008	16,232		100.00			16,232	15	SL HY	6.667	13,525	1,082	14,607	1,082
12	CRIB&ACCESSORIES	01242008	3,113		100.00			3,113	7		0	3,113		3,113	
13	PEAVEY ESCORT 2000 PO	09292008	500		100.00			500	7		0	500		500	
18	OXYGEN CONCENTRATOR	11012009	596		100.00			596	7		0	596		596	
21	46"TV&BLU RAY PLAYER	08012010	1,470		100.00			1,470	5		0	1,470		1,470	
22	RECEIVER DENON	08012010	550		100.00			550	5		0	550		550	
23	CAMERA CANON REBEL	08012010	960		100.00			960	5		0	960		960	
26	2 COMPUTERS-HP 500B-P	05312011	740		100.00			740	5		0	740		740	
27	VITAL SIGN MONITOR	08052011	2,778		100.00			2,778	5		0	2,778		2,778	
28	ANNEX ROOF	04062012	7,600		100.00			7,600	15	SL HY	6.667	4,309	507	4,816	507
29	2006 CARGO TRAILER 12	05072012	2,100		100.00			2,100	7		0	2,100		2,100	
30	WHEEL CLAMP-CARGO(CAM	05102012	321		100.00			321	7		0	321		321	
31	2 OUTSIDE GLASS DOORS	08312012	2,808		100.00			2,808	15	SL HY	6.667	1,590	187	1,777	187
32	3 HVAC UNITS	09252012	18,000		100.00			18,000	15	SL HY	6.667	10,200	1,200	11,400	1,200
33	7 DELL COMPUTERS	10312012	4,732		100.00			4,732	5		0	4,732		4,732	
35	2 PICNIC TABLES	12032012	1,000		100.00			1,000	7		0	1,000		1,000	
36	OTTOBOCK AQUANET TOIL	12112012	599		100.00			599	5		0	599		599	
37	WALKER	12142012	4,000		100.00			4,000	7		0	4,000		4,000	
38	BOLSTER SWING-OT/PT	01312013	578		100.00			578	7		0	578		578	
40	2 RIFTON TODDLER CHAI	07312013	908		100.00			908	7		0	908		908	
41	12 X 16 METAL SHED	09302013	1,000		100.00			1,000	7		0	1,000		1,000	
42	EMR SOFTWARE	11262013	13,900		100.00			13,900	5		0	13,900		13,900	
43	OFFICE EQUIPMENT AND	02212013	9,000		100.00			9,000	7		0	9,000		9,000	

* Item is included in UBIA
for Section 199A calculations.
See "UBIA" in lower right corner.

Depreciation Detail Listing

Program Services
(This page is not filed with the return. It is for your records only.)

2021

PAGE 2

Name(s) as shown on return

Social security number/EIN

SPECIAL KIDS INC

62-1718638

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
44	GAGGLE BUGGY	05022013	1,499		100.00			1,499	7		0	1,499		1,499	
45	THERAPY BED	06142013	1,000		100.00			1,000	7		0	1,000		1,000	
46	GAGGLE BUGGY (BYE-BYE)	04182014	1,978		100.00			1,978	7	SL MQ	14.286	1,875	103	1,978	103
47	OFFICE FURNITURE-ANNE	05292014	5,140		100.00			5,140	7	SL MQ	14.286	4,863	277	5,140	277
48	LAPTOP DELL INSPIRON	08072014	983		100.00			983	5		0	983		983	
50	LAPTOP DELL INSPIRON	10012014	1,208		100.00			1,208	5		0	1,208		1,208	
52	15 LESRO NEWPORT MODE	10012014	3,591		100.00			3,591	7	SL MQ	14.286	3,142	449	3,591	449
53	5 LESRO NEWPORT OVERS	10012014	1,511		100.00			1,511	5		0	1,511		1,511	
54	4 MAYLINE FLIP & NEST	10012014	2,276		100.00			2,276	7	SL MQ	14.286	1,991	285	2,276	285
55	APC BATTERY BACKUPS F	10062014	1,269		100.00			1,269	5		0	1,269		1,269	
56	4 TIERED LITERATURE R	10062014	332		100.00			332	7	SL MQ	14.286	288	44	332	44
58	EXPANDABLE BALL PIT	10082014	1,060		100.00			1,060	7	SL MQ	14.286	925	135	1,060	135
59	SPACE WALK	10082014	319		100.00			319	7	SL MQ	14.286	282	37	319	37
60	SCOOTERBOARD RAMP	10082014	364		100.00			364	7	SL MQ	14.286	319	45	364	45
61	4 PACK CUBE CHAIRS	10082014	219		100.00			219	7	SL MQ	14.286	190	29	219	29
62	3 BLACK VERTICAL FILE	10112014	1,409		100.00			1,409	7	SL MQ	14.286	1,231	178	1,409	178
64	APPLE MACBOOK PRO FOR	10172014	1,235		100.00			1,235	5		0	1,235		1,235	
65	RAINBOW ACROBAT SWING	10232014	445		100.00			445	7	SL MQ	14.286	392	53	445	53
66	LADDER WALL	10232014	414		100.00			414	7	SL MQ	14.286	361	53	414	53
67	FOLDING 4X8 2 PANEL -	10242014	305		100.00			305	7	SL MQ	14.286	269	36	305	36
68	WEPLAY WATER MOTOR LI	10282014	1,275		100.00			1,275	7	SL MQ	14.286	1,115	160	1,275	160
70	21 SIDDON BLACK CHAIR	10312014	2,556		100.00			2,556	7	SL MQ	14.286	2,236	320	2,556	320
72	COMPUTER DESK	11042014	350		100.00			350	7	SL MQ	14.286	306	44	350	44
73	FLARE CHAIR	11072014	419		100.00			419	7	SL MQ	14.286	367	52	419	52
74	FLARE LOVESEAT	11072014	539		100.00			539	7	SL MQ	14.286	472	67	539	67
75	2 SQUARE END TABLES	11072014	298		100.00			298	7	SL MQ	14.286	263	35	298	35
79	DELUXE BOLSTER SWING	12192014	756		100.00			756	7	SL MQ	14.286	662	94	756	94
80	PLATFORM SWING W/INFA	12192014	403		100.00			403	7	SL MQ	14.286	355	48	403	48
81	BUBBLE WALL PANEL	12242014	2,546		100.00			2,546	7	SL MQ	14.286	2,229	317	2,546	317
82	55" LG LED TV-THERAPY	10282014	598		100.00			598	7	SL MQ	14.286	521	77	598	77

