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8016205555 P 4/18

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary information - (See separate Instructions.)

Must be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1645-0047 2006

Department of the Treasury Internal Revenue Service

(Form 990 or 980-EZ)

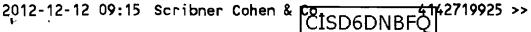
SCHEDULE A

Name of the organization					Employer	Mondification number
SPECIAL SPACES INC						641574
Port! Compensation of the Five Highe	st Paid Employe	es Otl	ner Than Off	icers, Direc	tors, a	nd Trustees
(See page 2 of the instructions. List e	1		e, enter "None		one to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title and average her week devoted to po	oura osition	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation		acconnt and other
MONE						
Total number of other employees paid over \$50,000 >						
Part II-A Compensation of the Five Highe (See page 2 of the instructions. List of	st Paid Independence each one (whether	dent C	ontractors fuals or firms).	or Professi If there are	onal Se	ervices nter "None.")
(a) Name and address of each independent contractor paid		1	(b) Type of ser			Compensation
NONE						
		ļ				
		-				
						·
Total number of others rocalving over \$50,000 for						
professional services		L		<u></u>		
Part II-B Compensation of the Five Higho (List each contractor who performed firms. If there are none, enter "None.	services other tha	n profe	ssional servic	or Other Se es, whether i	ndividus	als or
(a) Name and address of each independent contractor pold ((b) Type of ser	nco	(c)	Compensation
NONE						
Total number of Other contractors receiving over	· · · · · · · · · · · · · · · · · · ·					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 900-EZ.

Schodule A (Form 990 or 990-EZ) 2006

\$50,000 for other beryicas



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Schodula A (Form 890 or 990-62) 2006 Statements About Activities (See page 2 of the instructions.) Part III No Yes During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities > \$ (Must oqual amounts on line 38, Part VI-A, or line I of Part VI-B.) Organizations that made an election under section 501(h) by filling Form 5768 must complete Part VI-A. Other organizations chocking "Yos" must complete Part VI-8 AND attach a statement giving a detailed description of the lobbying activities. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal bonoficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) X X_ X. 2 d X_ 20 X_ Did the organization make grants for scholarships, fellowships, student toans, etc.? (If "Yes," attach an explanation 33 X_ 3Ь c. Did the organization receive or hold an easement for conservation purposes, including easements to prosorvo opon 3 c X d Did the organization provide credit counseling, debt management, credit repair, or dobt nogotiation sorticos? 34 X. 4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete 4 2 X o Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of g Enfor the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year 0.00

Schodulo A (Form 990 or 900-E2) 2005

012-12-12 09:15 Scribner Cohen Schodule A (Form 900 or 000-EZ) 2006	& Co CISD6D	NBFQ 414271992	5 >>	3016205555	P 6/18
Part IV Reason for Non-Private Fo	undation Statu	is (See pages 4 thro	ough 7 of the insti	ructions.)	
I cortify that the organization is not a private foundat	on because it is: (Ple	ase check only ONE appli	cable box.)		
6 A church, convention of churches, or ass	ociation of churches.	Section 170(b)(1)(A)(i).			
6 A school. Section 170(b)(1)(A)(ii). (Also co	omplete Part V.)				
7 A hospital or a cooperative hospital service	ce organization. Secti	on 170(b)(1)(A)(iii).			
8 A federal, state, or local govornment or g	ovornmental unit. See	ation 170(b)(1)(A)(v).			
9 A medical research organization operated and state	I in conjunction with	a hospital. Section 170(b)	(1)(A)(III), Entor tho h	iospilats namo, ci	ty,
10 An organization operated for the benefit of Also complete the Support Schodulo in P		sity owned or operated b	y a governmental unit.	Section 170(b)(1)(,A)(ıv).
An organization that normally roccives a 170(b)(1)(A)(vi). (Also complete the Supplemental Complete Complete the Supplemental Complete Comp		• •	nmon(a) unit or from	the general publi	c. Section
11b A community trust. Socilon 170(b)(1)(A)(vi), (Also complate the	Support Schodulo in Pa	on IV-A)		
An organization that normally receives: (1 from activities related to its charitable, o from gross investment income and unby the organization after June 30, 1975.	ta., functions - subje related business tax	ect to cortain exceptions, while income (less sect	and (2) no more th ion 511 lax) from t	an 33 1/3% of i	its support
An organization that is not controlled the requirements of section 509(a)(3), Ch			_	jers) and othorwi	lso moots
Type ! Typo !!	Type III - Fur	ectionally intograted	Type III - Other		
Provide the following information	about the supported	organizations. (Soo page	7 of the instructions.)	
(a) Name(s) of supported organization(s)	(b) Employor Identification number (EIN)	(c) Typo of organization (dosoribod in lines 5 through 12	(d) is the supports organization lists the supports organization's	edin e	(o) nount of upport

