# **PUBLIC DISCLOSURE COPY**

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**ARMANINO ADVISORY LLC** 

Form <b>990</b>
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Department of the Treasury

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

www.irs.gov/Form990 for instructions and the latest infor ation



Internal Reven	ue Service Go to www.irs.gov/Formaao for instructions an	u line lalest li	normation.	Inspection								
A For the	2023 calendar year, or tax year beginning ar	nd ending										
B Check if applicable	C Name of organization SPECIAL OLYMPICS NORTHERN CALIFORNIA,		D Employer identific	ation number								
Addres change	s INC.											
Name change	Doing business as		68-0363121									
Initial return	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number									
Final return/	return/ STOC BOSKIKK AVENDE											
termin- ated	City or town, state or province, country, and ZIP or foreign postal code	•	<b>G</b> Gross receipts \$	11,801,738.								
Amend return			H(a) Is this a group re	turn								
Applica	F Name and address of principal officer: DAVID L. SOLO		for subordinates									
pendin	SAME AS C ABOVE		H(b) Are all subordinates in									
I Tax-exe	mpt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(	1) or 📃 527		list. See instructions								
J Websit			H(c) Group exemption									
K Form of	organization: 🕱 Corporation 📄 Trust 📄 Association 📄 Other	L Year	of formation: 1995	State of legal domicile: CA								
	Summary											
1	Briefly describe the organization's mission or most significant activities:	-ROUND SPOR	RTS TRAINING AND									
	COMPETITION FOR CHILDREN AND ADULTS WITH DEVELOPMENTAL DIS.											
Governance 5 Covernance 7 Covernance	Check this box if the organization discontinued its operations or disp	osed of more	than 25% of its net ass	ets.								
8 3 I	Number of voting members of the governing body (Part VI, line 1a)			27								
Ŭ 4 I	Number of independent voting members of the governing body (Part VI, line 1b)	)		27								
ິທ 5 <sup>-</sup>	Fotal number of individuals employed in calendar year 2023 (Part V, line 2a) $\dots$		5	76								
. 9  ¥	Fotal number of volunteers (estimate if necessary)		6	21084								
			7a	0.								
b⊺	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.								
			Prior Year	Current Year								
0 8 (	Contributions and grants (Part VIII, line 1h)		26,306,166.	10,685,796.								
2 9 I	Program service revenue (Part VIII, line 2g)		0.	12,986.								
Bevenue 9 10 10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		95,532.	643,793.								
<b>"</b>   11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,048.	23,722.								
12	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		26,413,746.	11,366,297.								
13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		341,233.	416,397.								
	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.								
ທ 15 ເ	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		5,314,698.	6,689,079.								
s 15 s se 16a l d b -	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.								
ğ b⁻	<b>.</b>	1,729.										
1 11 1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,816,108.	7,340,153.								
			11,472,039.	14,445,629.								
	Revenue less expenses. Subtract line 18 from line 12		14,941,707.	-3,079,332.								
Net Assets or Fund Balances		Ве	ginning of Current Year	End of Year								
<b>102</b> alar	Fotal assets (Part X, line 16)		27,606,694.	24,444,252.								
ĕ <u></u> 21 <sup>-</sup>	Fotal liabilities (Part X, line 26)		3,276,273.	3,168,005.								
<u>2∃</u> 22	Net assets or fund balances. Subtract line 21 from line 20		24,330,421.	21,276,247.								
Part II	Signature Block											
-	ties of perjury, I declare that I have examined this return, including accompanying schedu			knowledge and belief, it is								
true, correct	, and complete Dectaration of preparer (other than officer) is based on all information of	which preparer		2004								
-	Signature of officer		<u>11/12/2</u>	2024								
Sign			Date									
Here	DAVID L. SOLO, PRESIDENT/CEO											

	l type or print na	me and title											
Paid	Print/Type preparation Print/Type preparation Preparat		Preparer's signature MATTHEW PETROSKI		Date 11/12/24	ł	Check if self-employed P(	PTIN 00853132					
Preparer	Firm's name	ARMANINO ADVISORY LLC		Firm's	SEIN 94-62	214841							
Use Only	Firm's address	2700 CAMINO RAMON, STE. 3	50										
			Phone	e no.925-790-	-2600								
May the IF	RS discuss this	return with the preparer shown abo	ve? See instructions					X Yes	No				
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)												

LHA For Paperwork Reduction Act Notice, see the separate instructions.

	SPECIAL OLYMPICS NORTHERN CALIFORNIA,		
	990 (2023) INC.	68-0363121	1 Page <b>2</b>
Pa	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	SPECIAL OLYMPICS PROVIDES ATHLETIC OPPORTUNITIES TO CHILDREN AND		
	ADULTS WITH INTELLECTUAL DISABILITIES TO INSTILL THE CONFIDENCE NEEDED		
	TO SUCCEED IN LIFE.		
	<b>-</b>		
2	Did the organization undertake any significant program services during the year which were not listed on the	Г	
	prior Form 990 or 990-EZ?	L	Yes X No
•	If "Yes," describe these new services on Schedule O.	Г	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L	Yes [A 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 n Section $501(c)(2)$ and $501(c)(2)$ complications are required to report the ground of sections to the		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expe	nses, and
4 -	revenue, if any, for each program service reported. (Code:) (Expenses \$3,893,796. including grants of \$) (Revenue)		12 986
4a	(Code:) (Expenses \$3,893,796. including grants of \$) (Revenue \$) (Revenu	e\$	12,900.
	SPORTS TRAINING AND COMPETITION PROGRAM FOR CHILDREN AND ADULTS WITH		
	INTELLECTUAL DISABILITIES. THERE ARE OVER 31,800 ATHLETES WHO TRAIN & COMPETE IN 334 COMPETITIONS THROUGHOUT THE REGIONS IN 13 SPORTS.		
	SPECIAL OLYMPICS REQUIRES THE EXTRAORDINARY SUPPORT AND TIME OF		
	VOLUNTEERS. OUR 9,897 CERTIFIED COACHES VOLUNTEERED OVER 250,000 HOURS		
	AND ANOTHER 11,187 PEOPLE VOLUNTEERED AT COMPETITIONS AND FUNDRAISERS.		
	FINANCIAL SUPPORT COMES ALMOST EXCLUSIVELY FROM INDIVIDUALS,		
	ORGANIZATIONS, CORPORATIONS AND FOUNDATIONS.		
	1 524 000 246 207 1 4		
4b	(Code:) (Expenses \$1,534,989. including grants of \$346,397. ) (Revenu	e\$	
	THE SPECIAL OLYMPICS NORTHERN CALIFORNIA & NEVADA SCHOOLS PARTNERSHIP		
	PROGRAM IS A UNIQUE EDUCATION PROGRAM ACTIVE IN 464 K-12 PUBLIC		
	SCHOOLS, INVOLVING MORE THAN 22,800 GENERAL AND SPECIAL EDUCATION STUDENTS AND IMPACTING MORE THAN 135,000 STUDENTS. SPECIAL OLYMPICS		
	ASSISTS SCHOOLS IN INITIATING UNIFIED SPORTS AND WHOLE-SCHOOL		
	INVOLVEMENT ACTIVITIES, WHERE GENERAL EDUCATION AND SPECIAL EDUCATION		
	STUDENTS CREATE CLIMATES OF INCLUSION, ACCEPTANCE AND RESPECT ON		
	CAMPUSES AND COMMUNITIES. THERE IS NO CHARGE TO THE STUDENTS OR THEIR		
	FAMILIES TO PARTICIPATE IN THE PROGRAM.		
4-			
4c	(Code:) (Expenses \$561,510. including grants of \$) (Revenue	e\$	
	ENSURE OUR ATHLETES PERFORM AT THEIR BEST ON AND OFF THE PLAYING FIELD.		
	THE PROGRAMS IN FITNESS, HEALTHY ATHLETES SCREENINGS, AND		
	WELLNESS/ADVOCACY IMPACTED OVER 4,100 INDIVIDUALS THRU 80 EVENTS. THE		
	HEALTHY ATHLETES FREE, NON-INVASIVE SCREENING PROGRAM IMPACTS BOTH		
	ATHLETES AND HEALTHCARE PROFESSIONALS AND STUDENTS, AND MORE THAN 700		
	INDIVIDUAL HEALTHCARE PROFESSIONALS RECEIVED HANDS ON TRAINING IN 8		
	SPECIALTIES WORKING WITH 1,395 ATHLETES WITH IDD.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 4,492,771. including grants of \$ 70,000.) (Revenue \$	)	
4e	Total program service expenses10,483,066.		000
			Form <b>990</b> (2023
3200	2 12-21-23		
	2		