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83	WEPLAY MOTOR SKILLS U	09092014	710		100.00			710	7	SL MQ	14.286	644	66	710	66
84	TUMBLEFORM 2 VARREL C	09112014	939		100.00			939	7	SL MQ	14.286	854	85	939	85
86	FOLDING CHILDREN'S PA	09152014	754		100.00			754	7	SL MQ	14.286	688	66	754	66
87	FOAMNASIUM PLAYGROUND	09152014	425		100.00			425	7	SL MQ	14.286	389	36	425	36
88	SMALL BENCH ADAPTIVE	09152014	369		100.00			369	7	SL MQ	14.286	338	31	369	31
89	LARGE BENCH ADAPTIVE	09152014	451		100.00			451	7	SL MQ	14.286	408	43	451	43
90	XL BENCH ADAPTIVE MAL	09152014	490		100.00			490	7	SL MQ	14.286	446	44	490	44
91	WEDGE MAT GSC DOWNHIL	09162014	1,810		100.00			1,810	7	SL MQ	14.286	1,651	159	1,810	159
92	WELCH ALLYN SURETEMP	09172014	305		100.00			305	7	SL MQ	14.286	280	25	305	25
93	2 FLAT SCREEN TV'S	09182014	1,446		100.00			1,446	7	SL MQ	14.286	1,319	127	1,446	127
94	9 5X10X4 LANDING MATS	09182014	4,226		100.00			4,226	7	SL MQ	14.286	3,850	376	4,226	376
95	10 4X8X4 LANDING MATS	09182014	3,468		100.00			3,468	7	SL MQ	14.286	3,156	312	3,468	312
96	2 4X6X4 LANDING MATS	09182014	506		100.00			506	7	SL MQ	14.286	459	47	506	47
97	DELUXE BOLSTER SWING	09182014	549		100.00			549	7	SL MQ	14.286	497	52	549	52
98	PLATFORM SWING W/INFA	09182014	293		100.00			293	7	SL MQ	14.286	268	25	293	25
99	10 SOLID OAK SINGLE P	09242014	6,949		100.00			6,949	7	SL MQ	14.286	6,330	619	6,949	619
100	BOBATH TABLE	09242014	3,285		100.00			3,285	7	SL MQ	14.286	2,990	295	3,285	295
101	SUSPENSION & HEIGHT A	09182014	950		100.00			950	7	SL MQ	14.286	867	83	950	83
102	FLYING TRAPEZE	09182014	1,225		100.00			1,225	7	SL MQ	14.286	1,116	109	1,225	109
104	OTTO BOCK BASE	04032014	3,000		100.00			3,000	7	SL MQ	14.286	2,842	158	3,000	158
105	SHED FOR ANNEX	05162014	2,500		100.00			2,500	15	SL MQ	6.667	1,106	167	1,273	167
106	OFFICE FURNITURE	09032014	2,043		100.00			2,043	7	SL MQ	14.286	1,861	182	2,043	182
107	2 STORAGE UNITS	10282014	2,280		100.00			2,280	15	SL MQ	6.667	931	152	1,083	152
110	ACCESS CONTROL SYSTEM	10302014	8,961		100.00			8,961	7	SL MQ	14.286	7,840	1,121	8,961	1,121
111	2212 EAST MAIN STREET	08292013	329,989		100.00			329,989	39	SL MM	2.564	62,047	8,461	70,508	8,461
112	THERAPY CENTER	09202014	1,052,227		100.00			1,052,227	39	SL MM	2.564	169,749	26,980	196,729	26,980
113	NISSAN NV3500 VAN (PA	07072015	30,830		100.00			30,830	5	SL MQ	20	17,187	1,975	19,162	1,975
114	AMTRYKE EXTENDER	08312015	2,000		100.00			2,000	7	SL MQ	14.286	1,537	286	1,823	286
115	POWER WHEEL CHAIR	11012015	3,000		100.00			3,000	7	SL MQ	14.286	2,199	429	2,628	429
116	MONUMENT SIGN-NURSING	02282015	3,263		100.00			3,263	5		0	3,263		3,263	

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117	VENETIAN GOLD GRANITE	08012015	892		100.00			892	7	SL MQ	14.286	683	127	810	127
118	BEDFORD MAPLE CAMEL	08022015	527		100.00			527	7	SL MQ	14.286	403	75	478	75
119	WALL BOX-EMERGENCY EX	09182015	328		100.00			328	39	SL MM	2.564	42	8	50	8
120	SMOKE DETECTORS FOR S	08042015	1,391		100.00			1,391	39	SL MM	2.564	193	36	229	36
121	LANDING MATS 5X10X4	01062015	1,230		100.00			1,230	7	SL MQ	14.286	1,034	176	1,210	176
122	FOLDING MAT 2 PANEL 4	01122015	358		100.00			358	7	SL MQ	14.286	300	51	351	51
123	MINI FRIDG-NURSING CE	01152015	452		100.00			452	7	SL MQ	14.286	382	65	447	65
124	SCHOOL SPECIALTY SPAC	01162015	1,120		100.00			1,120	7	SL MQ	14.286	940	160	1,100	160
125	SUPERACTIVE LED FIBER	01162015	1,492		100.00			1,492	7	SL MQ	14.286	1,252	213	1,465	213
126	SOMATRON BODY PILLOW	01162015	1,208		100.00			1,208	7	SL MQ	14.286	1,016	173	1,189	173
127	SOMATRON TUBBY BALL P	01162015	2,360		100.00			2,360	7	SL MQ	14.286	1,980	337	2,317	337
128	HEALTHMETER 2650KL PR	01162015	1,868		100.00			1,868	7	SL MQ	14.286	1,569	267	1,836	267
129	L&B APPLIANCE	01312015	5,940		100.00			5,940	7	SL MQ	14.286	4,988	849	5,837	849
130	PURELL TFX HAND SANIT	01032015	265		100.00			265	7	SL MQ	14.286	223	38	261	38
135	LESRO NEWPORT MODERN	01072015	2,872		100.00			2,872	7	SL MQ	14.286	2,409	410	2,819	410
136	MAYLINE COHERE FLIP&N	01072015	1,138		100.00			1,138	7	SL MQ	14.286	957	163	1,120	163
137	BULLETIN BOARDS-NURSI	01122015	499		100.00			499	7	SL MQ	14.286	417	71	488	71
138	SIDDON CHAIR-NURSING	01172015	2,100		100.00			2,100	7	SL MQ	14.286	1,763	300	2,063	300
139	TRASH CAN-10 GAL SEMI	01242015	1,960		100.00			1,960	7	SL MQ	14.286	1,645	280	1,925	280
140	FRIGIDAIR REFRIGERATO	01282015	910		100.00			910	7	SL MQ	14.286	764	130	894	130
141	42 ROYAL SEATING 14"C	02012015	1,863		100.00			1,863	7	SL MQ	14.286	1,563	266	1,829	266
142	12 ARTCOBELL 7P90 SWI	02012015	2,157		100.00			2,157	7	SL MQ	14.286	1,810	308	2,118	308
143	5 TABLES 30X72 CLASSR	02012015	893		100.00			893	7	SL MQ	14.286	752	128	880	128
144	2 TABLES 30X48 CLASSR	02012015	279		100.00			279	7	SL MQ	14.286	235	40	275	40
145	SINGLE PEDESTAL DESK-	02062015	849		100.00			849	7	SL MQ	14.286	711	121	832	121
146	EXAM TABLE-FOLD UP WA	02112015	1,172		100.00			1,172	7	SL MQ	14.286	982	167	1,149	167
147	UPTON EXPRESSO KITCHE	02132015	644		100.00			644	7	SL MQ	14.286	541	92	633	92
148	PRESCHOOL SOFA&CHAIR	02172015	998		100.00			998	7	SL MQ	14.286	840	143	983	143
149	LADY BUG HOLLOW	02232015	330		100.00			330	7	SL MQ	14.286	276	47	323	47
151	VITAL SIGN MONITOR-NU	03312015	1,591		100.00			1,591	5		0	1,591		1,591	