Namo(s) of supported organization(s)	Employor Identification number (EIN)	Typo of organization (described in lines 5 through 12 above or IRC section)	is the si organizati	on listed in porting tation's	Amount of support
			Yes	No	
	<u> </u>				
		l	l		
					_
o <u>tal</u>				▶	

An organization organized and operated to test for public safety, Section 509(a)(4), (See page 7 of the instructions.) Schedule A (Form 930 or 990-EZ) 2006

/	10
	Page

	int IV-A Support Schedule (Complete only it to: You may use the worksheet in the instruction	•	•			g.
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(o) Total
	Gifts, grants, and contributions received. (Do					
	not includo unusual grants. See line 28.)	70 329 00	NONE	_NONE	NONE	70,329.00
16	Momborship fees received	707525.00			1,0,1,0	
	Gross receipts from admissions, morchandise					
	sold or services performed, or furnishing of					
	facilities in any activity that is related to the					
	organization's charitable, etc., purpose , , , .					
19	Gross income from Interest, dividends.					
	amounts received from payments on securities					
	loans (section 512(a)(5)), rents, royalties, and	,				
	unrelated business taxable income (less					
	section 511 taxos) from businesses acquired					
	by the organization after June 30, 1975					
19	Net income from unrelated business					
•••	activities not included in line 18					
20	Tax revenues levied for the organization's			· · · · · · · · · · · · · · · · · · ·		
	benefit and either paid to it or expended on				1	
	Its bohalf					
21						
2 '	the organization by a governmental unit			j		
	without charge. Do not include the value of					
	services or facilities generally furnished to the					
	public without charge					
22	Other Income. Attach a schedule. Do not					
	include gain or (loss) from sale of capital assets		:	,		
23	Total of lines 15 through 22	70,329.00				70,329.00
24	Line 23 minus line 17.					70,329.00
25	Enter 1% of line 23	703.29				707525.00
26					265	
	Prepare a list for your records to show the r					
-	governmental unit or publicly supported organi					
	amount shown in line 26a. Do not file this the					
6	Total support for soction 509(a)(1) test. Enter line 24					70,329.00
4	Add. Amounts from column (e) for linos: 18	19				
_	22	26			▶ 260	1
٥	Public support (line 26c minus line 26d total)					70_329.00
ſ	Public support percentage (line 26e (numerator) d	ivided by line 26c (de	nominatori)		▶ 261	100.0000%
27	Organizations described on line 12: a For	amounts included	in linos 15, 1	6, and 17 that	word received fro	m a "diaqualified
	person," prepare a list for your records to she Do not file this list with your return. Enter the sum	w the name of, a	and total amounts	received in each	yoar from, each "d	isqualified person "
	Do not mo the total your rotal in Cities the Zam	or such amounts for	cuerr year.			
	(2005) 0,00 (2004)	N	/A (2003)	7	N/A (2002)	n/a
ь	For any amount included in line 17 that was re					
	show the name of, and amount received for each	yoar, that was mo	re than the larger	of (1) the amount	on line 25 for the y	car or (2) \$5,000.
	(Include in the list organizations described in lines					
	the difference between the amount received and amounts) for each year:	o ine larger amout	n oosenboa in (1)	or (2), enter the	sum or these onle	rences (the oxcoss
	(2005)Q_Q_ (2004)	N.	/A (2003)	1	N/A (2002)	
C	Add, Amounts from column (e) for lines: 1576	0,329.00 16				
	Add, Amounts from column (o) for lines: 15 70	21			▶ 27c	70_329_00
đ	Add. Line 27a total	and line 27b total			► 2 <u>7d</u>	
•	Public support (line 27c total minus line 27d total).				▶ 270	70,329.00
	Total support for section 509(a)(2) test: Enter amoun					-
g	Public support percentage (line 27e (numerator) d	ivided by line 27f (de	nominator))	• • • • • • • • • •	► 27g	100.0000 %
<u>h</u>	Investment Income percentage (line 18, column (e) (numerator) divide	d by line 27f (denom	<u> nator) </u>	▶ 27h	<u>%</u>
28	Unusual Grants: For an organization described prepare a list for your records to show, for					
	description of the nature of the grant. Do not file this	eddir yedi, ille nill I list with your roturi	n. Do not include the	ese grants in line 15.	amount of the f	
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Schodule A (Form 990 or 990-EZ) 2006