Part IV         Checklist of Required Schedules         Yes         No.           1         Is the organization describe in section SDT(c)(3) or 4847(W)) (other than a private foundation?         1         X           2         Is the organization engage in duct or nonech policy and where a nonech policy is activities on behalf of or in opposition to candidates for obligit of the organization engage in duct or nonech policy activities, or none a section SDT(W) election in effect of the organization ascens of 19(4), 50(16(3) organizations on behalf of or when denose have the right to many and the organization and the organization engage in obloging activities on behalf of or when denose have the right to provide activice on the distribution or thread engines activities of the weight denose have the right to provide activice on the distribution or thread engines activities on the activities of the organization engines on thores of a set similar function code on strong the distribution or thread engines activities of the weight denose have the right to provide activities of workers of an interviewer membership duce, assessment, bucking assessment, bucking assessment, bucking assessment is obtained on the regulation engine on the distribution or investment of amounts in such tinds or account the similar accelers if "Yes," complete Schedule D, Part II         6         X           7         Did the organization resourt an amount in Part X. Ine 21, for escrove or cudded account liability, term te a such activities of workers of an amount in the transport of the distribution resourt an amount for the right degranization. Head the distribution resourt an amount for the right degranization. Head the distribution resourt an amount for the right resource of the distributin resource restrong of the right resource resource restress of t		990 (2023) INC. 68-0363	121	Р	age 3
Is the organization described in section 501(k) or 4847(a)(1) (wher than a private foundation)?         If X           If the organization engage in direct or index optical campaign activities on behalf of or in poposition to camplete Schedule Q. Part I         If X           Is the organization engage in direct or index optical campaign activities on behalf of or in poposition to camplete Schedule Q. Part I         If X           Is the organization assection 501(k)(0)(S) (S)(0)(S) (S)(0)(k)(0) (S)(0)(k)) (S)(0)(k) (S)(0)(k))         Sectors 501(k) execution in electer of a simular many choice active dives dived back assessments, or any animation assection in the resolves membership does, assessments, or any animation assection to investment of anomation assection S (N)(k) (S)(K)(K)(K)(K)(K)(K)(K)(K)(K)(K)(K)(K)(K)	Par	t IV Checklist of Required Schedules			
M* Yes, "complete Sendule A.       1       X         2       Is the organization regards in direct or indirect policial campaign activities on behalf of or in opposition to candidate for unitic of ords. Schedule C. Part I.       3       X         4       Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year/I /* yes, "complete Schedule C. Part II.       4       X         5       Did the organization marking and young activities, or have a section 501(h) election in effect during the tax year/I /* yes, "complete Schedule C. Part II.       5       X         6       Did the organization marking and young activities, or have a section 501(h) election in effect during the tax year/I /* yes, "complete Schedule D. Part II.       5       X         7       Did the organization marking activities of tax incide a divide activities and under any similar during acasement, tay of the second account for the dia conservation acasement, incident acase, are historio structures? If * yes, "complete Schedule D, Part II.       8       X         9       Did the organization regord an amount in Part X, line 21, for second or curvatidal account liability, serve as a custodian for amounts in listed in Part X, or provide credit counseling, debt management, credit repair, or debt negation services?       7       X         10       Did the organization regord an amount for lands, buildings, and equipment in Part X, line 127, if * yes, "complete Schedule D, Part II.       0       X         10       D				Yes	No
1         The conjunction required to complete Schedule 8, Schedule of Contributors? See Instructions         2         X           3         Did the organization required to complete Schedule C, Part I         3         X           4         Section 50 (fc)(3) organizations. Did the organization engage in lobbying activities on bahalf of or in opposition to candidates for under the section 50 (fr) election 5	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2         Is the organization engage in direct or index policy of Contributions? See instructions         2         X           3         Dirt be organization engage in direct or index policy of index on bable of or in opposition to candidates for public office? If Yes, 'complete Schedule C, Pert I         3         X           4         Sectors 50((G)) organization. Dirt be organization engage in lobbying activities, or have a section 50((b) election in effect of index of		If "Yes." complete Schedule A	1	х	
3 Did the organization engage in direct or indirect political camping activities on behalf of or in opposition to candidates for public offord if Y res., "complete Schedule C, Part I         X           4 Section 501(C)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the taxy warf (Y res., "complete Schedule C, Part I         X           5 Is the organization action 501(C)(4). 501(C)(5), or 501(C)(6) or granization that nearby membership dues, assessments, or similar amounts as defined in Part Nep: Complete Schedule C, Part I         S         X           6 Did the organization rescience on total a conservation assemant in Indust gasements to prever open space. The anivornment, historic land areas, or historic simular funds or accounts? In Yres, "complete Schedule D, Part I         S         X           9 Did the organization rescience on total a conservation assemant in Indust assets? If Yres, "complete Schedule D, Part II         S         X           9 Did the organization rescience on total assets? If Yres, "complete Schedule D, Part II         S         X           10 Did the organization rescience on the following questions is 'Yes, 'then complete Schedule D, Part II         S         X           10 Did the organization rescience on the organization, noted assets in donorrestricted endowinemits or in quase-endowinemits? '''res, "complete Schedule D, Part II         S         X           10 Did the organization respont an amount for interestimets - other securities in Part X, line 10? If Yes, 'complete Schedule D, Part II         If the organization respont anamount for other	2		2	х	
public office? If 'Ves, 'complete Schedule C, Part I         3         X           4         Section 50(16)(3) organizations. Didt erogramization engage in lobbying activities, or have a section 50(16) election in effect during the taxy year? If 'Yes, 'complete Schedule C, Part I         4         X           5         Is the organization a section 501(6)(6), 501(6)(6) organization that receives membership dues, assessments, or aimilar amounts as defined in Parv. Proc. 08-1872 If 'Yes,' complete Schedule C, Part II         6         X           6         Did the organization celevic or hold a conservation assement. Including easements to preserve open space. The environment, historic lateras, or historic altreasures, or other similar assets? If 'Yes,' complete Schedule D, Part II         8         X           7         Did the organization receive or hold a conservation easement, including easements to preserve open space. The environment, historic lateras, or historic altreasures, or other similar assets? If 'Yes,' complete Schedule D, Part II         8         X           7         X         X         8         X         8           8         Did the organization, encept an amount in Part X, line 21, for secrow or custodal account liability, serve as a custodain for amounts not listed in Part X, ice 17, for secrow or custodal account liability, serve as a custodain for amounts not listed in Part X, line 10, Part I         8         X           9         Did the organization encept an amount for land, buildings, and equipment in Part X, line 10, If 'Yes,' complete Schedule D, Part X         11 <th></th> <td></td> <td></td> <td></td> <td></td>					
9         Section 601(c)(3) organizations. Did the organization negage in lobbying activities, or have a section 501(h) election in effect during the taxy varie? M*vs; complete Schedule C, Pert II         4         X           6         Is the organization accounts and without here Process B107 (H Yes); complete Schedule C, Pert II         5         X           7         Did the organization maintain any donor advised funds or any similar funds or accounts for which denors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which denors have the right to provide advice on the distribution or investment of amounts in such funds or account is limit asset? If "Yes," complete Schedule D, Part II         6         X           7         Did the organization maintain any donor advised funds or any similar security. If "Yes," complete Schedule D, Part II         7         X           8         Did the organization maintain any donor advised funds or any similar asset? If "Yes," complete Schedule D, Part II         7         X           9         Did the organization indice of any historical treasures, or other similar asset? If "Yes," complete Schedule D, Part V         8         X           10         Did the organization report an amount in Part X, line 21, for escow or custofial account liability, serve as a custodian for a asset any of the totioning questions in Yes, 'then complete Schedule D, Part V         10         X           10         Did the organization report an amount for investments - othere securitis in Part X, line 12, thi is 5% or more of its total a			3		x
during the tax year? If Yes,* complete Schedule C, Part II         4         X           5         Is the organization a sector D(         501(d)         501(d) <t< th=""><th>4</th><td></td><td>:</td><td></td><td></td></t<>	4		:		
5         Is the organization ascience 301(c)(d), 501(c)(g), or S01(c)(g) organization that receives membership dues, assessments, or similar amounts as defined in the Proc. 96:1917 If Yes, "complete Schedule D, Part IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				х	
similar amounts as defined in Rev. Proc. 98:197 If 'Yes,' complete Schedule Q, Part II     5     X       6     Det the organization maintains any door advised funds or any similar funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the night to the organization maintain collections of works of art, historical treasure, or other similar assets? If 'Yes,' complete Schedule D, Part II     6     X       7     Did the organization maintain collections of works of art, historical treasure, or other similar assets? If 'Yes,' complete Schedule D, Part IV     7     X       9     Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-andowments? If 'Yes,' complete Schedule D, Part V     10     X       10     Did the organization report an amount for law stated organization, hold assets in donor-restricted endowments or in quasi-andowments? If 'Yes,' complete Schedule D, Part V     10     X       11     If the organization report an amount for law statements - orber securities in Part X, line 10? If 'Yes,' complete Schedule D, Part V     11a     X       12     Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI     11a     X       13     X     Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X,	5				
6         Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide dixio on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II         6         X           7         Did the organization meant collection of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part II         7         X           8         Did the organization meant collection of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part II         7         X           9         Did the organization report an amount in Part X, line 21, for eacrow or custodial account liability: serve as a custodian for anounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?         9         X           10         Did the organization report an amount for law the did organization, fibro structures?         9         X           10         If the organization report an amount for law the did organization is "Yes," complete Schedule D, Part V         10         X           11         If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI         11a         X           11         Did the organization report an amount for investments - organe related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI         11a         X <th></th> <td></td> <td>5</td> <td></td> <td>x</td>			5		x
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability: serve as a custodian for amounts no listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       8       X         9       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasis endowments? If "Yes," complete Schedule D, Part V       10       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         11       If the organization report an amount for lawestments - program related in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         12       Did the organization report an amount for investments - organization report an amount for rother assets in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11a       X         13       Did the organization report an amount for other assets in Part X, line 12? If "Yes," complete Schedule D, Part X       11a       X         14	6				
7       Did the organization receive or hold a conservation easement, including easements to preserve open space.       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II       7       X         9       Did the organization report an amount in Part X. Ine 21, for escrow or custodial account liability: serve as a custodian for amounts not listed in Part X. or provide credit counseling, debt management, and the regulation services?       9       X         10       Did the organization report an amount in Part X. line 21, for escrow or custodial account liability: serve as a custodian for amounts not listed in Part X. line 21, hart is provide and the organization services?       9       X         10       Did the organization report an amount for laws the organization. Notel assets in donor restricted endowments or in quasi-andowments? If 'Yes,' complete Schedule D, Part V       10       X         11       If the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11a       X         11       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI       11a       X         11       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part	•		6		x
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in dono-restricted endowments or in quasi-endowments? If 'Yes,' complete Schedule D, Part V       9       X         10       Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       10       X         11       The organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part VI       11a       X         12       Did the organization report an amount for other assets in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part X       114       X         13       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part X       114       X	7				