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152	VITAL SIGN MONITOR ST	03312015	1,591		100.00			1,591	5		0	1,591		1,591	
153	60" VIZIO TV	04302015	1,108		100.00			1,108	7	SL MQ	14.286	889	158	1,047	158
154	CANVAS PRINTS-THERAPY	04302015	1,007		100.00			1,007	7	SL MQ	14.286	810	144	954	144
158	AUTO SCRUB MACHINE-TH	08102015	2,995		100.00			2,995	7	SL MQ	14.286	2,300	428	2,728	428
159	APC100 BACKUP	11012015	322		100.00			322	5		0	322		322	
160	PLAYGROUND-OUTSIDE	12012015	116,659		100.00			116,659	7	SL MQ	14.286	85,413	16,666	102,079	16,666
161	CRAB ORCHARD STONE-SK	11302015	660		100.00			660	7	SL MQ	14.286	482	94	576	94
162	SOLAR PROJECTOR KIT B	01132015	1,414		100.00			1,414	7	SL MQ	14.286	1,187	202	1,389	202
163	UV SOLUTIONS	01132015	381		100.00			381	7	SL MQ	14.286	318	54	372	54
164	SOUND TO LIGHT PANEL	01132015	2,110		100.00			2,110	7	SL MQ	14.286	1,769	301	2,070	301
165	PORTABLE 27" BUBBLE T	01132015	405		100.00			405	7	SL MQ	14.286	341	58	399	58
166	MAXI BUBBLE TUBE	01132015	429		100.00			429	7	SL MQ	14.286	359	61	420	61
167	PRAISE BOARD-THERAPY	01282015	1,002		100.00			1,002	7	SL MQ	14.286	840	143	983	143
168	KLEINAU WALL COLLAGE-	02262015	323		100.00			323	7	SL MQ	14.286	270	46	316	46
169	TABLET CHARGING CART	04132015	645		100.00			645	7	SL MQ	14.286	518	92	610	92
171	8 IPAD MINIS-CAMPABIL	04152015	2,560		100.00			2,560	5		0	2,560		2,560	
172	12 IPAD AIR 16GB-CAMP	04152015	5,040		100.00			5,040	5		0	5,040		5,040	
173	WALL DECALS-NURSING B	06182015	805		100.00			805	7	SL MQ	14.286	647	115	762	115
174	BLACK LOVESEAT	07102015	626		100.00			626	7	SL MQ	14.286	479	89	568	89
175	BLACK ONE SEAT SECTIO	07102015	1,080		100.00			1,080	7	SL MQ	14.286	828	154	982	154
177	NURSING CENTER REMODE	02282015	344,760		100.00			344,760	39	SL MM	2.564	51,936	8,840	60,776	8,840
178	CABLING, HDMI, WALL B	01202015	4,541		100.00			4,541	7	SL MQ	14.286	3,813	649	4,462	649
179	NAME PLATES-NURSING C	06172015	1,292		100.00			1,292	7	SL MQ	14.286	1,040	185	1,225	185
180	SIGN FOR PRAISE BOARD	06262015	1,002		100.00			1,002	7	SL MQ	14.286	804	143	947	143
181	SK DIMENSIONAL LOGO-N	07022015	1,056		100.00			1,056	7	SL MQ	14.286	812	151	963	151
183	INSPIRON 14 3000 WITH	01052016	1,668		100.00			1,668	5	SL HY	20	1,503	165	1,668	165
184	SIGN-IMPACT&FAMILY DI	01252016	1,254		100.00			1,254	7	SL HY	14.286	806	179	985	179
186	BROTHER SCANNER	02162016	438		100.00			438	5	SL HY	20	396	42	438	42
187	CANON SCANNER	02162016	400		100.00			400	5	SL HY	20	360	40	400	40
188	PRIVACY SCREENS	03072016	1,194		100.00			1,194	7	SL HY	14.286	769	171	940	171

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189	DELL - XPS 18"	07152016	700		100.00			700	5	SL HY	20	630	70	700	70
190	OPTIPLEX 7040 DESKTOP	12072016	3,500		100.00			3,500	5	SL HY	20	3,150	350	3,500	350
191	PORTABLE PATIENT ELEC	12292016	3,500		100.00			3,500	7	SL HY	14.286	2,250	500	2,750	500
192	KITCHEN OFFICE JOB	09122016	3,500		100.00			3,500	39	SL MM	2.564	386	90	476	90
193	PLAYGROUND LANDSCAPIN	02222016	1,554		100.00			1,554	7	SL HY	14.286	999	222	1,221	222
194	CABINET FOR THERAPY C	10012016	1,927		100.00			1,927	7	SL HY	14.286	1,238	275	1,513	275
196	LIGHT&POLE PROJECT-PA	04302016	29,778		100.00			29,778	15	SL HY	6.667	8,932	1,985	10,917	1,985
197	4 HP 15.6 NOTEBOOKS -	01042017	1,516		100.00			1,516	5	SL HY	20	1,061	303	1,364	303
199	DELL 15.6 TOUCH NOTEB	03132017	860		100.00			860	5	SL HY	20	602	172	774	172
200	CHARITY OPEN LICENSE	04112017	624		100.00			624	5	SL HY	20	437	125	562	125
201	CHARITY OPEN LICENSE	04112017	1,352		100.00			1,352	5	SL HY	20	945	270	1,215	270
202	APPLE IPAD WITH WIFI	04272017	660		100.00			660	5	SL HY	20	462	132	594	132
203	DELL INSPIRON15.6 TOU	04272017	1,700		100.00			1,700	5	SL HY	20	1,190	340	1,530	340
204	HP 15.6 TOUCH SCR LAP	05252017	510		100.00			510	5	SL HY	20	357	102	459	102
205	LEASEHOLD IMPROVEMENT	05162017	13,800		100.00			13,800	15	SL HY	6.667	3,220	920	4,140	920
206	LIFETIME GIVING INVES	06152017	500		100.00			500	7	SL HY	14.286	249	71	320	71
207	WINDOWS 10 PRO - DEVE	10042017	482		100.00			482	5	AMT-AMT	20	312	96	408	96
208	WINDOWS 10 PRO - THER	10122017	663		100.00			663	5	AMT-AMT	20	432	133	565	133
209	ADOBE LICENSE RENEWAL	11172017	864		100.00			864	5	AMT-AMT	20	548	173	721	173
210	WINDOWS 10 PRO - THER	11242017	723		100.00			723	5	AMT-AMT	20	459	145	604	145
211	LANDSCAPING AT THERAP	11302017	1,721		100.00			1,721	7	SL HY	14.286	861	246	1,107	246
212	2 SPEED BUMPS	06302018	6,200		100.00			6,200	15	SL MQ	6.667	1,084	413	1,497	413
213	SECURITY FOR NEW STOR	07232018	150		100.00			150	15	SL MQ	6.667	24	10	34	10
214	DOOR AT THERAPY AND N	09102018	4,768		100.00			4,768	15	SL MQ	6.667	755	318	1,073	318
215	2212 LEASEHOLD IMPROV	10312018	124,496		100.00			124,496	15	SL MQ	6.667	17,637	8,300	25,937	8,300
216	DELL I3567-3919BLK IN	03062018	519		100.00			519	5	SL MQ	20	299	104	403	104
217	DELL I3567-3919BLK IN	03062018	519		100.00			519	5	SL MQ	20	299	104	403	104
218	DELL INSPIRON 3668 DE	03082018	449		100.00			449	5	SL MQ	20	259	90	349	90
219	DELL INSPIRON 3668 DE	03082018	449		100.00			449	5	SL MQ	20	259	90	349	90
220	381-404H SPORTS PLAY	02092018	2,389		100.00			2,389	7	SL MQ	14.286	981	341	1,322	341