Page 5

Pa	Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws.		Yes	No
	other governing instrument, or in a resolution of its governing body?	29		 -
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions.			
		30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during			
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way]	ļ	
	that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain, (If you nood more space, attacha separate statement.)			
			İ	
32	Does the organization maintain the following:			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32c		
	with student admissions, programs, and scholarships? Coples of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain, (If you need more space, attach a separate statement.)			<u> </u>
33	Does the organization discriminate by race in any way with respect to:			: 1
	Object and state and the second state and the secon			,
		333		
t	Admissions policies?	33b	_	
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
C	Educational policies?	33e		
ſ	Use of facilities?	331		
	Athletic programs?	33a	İ	
5	Athletic programs?	<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain, (If you need more space, attach a separate statement.)			
343	Does the organization receive any financial aid or assistance from a governmental agency?	343		
			_	
ħ	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
36	Opes the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

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Schedule A (Form 990 or 990-EZ) 2006

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Page 6

Pa	Part VI-A . Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)									
Che	Check ▶ a if the organization belongs to an affiliated group. Check ▶ b If you checked "a" and "limited control" provisions apply.									
	Limits on Lobbying Expenditures (a) Affiliated group To be completed for all electing									
	(The term "expenditures" means amounts paid or incurred.) organizations							organizations		
36	Total lobi	bying expendi	tures to influence pub	ille opinion (grassroots	s lobbying)	36				
37			tures to influence a le			37				
38			tures (add lines 36 ar			38				
39			expenditures			39	_			
40			expenditures (add line			40				
41	. •		mount. Enter the amo			l i				
		ount on Ilna 4		bbying nontaxable ar	7					
			20% of			1			1	
			\$1,000,000 \$100,0			41				
			or\$1,500,000							
			\$1,000			1 1				
42	Grassroo	its nontaxable	amount (enter 25% o	of line 41)		42			1	
43	Subtract	line 42 from li	ne 36. Enter -0- if line	42 is more than line		43				
44			ne 38. Enter -0- if line			44				
	Caution:	If there is an i	amount on either line	43 or line 44, you mus	t file Form 4720.					
		-		Averaging Period			1)			
	(So	me organizatio	ons that made a sect						lumns	below.
			See the instruction	ons for lines 45 throug	h 50 on page 13	of the	Instruction	ns.)		
				Lobbying Expendi	tures During 4	·Year	Avoragin	ıg Pe	rlod	
	Calendar	yoar (or fiscal	(a)	(b)	(c)			d)		(c)
	your bogin	ning in) 🕨	2006	2005	2004		20	003		<u>Total</u>
	Lobbying :	nontaxablo								
45	amount .				· ····					
		ceiling amount				ĺ				
46	(150% of 1	ino 45(o)) · ·								
4.										
47		ng expenditures								
		s nontaxable							}	
48		<u> </u>								······································
40		colling amount				ļ				
4.5	Grassroot:									
50		os								
_	rt VI-B		ctivity by Nonelect	ing Public Charitles						
	1212-2		ng only by organiza			A) (Se	e page 1	3 of	the ins	structions.)
Duri	ng the year		zation attempt to influer				<u> </u>			
			nion on a legislative mai					Yes	No	Amount
			•	-						
b	Paid staff	f or managem	ent (Include compens	sation in expenses rep	orted on lines c th	rough	h.)			
c	Media ad	vertisements			· ·					
đ	Mailings t	to members, f	egislators, or the publ	ic.		· · · ·				
0	Publication	ons, or publish	ed or broadcast state	ments						
1	Grants to	other organiz	ations for lobbying pu	rposes	. 					
9	Direct co	ntact with legis	slators, their staffs, g	overnment officials, or	a logislative bod	у				
þ	Rallies, d	omonstrations	s, seminars, conventi	ons, speeches, lectures	, or any other me	ans .				
	Total lobb	oying expendit	ures (Add lines c thro	ough h.)						
	If "Yes" to	any of the at	bove, also attach a st	atoment giving a deta	iled description o	f the lo	bbying ac	tivities		
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Name of organization	Type of organization	zation Description of relationship				
	l ————————————————————————————————————					
						
		Schodulo A (Form 990 or 990-EZ) 2006				

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