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III       8       X         9 Did the organization report an amount in Part X, line 21, for escrow or outsoldial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         11 Did the organization report an amount for land, buildings, and equipment in Part X, line 12? If "Yes," complete Schedule D, Part VI       11a       X         11 Did the organization report an amount for land, buildings, and equipment in Part X, line 13? If "14 S that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       X         11 Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11a       X         11 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11a       X         12 Did the organization subaration subaration subaration stabaratin schooled schedul aschedul aschedul	•		7		x
Schedule D, Part III       8       X         9 Did the organization report an amount in Part X, line 21, the escrew or custodial account liability: serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       9       X         10 If the organization, directly or through a related organization, hold assets in donor-restricted endowments       9       X         11 If the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         as policable.       0       Debt the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 if 11% sc, "complete Schedule D, Part VIII       11a       X         10 Did the organization report an amount for investments - program related in Part X, line 15, this 15% or more of its total assets reported in Part X, line 167 if 11% sc, "complete Schedule D, Part X VIII       11a       X         11 Did the organization report an amount for investments for the tax year: Int VIII.       2       11d       X         12 Did the organization include in consolidated financial statements for the tax year?       11d       X       11d       X         12 Did the organization include in consolidated, independent audited financial statements for the tax year?<	8				<u> </u>
9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?         9         X           10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If 'res,' complete Schedule D, Part V         10         X           11 If the organization report an amount for land, buildings, and equipment in Part X, line 107 If 'ryes,' complete Schedule D, Part V         10         X           12 Did the organization report an amount for investments - other securities in Part X, line 107 If 'ryes,' complete Schedule D, Part V         11a         X           13 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If 'ryes,' complete Schedule D, Part VII         11a         X           14 Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 If 'ryes,' complete Schedule D, Part VIII         11e         X           11 Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 If 'ryes,' complete Schedule D, Part X         11e         X           12 Did the organization report an amount for other assets in Part X, line 125, If 'ryes,' complete Schedule D, Part X         11e         X           12 Did the organization soluted	Ū		8		x
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?       y       X         ID dth eroganization, directly or through a related organization, hold assets in donor-restricted endowments       y       X         10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       y       X         11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       10       X         12 Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       X         13 Did the organization report an amount for investments - other asset in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       X         14 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       X         15 Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       114       X         16 Ub the organization asserte or consolidated, independent audted financial statements for the tax year? If "Yes," complete Schedule D, Part X       114       X         17 W Twes, " and fit the organization maxe	٩	,			
# "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in donorrestricted endowments       10       X         11       If the organization, directly or through a related organization, hold assets in donorrestricted endowments       10       X         11       If the organization asswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VX, or X, as applicable.       10       X         a Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11a       X         b Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         c Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         c Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         112a       X       11d       X       11d       X         113       X       11d	5				
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or in quasi-endowments? # "Yes," complete Schedule D, Part V     10     X       11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.     11a     X       a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI     11a     X       b Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VII     11b     X       c Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII     11c     X       d Did the organization report an amount for other assets in Part X, line 157, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII     11c     X       e Did the organization report an amount for other liabilities in Part X, line 157, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X     11d     X       12a     Did the organization is parate, independent audited financial statements for the tax year?     11f     X       11d     X     11e     X     11d     X       12a     Did the organization associable and reployees, or ageres of the tax year?     11d     X       12a     Did the organization associable and reployee ascheadule D, Part X     11d     X	10		5		<u> </u>
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Dark V       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VII       11b       X         C       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part X       11c       X         d       Did the organization report an amount for other assets in Part X, line 25? // *Yes," complete Schedule D, Part X       11d       X         f       Did the organization bia separate or consolidated financial statements for the tax year       11t       X         2a       Did the organization bia separate, independent audited financial statements for the tax year?       11f       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? // *Yes," complete Schedule E       13       X         14       Did the organization asintain an office, employees, or agents outside of the United States?       14a       X         14       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization aschool described in seched	a		110	x	
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d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX       11d X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e X         11d X       11d X         e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization botain separate, independent audited financial statements for the tax year?       11f       X         12a Did the organization included in consolidated, independent audited financial statements for the tax year?       11e X       12a X         13 Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13 X         14a Did the organization aschool described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E       13 X         14a Did the organization nanothes aggregate revenues or expenses of more than \$10,000 from grantsking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b X         15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "yes," complete Schedule F, Parts II and IV       16       X         16 Did the organization report more than \$15,000 ot aggregate grants or other assistance to or for foreign individuals? If "yes," complet	Ŭ		110		x
Part X, line 16? /f "Yes," complete Schedule D, Part IX       11d       X         e       Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X       11d       X         f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? /f "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       // f" Yes," and if the organization answerd "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12a       X         b       Was the organization answerd "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       11d       X         14a       Did the organization answerd "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       11d       X         14a       Did the organization as chool described in section 170(b)(1)(A)(ii)? // H"Yes," complete Schedule E       13       X         14a       Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, busines, investment, and program service activities outside the United States, or aggregate grants or other assistance to or for any foreigin organization" ff "Yes," complete Schedule F, Parts II and IV       16       X         15       Did the organization report on Part IX, column (	Ь				<u> </u>
<ul> <li>Did the organization report an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X</li> <li>Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? // "Yes," complete Schedule D, Part X</li> <li>Did the organization shability for uncertain tax positions under FIN 48 (ASC 740)? // "Yes," complete Schedule D, Part X</li> <li>Did the organization shability for uncertain tax positions under FIN 48 (ASC 740)? // "Yes," complete Schedule D, Part X</li> <li>Did the organization shability for uncertain tax positions under FIN 48 (ASC 740)? // "Yes," complete Schedule D, Part X</li> <li>Did the organization neport an orthor to line 12a, then completing Schedule D, Part X and XII is optional</li> <li>Is the organization aschool described in section 170(b)(1)(A(iii)? // "Yes," complete Schedule D, Part X and XII is optional</li> <li>Is the organization navered "No" to line 12a, then completing Schedule D, Part X and XII is optional</li> <li>Is the organization aschool described in section 170(b)(1)(A(iii)? // "Yes," complete Schedule E</li> <li>Did the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside of the United States?</li> <li>Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? // "Yes," complete Schedule F, Parts II and IV</li> <li>Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? // "Yes," complete Schedule G, Part II and IV</li> <li>Did the organization report more than \$15,000 of gross income from gaming activities on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? // "Yes," complete Schedule G, Part II</li> <li>Did th</li></ul>	ŭ		11d	x	
f       Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740?) <i>If "Yes," complete Schedule D, Part X</i> 11f       X         12a       Did the organization separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 12a       X         b       Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization aschool described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E       13       X         14a       Did the organization naintain an office, employees, or ageres of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for or any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I.       16       X         17       Did the organization report more than \$15,000 of apress income and contributions on Part VIII, lines a fa ant	۵	Did the organization report an amount for other liabilities in Part X line 252 If "Yes, " complete Schedule D. Part X			
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? /f "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? /f "Yes," complete       12a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X					<u> </u>
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         b       Was the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13a       X         14a       Did the organization naintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization neport on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report an Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV       16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV       16       X <th>•</th> <td>• • •</td> <td>116</td> <td>x</td> <td></td>	•	• • •	116	x	
Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garets or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions       17       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II       18       X         20a       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete	122		·   · ···		<u> </u>
by Was the organization included in consolidated, independent audited financial statements for the tax year?       121         if "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       121         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization neutration and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV       16       X         17       Did the organization report an total of more than \$15,000 of expenses for professional fundraising services on Part VII, lines 1c and 8a? If "Yes," complete Schedule G, Part II and IV       16       X         18       Did the organization report more than \$15,000 of grass inco	120		120	x	
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19	h		120		<u> </u>
In the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?       14a       X         b       Did the organization neport on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         18       Did the organization report nore than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	U		10h		x
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investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule H       20a       X         20a       X       20b       20b       20b			1-74		
or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines and a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule H       20a       X	5				
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foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       20b       20b	15		1.12		
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column (A), lines 6 and 11e? // "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       19       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? // "Yes," complete Schedule I. Parts I and II       20a       X	17				
18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       20a       X	.,		17		x
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19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I. Parts I and II</i> 21       X	.0		18	x	
complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       X         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	19		10		<u> </u>
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X	19		10		x
b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       21         21       Odmestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II       21	20-2				<u> </u>
21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II       21       X					<u> </u>
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	-		200		<u> </u>
	21		21	x	
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Form	990 (2023) INC. 68-036312	21	P	age <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
D D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		<u> </u>
20				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
~	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			[
	Part V, line 1	34	х	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
07	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	- 57		
38		38	х	1
Par	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	1 30	25	L
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
-			Yes	No
-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 60	-		
b		-		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		77	
	(gambling) winnings to prize winners?	1c	X	
332004	¥ 12-21-23	Form	990	(2023)