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221	AMAZON CLOUD CAM INDO	03212018	570		100.00			570	7	SL MQ	14.286	233	81	314	81
223	MICROSOFT OFFICE LICE	12052018	1,479		100.00			1,479	5	AMT-AMT	20	617	296	913	296
224	BUILDING IMPROVEMENT	10312018	18,372		100.00			18,372	15	SL MQ	6.667	2,603	1,225	3,828	1,225
225	UNIFI AC ACCESS POINT	03142019	525		100.00			525	7	SL HY	14.286	113	75	188	75
226	UNIFI 24 PORT SWITCH	03152019	199		100.00			199	7	SL HY	14.286	42	28	70	28
227	MACBOOK PRO 13 INCH 2	04122019	1,299		100.00			1,299	5	SL HY	20	390	260	650	260
228	IPHONE 8 PLUS 256 GB	04122019	849		100.00			849	5	SL HY	20	255	170	425	170
229	INSPIRON 14 5000 2 IN	07052019	2,120		100.00			2,120	5	SL HY	20	636	424	1,060	424
230	VOSTOR 14 5390 LAPTOP	07052019	2,097		100.00			2,097	5	SL HY	20	629	419	1,048	419
231	OPTIPLEX 3060 DESKTOP	07052019	825		100.00			825	5	SL HY	20	248	165	413	165
232	LAPTOP FOR KAREN OSBO	11142019	650		100.00			650	5	SL HY	20	195	130	325	130
233	COMPUTER DESKTOP TOWE	12312019	400		100.00			400	5	SL HY	20	120	80	200	80
234	COMPUTER DESKTOP TOWE	12312019	400		100.00			400	5	SL HY	20	120	80	200	80
235	COMPUTER DESKTOP TOWE	12312019	400		100.00			400	5	SL HY	20	120	80	200	80
236	COMPUTER DESKTOP TOWE	12312019	400		100.00			400	5	SL HY	20	120	80	200	80
237	COMPUTER DESKTOP TOWE	12312019	400		100.00			400	5	SL HY	20	120	80	200	80
238	COMPUTER DESKTOP TOWE	12312019	400		100.00			400	5	SL HY	20	120	80	200	80
239	MICROPHONES, HEADPHON	03212019	1,745		100.00			1,745	7	SL HY	14.286	374	249	623	249
240	E3 ROLLER SHADES MANU	04302019	1,278		100.00			1,278	7	SL HY	14.286	274	183	457	183
241	BLINDS FOR CODY'S COR	07012019	735		100.00			735	7	SL HY	14.286	158	105	263	105
242	REFRIGERATOR AT CODY'	10072019	999		100.00			999	7	SL HY	14.286	214	143	357	143
243	EXECUTIVE DESK	12282019	500		100.00			500	7	SL HY	14.286	107	71	178	71
244	DRAIN AT NURSING CENT	10312019	7,500		100.00			7,500	15	SL HY	6.667	750	500	1,250	500
245	IT & COMMUNICATIONS W	05282019	8,601		100.00			8,601	15	SL HY	6.667	902	573	1,475	573
246	5 OUTLETS IN THERAPY	10182019	775		100.00			775	15	SL HY	6.667	78	52	130	52
247	CONTROLLER IN RECEPTI	11012019	1,278		100.00			1,278	15	SL HY	6.667	128	85	213	85
248	SECURITY SYSTEM AT CO	08282019	3,079		100.00			3,079	15	SL HY	6.667	256	205	461	205
250	ANNEX FRONT EXTERIOR	03012020	207		100.00			207	15	SL MQ	6.667	12	14	26	14
251	ANNEX EXTERIOR DOOR -	03012020	343		100.00			343	15	SL MQ	6.667	20	23	43	23
252	LANDSCAPING	10312020	1,000		100.00			1,000	15	SL MQ	6.667	8	67	75	67

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Depreciation Detail Listing

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SPECIAL KIDS INC

62-1718638

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
7	PREDATORS GRANT EQUIP	07012006	8,081		100.00			8,081	5		0	8,081		8,081	
9	TERMINAL SERVER	02072007	5,506		100.00			5,506	5		0	5,506		5,506	
15	DELL SERVERS-ARNETTE	04142009	2,401		100.00			2,401	5		0	2,401		2,401	
16	DELL COMP-TONI, ANDRE,	08192009	4,266		100.00			4,266	5		0	4,266		4,266	
17	DELL COMPUTERS	10152009	2,075		100.00			2,075	5		0	2,075		2,075	
19	SOFTWARE FOR SERVER A	03012009	370		100.00			370	5		0	370		370	
20	DELL-2LAPTOPS,3PC'S,1	07132010	5,837		100.00			5,837	5		0	5,837		5,837	
24	PROJECTOR MITSUBISHI	08012010	1,253		100.00			1,253	5		0	1,253		1,253	
25	5 DELL COMPUTERS	08192010	3,646		100.00			3,646	5		0	3,646		3,646	
34	DELL POWER EDGE 1900	01012012	2,799		100.00			2,799	5		0	2,799		2,799	
39	4 OPTIPLEX 3010 MINTO	04012013	2,527		100.00			2,527	5		0	2,527		2,527	
49	LAPTOP DELL XPS 12 FO	08072014	983		100.00			983	5		0	983		983	
51	31 LESRO NEWPORT MODE	10012014	7,421		100.00			7,421	7	SL MQ	14.28	6,493	928	7,421	928
57	PORTABLE SINK FOR CHU	10072014	5,520		100.00			5,520	7	SL MQ	14.28	4,833	493	5,326	493
63	SHED FOR SHERI'S SUPP	10162014	1,100		100.00			1,100	15	SL MQ	6.667	447	64	511	64
69	3 IPAD 2'S - THERAPY	10292014	1,068		100.00			1,068	5		0	1,068		1,068	
71	EPSON DS-510 SCANNER	11042014	280		100.00			280	5		0	280		280	
76	2 DELL OPTIPLEX 3020	11112014	1,371		100.00			1,371	5		0	1,371		1,371	
77	2 DELL OPTIPLEX 3020	11112014	1,372		100.00			1,372	5		0	1,372		1,372	
78	MAYTAG BI DISHWASHER	12052014	570		100.00			570	7	SL MQ	14.28	496	71	567	71
85	3 DELL XPS 12 LAPTOPS	09122014	3,831		100.00			3,831	7	SL MQ	14.28	3,487	342	3,829	342
103	2 DELL COMPUTER/TABLE	11112014	2,446		100.00			2,446	5		0	2,446		2,446	
108	DELL INSPIRON 17 COMP	11112014	1,208		100.00			1,208	5		0	1,208		1,208	
109	COMPUTER FOR NURSING	12052014	1,343		100.00			1,343	5		0	1,343		1,343	
131	DELL INSPIRON 17 5000	01052015	4,312		100.00			4,312	5		0	4,312		4,312	
132	DELL OPTIPLEX 3020-NU	01052015	5,742		100.00			5,742	5		0	5,742		5,742	
133	DELL XPS 12 LAPTOP	01052015	2,428		100.00			2,428	5		0	2,428		2,428	
134	DELL 17" MONITOR	01052015	960		100.00			960	5		0	960		960	
150	15" LAPTOP-FAMILY SER	03092015	1,139		100.00			1,139	5		0	1,139		1,139	
155	14 DELL OPTIPLEX 3020	06052015	10,060		100.00			10,060	5		0	10,060		10,060	