Form	990 (2023) INC.	68-0363121		P	<sub>age</sub> 5
Par	rt 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	76			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	х	
- 3a			<u>3a</u>		x
	If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" to line 3b, provide an explanation on Schedule O		3b		<u> </u>
			30		<u> </u>
40	At any time during the calendar year, did the organization have an interest in, or a signature or other authority o		4.		x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		
a	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 (F		_		
5a			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
С	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	tion solicit			
	any contributions that were not tax deductible as charitable contributions?	····· L	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift	s			
	were not tax deductible?	L	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	ded to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?		7c		x
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d				
e	Did the environment of the description of the descr		7e		x
f			7f		x
					<u> </u>
g L	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a	· · · · ·	7g 7h		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a l	-orm 1098-C?	7h		<u> </u>
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		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.				
а	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		<u> </u>
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders 11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?	F	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
h	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				
с	Enter the amount of reserves on hand				
			140		x
		F	14a 14b		<u> </u>
			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		4-		v
	excess parachute payment(s) during the year?	·····	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities				1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	L	17		L
	If "Yes," complete Form 6069.				
332005	5 12-21-23		Form	990	(2023)

	SFECTAL OLIMPICS NORTHERN CALIFORNIA,										
	990 (2023) INC. 68-03631		Р	age <b>6</b>							
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a	a "No" i	respor	ise							
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.										
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		X							
Sec	tion A. Governing Body and Management		-								
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 2'	<u>'</u>									
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b 2'	<u>'</u>									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?	3		X							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	<u>8a</u>	X								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			x							
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		А							
000	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	x							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х								
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.										
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х								
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	on Schedule O how this was done	12c	х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	х								
b	Other officers or key employees of the organization	15b	х								
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
<u></u>	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filedCA										
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)	availa	ble							
	for public inspection. Indicate how you made these available. Check all that apply.										
	X       Own website       Another's website       X       Upon request       Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial								
	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										
	MICHAEL MAYO, CFO - 925-944-8801 3480 BUSKIRK AVENUE, 340, PLEASANT HILL, CA 94523										
000000		Eoro	1 <b>990</b>	(2022)							
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Charle if Schoolula O contains a reasonance or note to any line in this Dart VII	
	Check if Schedule O contains a response of hote to any line in this Part Vi	
0		
Section A.	Officers, Directors, Trustees, Key Employees, and Hignest Compensated Employees	
	Check if Schedule O contains a response or note to any line in this Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

INC.

Form 990 (2023)