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Depreciation Detail Listing

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SPECIAL KIDS INC

62-1718638

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
156	DELL INSPIRON 15 LA	06052015	3,716		100.00			3,716	5		0	3,716		3,716	
157	POWEREDGE T320 SERVER	07052015	2,294		100.00			2,294	5		0	2,294		2,294	
170	LENOVA YOGA LAPTOP-CA	04152015	1,028		100.00			1,028	5		0	1,028		1,028	
185	SURFACE PRO 4 BUNDLE	02012016	1,899		100.00			1,899	5	SL HY	20	1,710	189	1,899	189
198	DELL XPS13.3 TOUCH SC	03032017	1,048		100.00			1,048	5	SL HY	20	735	105	840	105
222	EXECUTIVE OFFICE FURN	05312018	1,250		100.00			1,250	7	SL MQ	14.28	469	156	625	156
249	CONSTRUCTION IN PROGR	12312019	797	797	100.00			0	0		0				
265	CIP - PARKING EXPANSI	12312020	7,103	7,103	100.00			0	0		0				
Totals			3,314,270					3,306,369				992,875	133,351	1,126,226	133,351

Land Amount
Net Depreciable Cost

3,314,270

CY 179 and CY Bonus
TOTAL CY Depr including 179/bonus

133,351

ST ADJ:

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Depreciation Detail Listing

Management & General
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SPECIAL KIDS INC

62-1718638

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
2	LAND	01011997	35,404	35,404	100.00			0 0			0				
14	LAND 202 ARNETTE STRE	02152007	84,000	84,000	100.00			0 0			0				
176	LAND 2220 E MAIN ST	06152015	71,790	71,790	100.00			0 0			0				
182	LAND 2208 E MAIN ST	09302013	147,396	147,396	100.00			0 0			0				
195	2220 E MAIN ST - RAZI	04142016	19,750	19,750	100.00			0 0			0				
Totals			358,340												

Land Amount
Net Depreciable Cost

358,340

CY 179 and CY Bonus
TOTAL CY Depr including 179/bonus

ST ADJ:

Depreciation Reconciliation for SPECIAL KIDS INC

	Cost	Basis	Current Depreciation	Accumulated Depreciation	Bonus Depreciation
Beginning of Year	3,348,984	2,982,743	129,597	1,122,472	
Placed in Service in Current Year	323,626	323,626	3,754	3,754	
Removed from Service in Current Year	111,050	103,150	2,348	101,529	
End of Year	3,561,560	3,203,219	131,003	1,024,697	

Next Year's Depreciation Worksheet

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SPECIAL KIDS INC

62-1718638

Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	BUILDING	03-01-1998	253,225	SL	40	6,331
MGT	1	LAND	01-01-1997		NDA	0	
PRG	1	50KW EMERGENCY GENERATOR	04-26-2001	16,877	SL	5	
PRG	1	CLIMBING WALL	05-08-2003	1,307	SL	5	
PRG	1	TREADMILL	01-23-2004	4,905	SL	5	
PRG	1	GAIT TRAINER	10-08-2004	705	SL	5	
PRG	1	202 ARNETTE STREET	02-15-2007	130,987	M	39	3,359
PRG	1	OFFICE FURNITURE-CHRIS	05-07-2007	400	M	5	
PRG	1	OFFICE RENOVATION ANNEX(06-30-2008	16,232	SL	15	1,082
PRG	1	CRIB&ACCESSORIES	01-24-2008	3,113	SL	7	
PRG	1	PEAVEY ESCORT 2000 PORTA	09-29-2008	500	SL	7	
MGT	1	LAND 202 ARNETTE STREET	02-15-2007		NDA	0	
PRG	1	OXYGEN CONCENTRATOR	11-01-2009	596	SL	7	
PRG	1	46"TV&BLU RAY PLAYER	08-01-2010	1,470	SL	5	
PRG	1	RECEIVER DENON	08-01-2010	550	SL	5	
PRG	1	CAMERA CANON REBEL	08-01-2010	960	SL	5	
PRG	1	2 COMPUTERS-HP 500B-P E5	05-31-2011	740	SL	5	
PRG	1	VITAL SIGN MONITOR	08-05-2011	2,778	SL	5	
PRG	1	ANNEX ROOF	04-06-2012	7,600	SL	15	507
PRG	1	2006 CARGO TRAILER 12X5	05-07-2012	2,100	SL	7	
PRG	1	WHEEL CLAMP-CARGO(CAMPAB	05-10-2012	321	SL	7	
PRG	1	2 OUTSIDE GLASS DOORS-ST	08-31-2012	2,808	SL	15	187
PRG	1	3 HVAC UNITS	09-25-2012	18,000	SL	15	1,200
PRG	1	7 DELL COMPUTERS	10-31-2012	4,732	SL	5	
PRG	1	2 PICNIC TABLES	12-03-2012	1,000	SL	7	
PRG	1	OTTOBOCK AQUANET TOILET	12-11-2012	599	SL	5	
PRG	1	WALKER	12-14-2012	4,000	SL	7	
PRG	1	BOLSTER SWING-OT/PT	01-31-2013	578	SL	7	
PRG	1	2 RIFTON TODDLER CHAIRS	07-31-2013	908	SL	7	
PRG	1	12 X 16 METAL SHED	09-30-2013	1,000	SL	7	
PRG	1	EMR SOFTWARE	11-26-2013	13,900	SL	5	
PRG	1	OFFICE EQUIPMENT AND FUR	02-21-2013	9,000	SL	7	
PRG	1	GAGGLE BUGGY	05-02-2013	1,499	SL	7	
PRG	1	THERAPY BED	06-14-2013	1,000	SL	7	
PRG	1	GAGGLE BUGGY (BYE-BYE BU	04-18-2014	1,978	SL	7	
PRG	1	OFFICE FURNITURE-ANNEX	05-29-2014	5,140	SL	7	
PRG	1	LAPTOP DELL INSPIRON 17	08-07-2014	983	SL	5	
PRG	1	LAPTOP DELL INSPIRON 17	10-01-2014	1,208	SL	5	
PRG	1	15 LESRO NEWPORT MODERN	10-01-2014	3,591	SL	7	
PRG	1	5 LESRO NEWPORT OVERSIZE	10-01-2014	1,511	SL	5	
PRG	1	4 MAYLINE FLIP & NEST TR	10-01-2014	2,276	SL	7	
PRG	1	APC BATTERY BACKUPS FOR	10-06-2014	1,269	SL	5	
PRG	1	4 TIERED LITERATURE RACK	10-06-2014	332	SL	7	
PRG	1	EXPANDABLE BALL PIT	10-08-2014	1,060	SL	7	
PRG	1	SPACE WALK	10-08-2014	319	SL	7	
PRG	1	SCOOTERBOARD RAMP	10-08-2014	364	SL	7	
PRG	1	4 PACK CUBE CHAIRS	10-08-2014	219	SL	7	
PRG	1	3 BLACK VERTICAL FILE CA	10-11-2014	1,409	SL	7	
PRG	1	APPLE MACBOOK PRO FOR DE	10-17-2014	1,235	SL	5	
PRG	1	RAINBOW ACROBAT SWING	10-23-2014	445	SL	7	
PRG	1	LADDER WALL	10-23-2014	414	SL	7	
PRG	1	FOLDING 4X8 2 PANEL - RO	10-24-2014	305	SL	7	