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

Name and title         Average hours per veck week         Description built any hours for veck         Peortable built any built any hours for veck         Peortable compensation from organization         Reportable compensation from the organization         Estimated and organization           (1) DAVID SOLO         40.00         X         307,000         0.         22,903.           (1) DAVID SOLO         40.00         X         307,000.         0.         22,903.           (2) CATHERINE DOMANSKI         40.00         X         215,331.         0.         26,955.           (3) TLISA RESIDER         40.00         X         215,331.         0.         20,467.           (4) MICHAEL A, MAYO         40.00         X         161,192.         0.         7,610.           (5) MATT COREN         40.00         X         156,612.         0.         11,864.           (7) KEVIN MARENES         40.00         X         124,750.         0.         12,272.           (6) TERRENCE TRORNON         40.00         X         124,750.         0.         12,272.           (10) KATIN MARENES         40.00         X         124,750.         0.         12,272.           (11) REC NOR INFUT         40.00         X         124,750.         0.         12,272. </th <th>(A)</th> <th colspan="3">(B)</th> <th>(0</th> <th>C)</th> <th></th> <th></th> <th>(D)</th> <th>(E)</th> <th>(F)</th>	(A)	(B)			(0	C)			(D)	(E)	(F)
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(1)         DAVID SOLO         40.00         x         307,000.         0.         22,903.           (2)         CATHERINE DOMANSKI         40.00         x         217,889.         0.         26,055.           (3)         LISA KESSLER         40.00         x         215,331.         0.         20,467.           (4)         MICHAEL A. MAYO         40.00         x         207,212.         0.         23,144.           (5)         MATT COHEN         40.00         x         161,192.         0.         7,610.           (7)         KEVIN ANDREWS         40.00         x         156,612.         0.         11,864.           (7)         KEVIN ANDREWS         40.00         x         124,750.         0.         23,784.           (8)         FURCTOR, IT         x         124,750.         0.         23,784.           (9)         JESS DAUGHERY         40.00         x         124,750.         0.         23,784.           (10)         KATIE OSTROM         40.00         x         124,750.         0.         23,784.           (9)         JESS DAUGHERY         40.00         x         124,750.         0.         2,722.           (10)         KATI		week		cer ar I	ndad I	irecto I	or/trus T	tee)	from	from related	other
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(1)         DAVID SOLO         40.00         x         307,000.         0.         22,903.           (2)         CATHERINE DOMANSKI         40.00         x         217,889.         0.         26,055.           (3)         LISA KESSLER         40.00         x         215,331.         0.         20,467.           (4)         MICHAEL A. MAYO         40.00         x         207,212.         0.         23,144.           (5)         MATT COHEN         40.00         x         161,192.         0.         7,610.           (7)         KEVIN ANDREWS         40.00         x         156,612.         0.         11,864.           (7)         KEVIN ANDREWS         40.00         x         124,750.         0.         23,784.           (8)         FURCTOR, IT         x         124,750.         0.         23,784.           (9)         JESS DAUGHERY         40.00         x         124,750.         0.         23,784.           (10)         KATIE OSTROM         40.00         x         124,750.         0.         23,784.           (9)         JESS DAUGHERY         40.00         x         124,750.         0.         2,722.           (10)         KATI			or dir	e			ated			•	
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(2)         CATHERINE DOMANSKI         40.00         x         217,889.         0.         26,055.           COO         40.00         x         215,331.         0.         26,055.           COO         x         215,331.         0.         20,467.           (4)         MICHAEL A. MAYO         40.00         x         207,212.         0.         23,144.           (5)         MATT COHEN         40.00         x         161,192.         0.         7,610.           (6)         TERRENCE THORNTON         40.00         x         156,612.         0.         11,864.           (7)         KEVIN ANDERWS         40.00         x         139,950.         0.         16,105.           (8)         PALE GOGIN         40.00         x         139,950.         0.         16,105.           (9)         JES DAUGHERTY         40.00         x         124,750.         0.         23,784.           (9)         JES DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10)         KATE OSTROM         40.00         x         125,850.         0.         5,378.           (11)         ELC MILEREM         2.00         X	CEO/PRESIDENT				x				307,000.	0.	22,903.
(3) ILISA KESSLER       40.00       x       215,331.       0.       20,467.         (4) MICHAEL A. MAYO       40.00       x       207,212.       0.       23,144.         (5) MATT COHEN       40.00       x       207,212.       0.       23,144.         (5) MATT COHEN       40.00       x       161,192.       0.       7,610.         (6) TERRENCE THORNTON       40.00       x       156,612.       0.       11,864.         (7) KEVIN ANDREWS       40.00       x       156,612.       0.       11,864.         (7) KEVIN ANDREWS       40.00       x       124,750.       0.       23,784.         (9) JESE DAUGHERTY       40.00       x       124,750.       0.       12,272.         (10) KATIE OSTROM       40.00       x       124,750.       0.       12,272.         (10) KATIE OSTROM       40.00       x       124,750.       0.       12,272.         (11) ERIC WILFRED       2.00       x       125,850.       0.       5,378.         (11) ERIC WILFRED       2.00       x       x       0.       0.       0.         YEC CHAIR       x       x       0.       0.       0.       0.       0.	(2) CATHERINE DOMANSKI	40.00									
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(4) MICHAEL A. MAYO       40.00       x       207,212,       0.       23,144.         (5) MATT COHEN       40.00       x       161,192,       0.       7,610.         (6) TERRENCE THORNTON       40.00       x       161,192,       0.       7,610.         (7) KEVITVE DIRECTOR       40.00       x       156,612.       0.       11,864.         (7) KEVITVE ANDREWS       40.00       x       133,950,       0.       16,105.         (8) PAULA GOGIN       40.00       x       133,950,       0.       16,105.         (9) JESS DAUGHERTY       40.00       x       124,750,       0.       23,784.         (9) JESS DAUGHERTY       40.00       x       124,750,       0.       12,272.         (10) KATLE OSTROM       40.00       x       124,750,       0.       12,272.         (11) KATLE OSTROM       40.00       x       x       125,850,       0.       5,378.         (11) KATLE OSTROM       2.000       x       x       0.       0.       0.         (12) MICHELE WYMER       2.000       x       x       0.       0.       0.       0.         SECRETARY       X       X       0.       0.       0.	(3) ILISA KESSLER	40.00									
CPO         X         207,212,         0.         23,144.           (5)         MATT COHEN         40.00         X         161,192,         0.         7,610.           (6)         TERRENCE THORNTON         40.00         X         161,192,         0.         7,610.           NV EXECUTIVE DIRECTOR         40.00         X         156,612,         0.         11,864.           (7)         KEVIN ANDREWS         40.00         X         139,950,         0.         16,105.           SR DIRECTOR, IT         40.00         X         124,750,         0.         23,784.           (8)         FAULA GOGIN         40.00         X         124,750,         0.         23,784.           (9)         JESS DAUGHERTY         40.00         X         124,750,         0.         12,272.           (10)         KATIE OSTROM         40.00         X         124,750,         0.         5,378.           (11)         ERIC WILFRED         2.00         X         125,850.         0.         0.           (12)         MICHELE WYMER         2.00         X         0.         0.         0.           (13)         PAUL VELASKI         2.00         X         0.	C00					Х			215,331.	0.	20,467.
(5) MATT COHEN         40.00         x         161,192.         0.         7,610.           (6) TERRENCE THORNTON         40.00         x         156,612.         0.         11,864.           (7) KEVIN ANDREWS         40.00         x         139,950.         0.         16,105.           (8) PAULA GOGIN         40.00         x         124,750.         0.         23,784.           (9) JESS DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10) KATIE OSTROM         40.00         x         125,850.         0.         5,378.           (11) ERIC WILFRED         2.00         x         x         125,850.         0.         0.           (12) MICHELE WIMER         2.00         x         x         0.         0.         0.           (13) PAUL VELASKI         2.00         x         x         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.         0.           JERCTOR         x         x         X         0.         0.         0.         0.           (14) RATE OSTROM         40.00         x         X         0.         0.		40.00									
CPO         x         161,192.         0.         7,610.           (6) TERRENCE THORNTON         40.00         x         156,612.         0.         11,864.           (7) KEVIN ANDREWS         40.00         x         139,950.         0.         16,105.           (8) PAULA GOGIN         40.00         x         124,750.         0.         23,784.           (9) JESS DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10) KATLE OSTROM         40.00         x         125,850.         0.         5,378.           (11) ERIC WILFRED         2.00         x         x         0.         0.         0.           VP, DEVELOPMENT & LETR         x         x         0.         0.         0.         0.           (11) ERIC WILFRED         2.00         x         x         0.         0.         0.           (12) MICHELE WYMER         2.00         x         x         0.         0.         0.           (13) PAUL VELASKI         2.00         x         x         0.         0.         0.           SECRETARY         x         x         0.         0.         0.         0.           (14) RON PASEK					х				207,212.	0.	23,144.
(6)         TERRENCE THORNTON         40.00         x         156,612.         0.         11,864.           (7)         KEVIN ANDREWS         40.00         x         139,950.         0.         16,105.           SR DIRECTOR, IT         x         139,950.         0.         16,105.           (8)         PAULA GOGIN         40.00         x         124,750.         0.         23,784.           (9)         JESS DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10)         KATE OSTROM         40.00         x         125,850.         0.         12,272.           (11)         ENCINPATE OSTROM         40.00         x         125,850.         0.         5,378.           (11)         ENCINPATE OSTROM         40.00         x         x         125,850.         0.         0.           (11)         ENCINPATE OSTROM         40.00         x         x         12,972.         0.         0.         0.           (11)         ENCINPATE OSTROM         40.00         x         x         12,972.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.		40.00									
NV EXECUTIVE DIRECTOR         x         156,612.         0.         11,864.           (7) KEVIN ANDREWS         40.00         x         139,950.         0.         16,105.           SR DIRECTOR, IT         x         139,950.         0.         16,105.           (8) PAULA GOGIN         40.00         x         124,750.         0.         23,784.           (9) JESS DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10) KATIE OSTROM         40.00         x         125,850.         0.         5,378.           (11) ERIC WILFRED         x         x         125,850.         0.         0.           (11) ERIC WILFRED         2.00         x         125,850.         0.         0.           (12) MICHELE WYMER         2.00         x         0.         0.         0.           VICE CHAIR         x         x         x         0.         0.         0.           SECRETARY         x         x         x         0.         0.         0.           (14) RON PASEK         2.00         x         x         0.         0.         0.           DIRECTOR         X         X         0.         0.						Х			161,192.	0.	7,610.
(7)       KEVIN ANDREWS       40.00       x       139,950.       0.       16,105.         SR DIRCTOR, IT       40.00       x       139,950.       0.       16,105.         (8)       PAULA GOGIN       40.00       x       124,750.       0.       23,784.         DIRECTOR OF INDIVIDUAL GIVING       x       124,750.       0.       12,272.         (10)       KATIE OSTROM       40.00       x       125,850.       0.       5,378.         (11)       ERTR       2.00       x       x       125,850.       0.       5,378.         (11)       ERTR       2.00       x       x       0.       0.       0.         VP. DEVELOPMENT & LETR       2.00       x       x       0.       0.       0.         (11)       ERT       X       x       x       0.       0.       0.         VICE CHAIR       x       x       x       0.       0.       0.       0.         SECRETARY       X       x       x       0.       0.       0.       0.       0.         (14)       RON PASEK       2.00       X       X       0.       0.       0.       0.       0.		40.00									
SR DIRECTOR, IT         X         139,950.         0.         16,105.           (8) PAULA GOGIN         40.00         X         124,750.         0.         23,784.           (9) JESS DAUGHERTY         40.00         X         124,750.         0.         12,272.           (10) KATIE OSTROM         40.00         X         124,750.         0.         12,272.           (11) ENTROM         40.00         X         125,850.         0.         5,378.           (11) ENT WILFRED         2.00         X         125,850.         0.         0.           (12) MICHELE WIMER         2.00         X         X         0.         0.         0.           (13) PAUL VELASKI         2.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (14) RON PASEK         2.00         X         X         0.         0.         0.           SECRETARY         1.00         X         X         0.         0.         0.           (15) TOM ALBANESE         1.00         X         X         0.         0.         0.           DIRECTOR         X							X		156,612.	0.	11,864.
(8)         PAULA GOGIN         40.00         x         124,750.         0.         23,784.           (9)         JESS DAUGHERTY         40.00         x         124,750.         0.         23,784.           (9)         JESS DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10)         KATIE OSTROM         40.00         x         125,850.         0.         5,378.           (11)         ERIC WILFRED         2.00         x         x         0.         0.         0.           VICE CHAIR         2.00         x         x         0.         0.         0.         0.           (11)         ERIC WIMER         2.00         x         x         0.         0.         0.           VICE CHAIR         x         x         x         0.         0.         0.         0.           (13)         PAUL VELASKI         2.00         x         x         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.         0.           (14)         RON PASEK         2.00         x         x         0.         0.         0.     <		40.00									
DIRECTOR OF INDIVIDUAL GIVING         x         124,750.         0.         23,784.           (9) JESS DAUGHERTY         40.00         x         124,750.         0.         12,272.           (10) KATTE OSTROM         40.00         x         124,750.         0.         12,272.           (10) KATTE OSTROM         40.00         x         125,850.         0.         5,378.           (11) ERIC WILFRED         2.00         x         x         0.         0.         0.           (12) MICHELE WYMER         2.00         x         x         0.         0.         0.           VICE CHAIR         x         x         x         0.         0.         0.         0.           (13) PAUL VELASKI         2.00         x         x         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (14) RON PASEK         2.00         x         x         0.         0.         0.           SECRETARY         1.00         X         X         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.							X		139,950.	0.	16,105.
(9) JESS DAUGHERTY       40.00       x       124,750.       0.       12,272.         (10) KATIE OSTROM       40.00       x       124,750.       0.       12,272.         (10) KATIE OSTROM       40.00       x       125,850.       0.       5,378.         (11) ERIC WILFRED       2.00       x       x       125,850.       0.       5,378.         (11) ERIC WILFRED       2.00       x       x       0.       0.       0.         (12) MICHELE WYMER       2.00       x       x       0.       0.       0.         VICE CHAIR       x       x       x       0.       0.       0.       0.         SECRETARY       x       x       x       0.       0.       0.       0.       0.         (14) RON PASEK       2.00       x       x       0.       0.       0.       0.       0.         SECRETARY (THRU 09/23)       x       x       x       0.       0.       0.       0.       0.       0.         ILECTOR       x       x       x       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.		40.00									
HEAD OF MARKETING         X         124,750.         0.         12,272.           (10) KATLE OSTROM         40.00         X         125,850.         0.         5,378.           (11) ERIC WILFRED         2.00         X         125,850.         0.         5,378.           (11) ERIC WILFRED         2.00         X         X         0.         0.         0.           CHAIR         X         X         0.         0.         0.         0.         0.           (12) MICHELE WYMER         2.00         X         X         0.         0.         0.         0.           VICE CHAIR         X         X         X         0.         0.         0.         0.           (13) PAUL VELASKI         2.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (14) RON PASEK         2.00         X         X         0.         0.         0.           SECRETARY (THRU 09/23)         X         X         0.         0.         0.         0.           01RECTOR         X         X         0.         0.         0.         0. <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>124,750.</td> <td>0.</td> <td>23,784.</td>							X		124,750.	0.	23,784.
(10) KATLE OSTROM       40.00       x       125,850.       0.       5,378.         (11) ERIC WILFRED       2.00       x       x       0.       0.       0.         (11) ERIC WILFRED       2.00       x       x       0.       0.       0.         (12) MICHELE WYMER       2.00       x       x       0.       0.       0.         VICE CHAIR       x       x       x       0.       0.       0.         (13) PAUL VELASKI       2.00       x       x       0.       0.       0.         SECRETARY       x       x       0.       0.       0.       0.       0.         (14) RON PASEK       2.00       x       x       0.       0.       0.       0.         SECRETARY (THRU 09/23)       x       x       x       0.       0.       0.       0.         (15) TOM ALBANESE       1.00       x       x       0.       0.       0.       0.         DIRECTOR       x       x       0.       0.       0.       0.       0.       0.         (16) PRAK BEBARTA       1.00       x       x       0.       0.       0.       0.         DIRECT	(9) JESS DAUGHERTY	40.00									
VF, DEVELOPMENT & LETR         X         X         125,850.         0.         5,378.           (11) ERIC WILFRED         2.00         X         X         X         0.         0.         0.           CHAIR         X         X         X         0.         0.         0.         0.           (12) MICHELE WYMER         2.00         X         X         X         0.         0.         0.           VICE CHAIR         X         X         X         0.         0.         0.         0.           (13) PAUL VELASKI         2.00         X         X         0.         0.         0.           SECRETARY         X         X         X         0.         0.         0.           (14) RON PASEK         2.00         X         X         0.         0.         0.           SECRETARY (THRU 09/23)         X         X         X         0.         0.         0.           (15) TOM ALBANESE         1.00         X         X         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.         0.           (16) PRAK BEBARTA         1.00         X							Х		124,750.	0.	12,272.
(11) ERIC WILFRED       2.00       x       x       x       x       0.       0.       0.         CHAIR       x       x       x       x       0.       0.       0.       0.         (12) MICHELE WYMER       2.00       x       x       x       0.       0.       0.         VICE CHAIR       2.00       x       x       0.       0.       0.       0.         (13) PAUL VELASKI       2.00       x       x       0.       0.       0.       0.         SECRETARY       x       x       0.       0.       0.       0.       0.         (14) RON PASEK       2.00       x       x       0.       0.       0.       0.         SECRETARY (THRU 09/23)       x       x       x       0.       0.       0.       0.         (15) TOM ALBANESE       1.00       x       x       0.       0.       0.       0.         DIRECTOR       x       x       0.       0.       0.       0.       0.         (16) PRAK BEBARTA       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.	(10) KATIE OSTROM	40.00									
CHAIR         x <td>· ·</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>125,850.</td> <td>0.</td> <td>5,378.</td>	· ·						X		125,850.	0.	5,378.
(12) MICHELE WYMER       2.00       x       x       x       x       x       0.       0.       0.         VICE CHAIR       2.00       x       x       x       0.       0.       0.       0.         (13) PAUL VELASKI       2.00       x       x       x       0.       0.       0.         SECRETARY       x       x       x       0.       0.       0.       0.         (14) RON PASEK       2.00       x       x       0.       0.       0.       0.         SECRETARY (THRU 09/23)       x       x       x       0.       0.       0.       0.         (15) TOM ALBANESE       1.00       x       x       0.       0.       0.       0.         DIRECTOR       x       x       0.       0.       0.       0.       0.         (16) PRAK BEBARTA       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       x       0       0.       0.       0.       0.         (17) BRENT BOUNDS       1.00       x       0       0.       0.       0.       0.         DIRECTOR       x       0	(11) ERIC WILFRED	2.00									
VICE CHAIR         X         X         X         X         0. <th< td=""><td></td><td></td><td>Х</td><td></td><td>X</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х		X				0.	0.	0.
(13) PAUL VELASKI       2.00       X       X       X       X       0       0.       0.         SECRETARY       X       X       X       X       0.       0	(12) MICHELE WYMER	2.00									
SECRETARY         X         X         X         X         0.			Х		Х				0.	0.	0.
(14) RON PASEK       2.00       x       x       x       x       0       0.	(13) PAUL VELASKI	2.00									
SECRETARY (THRU 09/23)         X         X         X         0. <td></td> <td></td> <td>Х</td> <td></td> <td>X</td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>			Х		X				0.	0.	0.
(15) TOM ALBANESE       1.00       x       0       0.	(14) RON PASEK	2.00									
DIRECTOR         X         0         0. <th< td=""><td></td><td></td><td>Х</td><td></td><td>х</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х		х				0.	0.	0.
(16) PRAK BEBARTA       1.00       x       0.       0	(15) TOM ALBANESE	1.00									
DIRECTOR         X         0. </td <td></td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>			Х						0.	0.	0.
(17) BRENT BOUNDS         1.00         X         0.		1.00									
DIRECTOR X 0. 0. 0.			х						0.	0.	0.
		1.00									
	DIRECTOR		Х						0.	0.	