Next Year's Depreciation Worksheet

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Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	WEPLAY WATER MOTOR LILY	10-28-2014	1,275	SL	7	
PRG	1	21 SIDDON BLACK CHAIRS	10-31-2014	2,556	SL	7	
PRG	1	COMPUTER DESK	11-04-2014	350	SL	7	
PRG	1	FLARE CHAIR	11-07-2014	419	SL	7	
PRG	1	FLARE LOVESEAT	11-07-2014	539	SL	7	
PRG	1	2 SQUARE END TABLES	11-07-2014	298	SL	7	
PRG	1	DELUXE BOLSTER SWING	12-19-2014	756	SL	7	
PRG	1	PLATFORM SWING W/INFANT	12-19-2014	403	SL	7	
PRG	1	BUBBLE WALL PANEL	12-24-2014	2,546	SL	7	
PRG	1	55" LG LED TV-THERAPY CE	10-28-2014	598	SL	7	
PRG	1	WEPLAY MOTOR SKILLS UNIV	09-09-2014	710	SL	7	
PRG	1	TUMBLEFORM 2 VARREL CRAW	09-11-2014	939	SL	7	
PRG	1	FOLDING CHILDREN'S PARAL	09-15-2014	754	SL	7	
PRG	1	FOAMNASIUM PLAYGROUND	09-15-2014	425	SL	7	
PRG	1	SMALL BENCH ADAPTIVE MAL	09-15-2014	369	SL	7	
PRG	1	LARGE BENCH ADAPTIVE MAL	09-15-2014	451	SL	7	
PRG	1	XL BENCH ADAPTIVE MALL K	09-15-2014	490	SL	7	
PRG	1	WEDGE MAT GSC DOWNHILL M	09-16-2014	1,810	SL	7	
PRG	1	WELCH ALLYN SURETEMP PLU	09-17-2014	305	SL	7	
PRG	1	2 FLAT SCREEN TV'S	09-18-2014	1,446	SL	7	
PRG	1	9 5X10X4 LANDING MATS	09-18-2014	4,226	SL	7	
PRG	1	10 4X8X4 LANDING MATS	09-18-2014	3,468	SL	7	
PRG	1	2 4X6X4 LANDING MATS	09-18-2014	506	SL	7	
PRG	1	DELUXE BOLSTER SWING	09-18-2014	549	SL	7	
PRG	1	PLATFORM SWING W/INFANT	09-18-2014	293	SL	7	
PRG	1	10 SOLID OAK SINGLE PEDE	09-24-2014	6,949	SL	7	
PRG	1	BOBATH TABLE	09-24-2014	3,285	SL	7	
PRG	1	SUSPENSION & HEIGHT ADJU	09-18-2014	950	SL	7	
PRG	1	FLYING TRAPEZE	09-18-2014	1,225	SL	7	
PRG	1	OTTO BOCK BASE	04-03-2014	3,000	SL	7	
PRG	1	SHED FOR ANNEX	05-16-2014	2,500	SL	15	167
PRG	1	OFFICE FURNITURE	09-03-2014	2,043	SL	7	
PRG	1	2 STORAGE UNITS	10-28-2014	2,280	SL	15	152
PRG	1	ACCESS CONTROL SYSTEM	10-30-2014	8,961	SL	7	
PRG	1	2212 EAST MAIN STREET	08-29-2013	329,989	SL	39	8,461
PRG	1	THERAPY CENTER	09-20-2014	1,052,227	SL	39	26,980
PRG	1	NISSAN NV3500 VAN (PASSE	07-07-2015	30,830	SL	5	1,975
PRG	1	AMTRYKE EXTENDER	08-31-2015	2,000	SL	7	177
PRG	1	POWER WHEEL CHAIR	11-01-2015	3,000	SL	7	372
PRG	1	MONUMENT SIGN-NURSING CE	02-28-2015	3,263	SL	5	
PRG	1	VENETIAN GOLD GRANITE DE	08-01-2015	892	SL	7	82
PRG	1	BEDFORD MAPLE CAMEL AR	08-02-2015	527	SL	7	49
PRG	1	WALL BOX-EMERGENCY EXIT	09-18-2015	328	SL	39	8
PRG	1	SMOKE DETECTORS FOR SECU	08-04-2015	1,391	SL	39	36
PRG	1	LANDING MATS 5X10X4	01-06-2015	1,230	SL	7	20
PRG	1	FOLDING MAT 2 PANEL 4X8	01-12-2015	358	SL	7	7
PRG	1	MINI FRIDG-NURSING CENTE	01-15-2015	452	SL	7	5
PRG	1	SCHOOL SPECIALTY SPACE R	01-16-2015	1,120	SL	7	20
PRG	1	SUPERACTIVE LED FIBER OP	01-16-2015	1,492	SL	7	27
PRG	1	SOMATRON BODY PILLOW	01-16-2015	1,208	SL	7	19
PRG	1	SOMATRON TUBBY BALL POOL	01-16-2015	2,360	SL	7	43
PRG	1	HEALTHMETER 2650KL PROPL	01-16-2015	1,868	SL	7	32

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PRG	1	L&B APPLIANCE	01-31-2015	5,940	SL	7	103
PRG	1	PURELL TFX HAND SANITIZE	01-03-2015	265	SL	7	4
PRG	1	LESRO NEWPORT MODERN CHA	01-07-2015	2,872	SL	7	53
PRG	1	MAYLINE COHERE FLIP&NES	01-07-2015	1,138	SL	7	18
PRG	1	BULLETIN BOARDS-NURSING	01-12-2015	499	SL	7	11
PRG	1	SIDDON CHAIR-NURSING CEN	01-17-2015	2,100	SL	7	37
PRG	1	TRASH CAN-10 GAL SEMI RO	01-24-2015	1,960	SL	7	35
PRG	1	FRIGIDAIR REFRIGERATOR 2	01-28-2015	910	SL	7	16
PRG	1	42 ROYAL SEATING 14"CHAI	02-01-2015	1,863	SL	7	34
PRG	1	12 ARTCOBELL 7P90 SWIV P	02-01-2015	2,157	SL	7	39
PRG	1	5 TABLES 30X72 CLASSRM S	02-01-2015	893	SL	7	13
PRG	1	2 TABLES 30X48 CLASSRM S	02-01-2015	279	SL	7	4
PRG	1	SINGLE PEDESTAL DESK-SOL	02-06-2015	849	SL	7	17
PRG	1	EXAM TABLE-FOLD UP WALL	02-11-2015	1,172	SL	7	23
PRG	1	UPTON EXPRESSO KITCHEN	02-13-2015	644	SL	7	11
PRG	1	PRESCHOOL SOFA&CHAIR SET	02-17-2015	998	SL	7	15
PRG	1	LADY BUG HOLLOW	02-23-2015	330	SL	7	7
PRG	1	VITAL SIGN MONITOR-NURSI	03-31-2015	1,591	SL	5	
PRG	1	VITAL SIGN MONITOR STAND	03-31-2015	1,591	SL	5	
PRG	1	60" VIZIO TV	04-30-2015	1,108	SL	7	61
PRG	1	CANVAS PRINTS-THERAPY CE	04-30-2015	1,007	SL	7	53
PRG	1	AUTO SCRUB MACHINE-THERA	08-10-2015	2,995	SL	7	267
PRG	1	APC100 BACKUP	11-01-2015	322	SL	5	
PRG	1	PLAYGROUND-OUTSIDE	12-01-2015	116,659	SL	7	14,580
PRG	1	CRAB ORCHARD STONE-SK ME	11-30-2015	660	SL	7	84
PRG	1	SOLAR PROJECTOR KIT B	01-13-2015	1,414	SL	7	25
PRG	1	UV SOLUTIONS	01-13-2015	381	SL	7	9
PRG	1	SOUND TO LIGHT PANEL	01-13-2015	2,110	SL	7	40
PRG	1	PORTABLE 27" BUBBLE TUBE	01-13-2015	405	SL	7	6
PRG	1	MAXI BUBBLE TUBE	01-13-2015	429	SL	7	9
PRG	1	PRAISE BOARD-THERAPY CEN	01-28-2015	1,002	SL	7	19
PRG	1	KLEINAU WALL COLLAGE-THE	02-26-2015	323	SL	7	7
PRG	1	TABLET CHARGING CART	04-13-2015	645	SL	7	35
PRG	1	8 IPAD MINIS-CAMPABILITY	04-15-2015	2,560	SL	5	
PRG	1	12 IPAD AIR 16GB-CAMPABI	04-15-2015	5,040	SL	5	
PRG	1	WALL DECALS-NURSING BLDG	06-18-2015	805	SL	7	43
PRG	1	BLACK LOVESEAT	07-10-2015	626	SL	7	58
PRG	1	BLACK ONE SEAT SECTION F	07-10-2015	1,080	SL	7	98
MGT	1	LAND 2220 E MAIN ST	06-15-2015		NDA	0	
PRG	1	NURSING CENTER REMODEL	02-28-2015	344,760	SL	39	8,840
PRG	1	CABLING, HDMI, WALL BRAC	01-20-2015	4,541	SL	7	79
PRG	1	NAME PLATES-NURSING CENT	06-17-2015	1,292	SL	7	67
PRG	1	SIGN FOR PRAISE BOARD	06-26-2015	1,002	SL	7	55
PRG	1	SK DIMENSIONAL LOGO-NURS	07-02-2015	1,056	SL	7	93
MGT	1	LAND 2208 E MAIN ST	09-30-2013		NDA	0	
PRG	1	INSPIRON 14 3000 WITH DU	01-05-2016	1,668	SL	5	
PRG	1	SIGN-IMPACT&FAMILY DISPL	01-25-2016	1,254	SL	7	179
PRG	1	BROTHER SCANNER	02-16-2016	438	SL	5	
PRG	1	CANON SCANNER	02-16-2016	400	SL	5	
PRG	1	PRIVACY SCREENS	03-07-2016	1,194	SL	7	171
PRG	1	DELL - XPS 18"	07-15-2016	700	SL	5	
PRG	1	OPTIPLEX 7040 DESKTOPS	12-07-2016	3,500	SL	5	