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332007 12-21-23

14381112 701245 CUS000000358

(A)	s, Trustees, Key Emp (B)		,	(0		-		(D)	(E)	(F)
Name and title	Average hours per week (list any	box offic	not cl	Posi heck r ss per	ition more son i	than o s both pr/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099·MISC/ 1099·NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) LASANDRA BRILL	1.00									
DIRECTOR (THRU 09/23)		х						0.	0.	0
(19) NUZHA BUKHARI	1.00									
DIRECTOR		Х						0.	0.	0
(20) PATRICK CRONIN	1.00									
DIRECTOR		Х						0.	0.	0
(21) TIM CURRY	1.00									
DIRECTOR		Х						0.	0.	0
(22) DREW FRASER	1.00									
DIRECTOR		Х						0.	0.	0
(23) LARRY GARLICK	1.00									
DIRECTOR		Х						0.	0.	0
(24) MICHAEL GREY	1.00									
DIRECTOR (THRU 12/23)		Х						0.	0.	0
(25) ERIN HATTERSLEY	1.00									
DIRECTOR (THRU 09/23)		Х						0.	0.	0
(26) KIM HING	1.00									
DIRECTOR		Х						0.	0.	0
1b Subtotal								1,780,536.	0.	169,582
c Total from continuation sheets to	Part VII, Section A							0.	0.	0
d Total (add lines 1b and 1c)								1,780,536.	0.	169,582
2 Total number of individuals (includin								ceived more than \$100,	000 of reportable	
compensation from the organization										1

3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4				
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		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 NONE	<b>(B)</b> Description of services	<b>(C)</b> Compensation
<ul> <li>Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization</li> </ul>	above) who received more than	
SEE PART VII, SECTION A CONTINUATION SHEETS		Form <b>990</b> (2023)

332008 12-21-23

68-0363121

Part VII Section A Officers Directors									68-03631	121
Part VII Section A. Officers, Directors, (A)	Trustees, Key En (B)	nplo	yee		<u>nd H</u> C)	lighe	est (	Compensated Employe (D)	es <u>(continued)</u> (E)	(F)
Name and title	Average				<b>.,</b> ition			Reportable	( <b>L</b> ) Reportable	Estimated
	hours	(cł			that		ly)	compensation	compensation	amount of
	per	-						from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any hours for	lirecto				emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or c	stee			nsatec		(00-2/1099-00130)		and related
	organizations	truste	ial tru:		oyee	admo				organizations
	below	Individual trustee or director	Institutional trustee	Cer	Key employee	Highest compensated employee	ner			-
	line)	Indi	Inst	Officer	Key	High	Former			
(27) AARON JOHNSON	1.00									
DIRECTOR		х						0.	0.	0.
(28) MIKE KIM	1.00									
DIRECTOR (THRU 11/23)	1.00	X						0.	0.	0.
(29) CHUCK KOCH	1.00	x						0	0	0
DIRECTOR (30) JENNY LINTON	1.00	Λ.						0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0.
(31) KIMBERLY LYNTIKAINEN	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(32) JT MARCINKOWSKI	1.00								·	
DIRECTOR		х						0.	0.	0.
(33) MATT MARGOLIN	1.00									
DIRECTOR		х						0.	0.	0.
(34) JOE MCLEAN	1.00									
DIRECTOR (THRU 11/23)		х						0.	0.	0.
(35) RICHARD RAHM	1.00									
DIRECTOR		х						0.	0.	0.
(36) MIKE RICH	1.00									
DIRECTOR		Х						0.	0.	0.
(37) LAUREN RUIZ	1.00									
DIRECTOR		Х						0.	0.	0.
(38) JUSTIN STEINBERG	1.00									
DIRECTOR		х						0.	0.	0.
(39) MIKE TESKE	1.00									
DIRECTOR	1 00	X						0.	0.	0.
(40) MIKE THOMPSON DIRECTOR (THRU 01/23)	1.00	х						0.	0.	0.
(41) ADRIENNE VOLTAGGIO	1.00	Δ						0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0.
(42) NICHOLE WALKER	1.00							<b>```</b>	••	
DIRECTOR		х						0.	0.	0.
(43) DAVE WELSH	1.00									
DIRECTOR		х						0.	0.	0.
(44) DAN WINTER	1.00									
DIRECTOR		х						0.	0.	0.

332201 04-01-23

TNC 68-0363121 Page 9 Form 990 (2023) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) (A) Revenue excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a **1 a** Federated campaigns 1b b Membership dues 1,807,946. c Fundraising events 1c 817,355 d Related organizations 1d 1,166,312. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 6,894,183 1f 132,630. g Noncash contributions included in lines 1a-1f 1g |\$ 10,685,796. h Total. Add lines 1a-1f **Business Code** 2 a REGISTRATION FEES 624110 12,986. 12,986. Program Service Revenue b С d е f All other program service revenue 12,986, g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 637,586 637,586. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents 6a 6b **b** Less: rental expenses 6c c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 19,000. assets other than inventory 7a b Less: cost or other basis 12,793. and sales expenses 7b Other Revenue **c** Gain or (loss) 7c 6,207. 6,207. 6,207. d Net gain or (loss)  ${\bf 8}~{\bf a}~$  Gross income from fundraising events (not including \$ 1,807,946. of contributions reported on line 1c). See Part IV, line 18 390,926. 8a **b** Less: direct expenses 399,030. 8b -8,104 -8,104. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See 8,874. Part IV, line 19 9a 770. **b** Less: direct expenses 9b 8,104 8,104. c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 28,392. 10a and allowances 22,848 b Less: cost of goods sold 10b 5,544. 5,544. c Net income or (loss) from sales of inventory **Business Code** Miscellaneous 11 a MISCELLANEOUS INCOME 900099 18,178. 18,178 Revenue b С d All other revenue 18,178 e Total. Add lines 11a-11d 11,366,297. 12,986, 0. 667,515. 12 Total revenue. See instructions Form 990 (2023)

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332009 12-21-23

INC.

Part IX Statement of Functional Expenses

Form 990 (2023)

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 respons		r organizations must com his Part IX	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X
Do not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
7b, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
<b>1</b> Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	416,397.	416,397.		
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
<ul> <li>4 Benefits paid to or for members</li> <li>5 Compensation of current officers, directors,</li> </ul>				
trustees, and key employees	1,204,052.	510,734.	305,599.	387,719.
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	4,483,523.	3,372,756.	16,522.	1,094,245.
8 Pension plan accruals and contributions (include	, ,	, ,	,	
section 401(k) and 403(b) employer contributions)	130,361.	102,901.		27,460.
9 Other employee benefits	411,821.	319,117.		92,704.
<b>10</b> Payroll taxes	459,322.	339,595.	7,416.	112,311.
11 Fees for services (nonemployees):				
a Management				
<b>b</b> Legal	3,796.	2,562.	285.	949.
c Accounting	160,462.	108,312.	12,035.	40,115.
d Lobbying	171,349.	155,150.	1,958.	14,241.
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 Sch O.)	1,771,665.	698,573.	31,593.	1,041,499.
12 Advertising and promotion	771,620.	558,958.		212,662.
13 Office expenses	318,738.	236,533.	11,759.	70,446.
14 Information technology	165,028.	105,494.	10,682.	48,852.
15 Royalties				
16 Occupancy	470,487.	333,121.	32,052.	105,314.
17 Travel	151,521.	107,415.	1,316.	42,790.
<b>18</b> Payments of travel or entertainment expenses				
for any federal, state, or local public officials	200, 252	004 445	C 100	01 540
19 Conferences, conventions, and meetings	302,353.	204,447.	6,166.	91,740.
20 Interest	4,049.	2,733.	304.	1,012.
21 Payments to affiliates	774,805.	774,805.	010 0	10 007
22 Depreciation, depletion, and amortization	51,308.	34,633. 115,653	3,848.	12,827. 45,118.
23 Insurance	173,448.	115,653.	12,077.	45,110.
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 0.)	1,751,833.	1,747,145.	1,322.	3,366.
b OTHER EXPENSES	197,183.	167,223.	3,172.	26,788.
c RECOGNITION COSTS	100,508.	68,809.	2,128.	29,571.
d			_,	,,,,,,
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	14,445,629.	10,483,066.	460,834.	3,501,729.
<b>26 Joint costs</b> . Complete this line only if the organization	-,,•			, _, _,
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here $X$ if following SOP 98-2 (ASC 958-720)				
332010 12-21-23		1	I	Form <b>990</b> (2023