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Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	PORTABLE PATIENT ELECTRI	12-29-2016	3,500	SL	7	500
PRG	1	KITCHEN OFFICE JOB	09-12-2016	3,500	SL	39	90
PRG	1	PLAYGROUND LANDSCAPING	02-22-2016	1,554	SL	7	222
PRG	1	CABINET FOR THERAPY CENT	10-01-2016	1,927	SL	7	275
MGT	1	2220 E MAIN ST - RAZING	04-14-2016		NDA	0	
PRG	1	LIGHT&POLE PROJECT-PARKI	04-30-2016	29,778	SL	15	1,985
PRG	1	4 HP 15.6 NOTEBOOKS - DE	01-04-2017	1,516	SL	5	152
PRG	1	DELL 15.6 TOUCH NOTEBOOK	03-13-2017	860	SL	5	86
PRG	1	CHARITY OPEN LICENSE EXC	04-11-2017	624	SL	5	62
PRG	1	CHARITY OPEN LICENSE WIN	04-11-2017	1,352	SL	5	137
PRG	1	APPLE IPAD WITH WIFI 32G	04-27-2017	660	SL	5	66
PRG	1	DELL INSPIRON15.6 TOUCH	04-27-2017	1,700	SL	5	170
PRG	1	HP 15.6 TOUCH SCR LAPTOP	05-25-2017	510	SL	5	51
PRG	1	LEASEHOLD IMPROVEMENT -	05-16-2017	13,800	SL	15	920
PRG	1	LIFETIME GIVING INVEST.M	06-15-2017	500	SL	7	71
PRG	1	WINDOWS 10 PRO - DEVELOP	10-04-2017	482	AMT	5	74
PRG	1	WINDOWS 10 PRO - THERAPY	10-12-2017	663	AMT	5	98
PRG	1	ADOBE LICENSE RENEWAL -	11-17-2017	864	AMT	5	143
PRG	1	WINDOWS 10 PRO - THER,NU	11-24-2017	723	AMT	5	119
PRG	1	LANDSCAPING AT THERAPY C	11-30-2017	1,721	SL	7	246
PRG	1	2 SPEED BUMPS	06-30-2018	6,200	SL	15	413
PRG	1	SECURITY FOR NEW STORE F	07-23-2018	150	SL	15	10
PRG	1	DOOR AT THERAPY AND NURS	09-10-2018	4,768	SL	15	318
PRG	1	2212 LEASEHOLD IMPROVEME	10-31-2018	124,496	SL	15	8,300
PRG	1	DELL I3567-3919BLK INSPI	03-06-2018	519	SL	5	104
PRG	1	DELL I3567-3919BLK INSPI	03-06-2018	519	SL	5	104
PRG	1	DELL INSPIRON 3668 DESKT	03-08-2018	449	SL	5	90
PRG	1	DELL INSPIRON 3668 DESKT	03-08-2018	449	SL	5	90
PRG	1	381-404H SPORTS PLAY WHE	02-09-2018	2,389	SL	7	341
PRG	1	AMAZON CLOUD CAM INDOOR	03-21-2018	570	SL	7	81
PRG	1	MICROSOFT OFFICE LICENSE	12-05-2018	1,479	AMT	5	296
PRG	1	BUILDING IMPROVEMENT	10-31-2018	18,372	SL	15	1,225
PRG	1	UNIFI AC ACCESS POINT 4	03-14-2019	525	SL	7	75
PRG	1	UNIFI 24 PORT SWITCH	03-15-2019	199	SL	7	28
PRG	1	MACBOOK PRO 13 INCH 2.3	04-12-2019	1,299	SL	5	260
PRG	1	IPHONE 8 PLUS 256 GB	04-12-2019	849	SL	5	170
PRG	1	INSPIRON 14 5000 2 IN 1	07-05-2019	2,120	SL	5	424
PRG	1	VOSTOR 14 5390 LAPTOP	07-05-2019	2,097	SL	5	419
PRG	1	OPTIPLEX 3060 DESKTOP W/	07-05-2019	825	SL	5	165
PRG	1	LAPTOP FOR KAREN OSBORNE	11-14-2019	650	SL	5	130
PRG	1	COMPUTER DESKTOP TOWER	12-31-2019	400	SL	5	80
PRG	1	COMPUTER DESKTOP TOWER	12-31-2019	400	SL	5	80
PRG	1	COMPUTER DESKTOP TOWER	12-31-2019	400	SL	5	80
PRG	1	COMPUTER DESKTOP TOWER	12-31-2019	400	SL	5	80
PRG	1	COMPUTER DESKTOP TOWER	12-31-2019	400	SL	5	80
PRG	1	COMPUTER DESKTOP TOWER	12-31-2019	400	SL	5	80
PRG	1	MICROPHONES, HEADPHONES,	03-21-2019	1,745	SL	7	249
PRG	1	E3 ROLLER SHADES MANUAL	04-30-2019	1,278	SL	7	183
PRG	1	BLINDS FOR CODY'S CORNER	07-01-2019	735	SL	7	105
PRG	1	REFRIGERATOR AT CODY'S C	10-07-2019	999	SL	7	143
PRG	1	EXECUTIVE DESK	12-28-2019	500	SL	7	71
PRG	1	DRAIN AT NURSING CENTER	10-31-2019	7,500	SL	15	500

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PRG	1	IT & COMMUNICATIONS WORK	05-28-2019	8,601	SL	15	573
PRG	1	5 OUTLETS IN THERAPY CEN	10-18-2019	775	SL	15	52
PRG	1	CONTROLLER IN RECEPTIONI	11-01-2019	1,278	SL	15	85
PRG	1	SECURITY SYSTEM AT CODY'	08-28-2019	3,079	SL	15	205
PRG	1	ANNEX FRONT EXTERIOR DOO	03-01-2020	207	SL	15	14
PRG	1	ANNEX EXTERIOR DOOR - JA	03-01-2020	343	SL	15	23
PRG	1	LANDSCAPING	10-31-2020	1,000	SL	15	67
PRG	1	SECURITY SYSTEM	10-31-2020	3,290	SL	7	470
PRG	1	MICROSOFT SURFACE PRO 7-	08-24-2020	2,100	SL	5	420
PRG	1	DELL LATITUDE 3510 - THE	08-24-2020	7,281	SL	5	1,456
PRG	1	MERAKI MR33 WIRLESS ACCE	10-21-2020	21,430	SL	5	4,286
PRG	1	DELL LATITUDE 3510 LAPTO	10-22-2020	811	SL	5	162
PRG	1	7 DELL LATITUDE 3510 LAP	10-22-2020	7,300	SL	5	1,460
PRG	1	7 DELL LATITUDE 3510 LAP	10-27-2020	7,300	SL	5	1,460
PRG	1	13 INCH MACBOOK PRO	11-02-2020	1,299	SL	5	260
PRG	1	13 INCH MACBOOK PRO	11-02-2020	1,299	SL	5	260
PRG	1	MINDRAY	01-29-2020	2,301	SL	5	460
PRG	1	CAT MICROMINI WALKBEHIND	10-13-2020	5,235	SL	7	748
PRG	1	ELECTRIC DRYER WHITE 7.2	12-02-2020	622	SL	7	89
PRG	1	GULDMAN FREE STANDING RA	09-07-2021	13,555	SL	7	1,936
PRG	1	BOSCH 800 SERIES TOP CON	09-10-2021	1,442	SL	7	206
PRG	1	HOSPITAL BED	09-30-2021	910	SL	7	130
PRG	1	FRIGIDAIRE 13.9 CU FT TO	11-17-2021	579	SL	7	83
PRG	1	LARGE RIFTON CHAIR & ACC	12-29-2021	1,957	SL	7	280
PRG	1	KOHLER COMFORT HEIGHT TO	10-15-2021	800	SL	7	114
PRG	1	KOHLER COMFORT HEIGHT TO	10-15-2021	800	SL	7	114
PRG	1	INDI DYNVOX DEVICE CLAS	08-31-2021	999	SL	5	200
PRG	1	OPTIPLEX 3080 SFF BTX CO	10-05-2021	1,391	SL	5	278
PRG	1	EIGHT 10.2" IPADS 64GB	12-14-2021	2,632	SL	5	526
PRG	1	EIGHT 10.2" IPADS 64GB	12-14-2021	2,632	SL	5	526
PRG	1	4 DELL LATITUDE 3520 BTX	12-31-2021	4,865	SL	5	973
PRG	1	DELL LATITUDE 3520 BTX C	12-31-2021	1,216	SL	5	243
PRG	1	DELL LATITUDE 3520 BTX C	12-31-2021	1,216	SL	5	243
PRG	1	PARKING LOT-2202 E MAIN	12-31-2021	288,632	SL	15	19,242
PRG	1	EXECUTIVE OFFICE FURNITU	05-31-2018	1,250	SL	7	179
PRG	1	10(OFF 41)LESRO NEWPORT M	10-01-2014	2,394	SL	7	
		TOTAL					134,680