11

	<u>990 (</u> 2 <b>t X</b>					00-03	363121 Page
		Check if Schedule O contains a response or note	to any line i	n this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			8,350,720.	2	7,165,2
	3	Pledges and grants receivable, net			15,256,989.	3	469,20
	4	Accounts receivable, net			723,493.	4	698,4
	5	Loans and other receivables from any current or	former office	er, director,			
		trustee, key employee, creator or founder, substa	antial contrib	utor, or 35%			
		controlled entity or family member of any of these	e persons			5	
	6	Loans and other receivables from other disqualifi	ed persons (	as defined			
		under section 4958(f)(1)), and persons described	in section 49	958(c)(3)(B)		6	
2	7	Notes and loans receivable, net				7	
400010	8	Inventories for sale or use			15,000.	8	15,0
ξ	9				270,009.	9	248,58
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	670,125.			
	b	Less: accumulated depreciation	10b	531,904.	125,763.	10c	138,22
	11	Investments - publicly traded securities				11	13,297,48
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	2,864,720.	15	2,412,03		
	16	Total assets. Add lines 1 through 15 (must equa			27,606,694.	16	24,444,2
	17	Accounts payable and accrued expenses			559,918.	17	660,30
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete P				21	
,	22	Loans and other payables to any current or forme	er officer, dir	ector,			
		trustee, key employee, creator or founder, substa	antial contrib	utor, or 35%			
		controlled entity or family member of any of these	e persons	L		22	
i	23	Secured mortgages and notes payable to unrelat	ed third part	ties		23	
	24	Unsecured notes and loans payable to unrelated	third parties	;L		24	
	25	Other liabilities (including federal income tax, pay	ables to rela	ited third			
		parties, and other liabilities not included on lines	17-24). Com	plete Part X			
		of Schedule D			2,716,355.	25	2,507,64
	26	Total liabilities. Add lines 17 through 25			3,276,273.	26	3,168,00
		Organizations that follow FASB ASC 958, chec	k here	X			
8		and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions	7,126,542.	27	9,025,0		
	28	Net assets with donor restrictions			17,203,879.	28	12,251,1
		Organizations that do not follow FASB ASC 95	8, check he	ere 🗌			
-		and complete lines 29 through 33.					
<u>}</u>	29	Capital stock or trust principal, or current funds				29	
;	30	Paid-in or capital surplus, or land, building, or equ				30	
	31	Retained earnings, endowment, accumulated inc	ome, or othe	er funds		31	
	32	Total net assets or fund balances			24,330,421.	32	21,276,24
-	33				27,606,694.	33	24,444,2

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Form	n 990 (2023) INC.	68-03631	.21	Pag	<sub>ge</sub> 12
Pa	Int XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	11	,366,	297.
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	14	,445,	629.
3	Revenue less expenses. Subtract line 2 from line 1	3	- 3	,079,	332.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	24	,330,	421.
5	Net unrealized gains (losses) on investments	5		25,	158.
6	Donated services and use of facilities	6			
7	Investment expenses	1 1			
8	Prior period adjustments				
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	21	,276,	247.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Sched	ule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separ	ate basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on S	chedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the red				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2023)

SC	HEC	DULE A		Dublic Cha	rity Status an	d Duk	lia Qu	innort		OMB No. 1545-0047
(Form 990)				2023						
					nization is a section 501 47(a)(1) nonexempt cha					2020
		f the Treasury nue Service			ttach to Form 990 or Fo Form990 for instructior			ormation.		Open to Public Inspection
Nam	ne of t	the organization		-	HERN CALIFORNIA,				Employer	identification number
			INC.							68-0363121
	rt I				(All organizations must c			ee instructior	S.	
	organ		•	•	For lines 1 through 12, cl		,			
1	$\square$				on of churches described		on 170(b)(1	I)(A)(i).		
2	$\square$				Attach Schedule E (Form			::)		
3 4	H	•		i v	anization described in <b>se</b> njunction with a hospital				Viii) Entor	the hospital's name
4		city, and state	-			acscribea	iii Sectio			the hospital s hame,
5		•		or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
-				Complete Part II.)	с ,	·	, ,			
6		A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organizati	on that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general j	oublic described in
		section 170(I	<b>)(1)(A)(vi).</b> (C	omplete Part II.)						
8		-			(1)(A)(vi). (Complete Par					
9		0			in section 170(b)(1)(A)(	· ·			•	
			or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	e or
10		university:	on that norma	Ilv receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns membersh	in fees and	d aross receipts from
		0		, ()	t to certain exceptions; a			,	• •	0
		income and u	nrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section	509(a)(2). (Cor	mplete Part III.)						
11		An organizati	on organized a	and operated exclusi	ively to test for public sat	fety. See	section 50	09(a)(4).		
12		An organizati	on organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
				-	d in section 509(a)(1) o					Check the box on
		-	-	• ·	f supporting organizatior				-	
а				-	upervised, or controlled	• • • •	-			
			-	complete Part IV, Se	gularly appoint or elect a	majonty c				ipporting
b		¬ ~		•	or controlled in connect	ion with it:	s supporte	ed organizatio	n(s), by hay	vina
				•	anization vested in the sa			e e		•
		organizatio	n(s). You mus	t complete Part IV,	Sections A and C.	-				
с		Type III fun	ctionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functional	ly integrate	ed with,
			•	.,.	). You must complete I			-		
d		_ ,,	-	•	porting organization oper				0	( )
				•	ation generally must sat	•		•	an attentiv	/eness
		- ·	,	,	nplete Part IV, Sections written determination from	,				
е		—	Ũ					турет, туре	п, туре п	
f	functionally integrated, or Type III non-functionally integrated supporting organization.  f Enter the number of supported organizations									
g				about the supporte						
	(	i) Name of suppo		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	anization listed ng document?	(v) Amount o	-	(vi) Amount of other
		organization			above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions)
Tota	al									

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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) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 26,306,166. 10,439,493 8,043,389 12,693,875. 10,685,796. 68,168,719. 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 10,439,493, 8,043,389 12 693 875 26,306,166, 10 685 796. 68,168,719. 4 Total. Add lines 1 through 3 The portion of total contributions 5 by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 357,208. 67,811,511. 6 Public support. Subtract line 5 from line 4 Section B. Total Support <u>(a)</u> 2019 <u>(e)</u> 2023 Calendar year (or fiscal year beginning in) (b) 2020 (c) 2021 (d) 2022 (f) Total 10,439,493. 8,043,389, 12,693,875, 26,306,166. 10,685,796. 68,168,719. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 11,489 10,027 637,586. 10,185. 95,532. 764,819. 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.) 27,622. 27,473 30,740 28,608. 46,570. 161,013. 69,094,551. **11 Total support.** Add lines 7 through 10 12,986. 12 **12** Gross receipts from related activities, etc. (see instructions) 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 Section C. Computation of Public Support Percentage 98.14 14 % 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 15 Public support percentage from 2022 Schedule A, Part II, line 14 97 05 15 % 16a 33 1/3% support test - 2023. 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 Х b 33 1/3% support test - 2022. 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 17a 10% -facts-and-circumstances test - 2023. 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 b 10% -facts-and-circumstances test - 2022. 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 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

Schedule A (Form 990) 2023

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68-0363121 Page **2** 

### Schedule A (Form 990) 2023 Part III Support Schedule for Organizations Described in Section 509(a)(2)

INC.

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

Sec	ction A. Public Support	<u></u>	,				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	23 (f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	23 (f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)			for which any fifth it	<u> </u>		
14	First 5 years. If the Form 990 is for the	-			•		
Sec	check this box and stop here	c Support Per	centage				<u></u>
	Public support percentage for 2023 (			column (f))		15	%
	Public support percentage from 2022			.,,		16	%
	ction D. Computation of Invest					1 1	
	Investment income percentage for <b>20</b> Investment income percentage from					17 18	%
	33 1/3% support tests - 2023. If the						
130	more than 33 1/3%, check this box a						
b	<b>33 1/3% support tests - 2022.</b> If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 12-21-23						dule A (Form 990) 2023
			16				

1

2

3a

3b

3c

4a

4b

4c

5a

5b

<u>5c</u>

6

Yes No

## Schedule A (Form 990) 2023

## Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

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- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

332024 12-21-23

 7

 8

 9a

 9b

 9c

 9c

 10a

 10b

 Schedule A (Form 990) 2023

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	SPECIAL OLYMPICS NORTHERN CALIFORNIA, 990) 2023 INC.	68-0363121		
chedule A (Forn Part IV Su	porting Organizations (continued)	00 0303121	Pa	age
			Yes	N
1 Has the ord	anization accepted a gift or contribution from any of the following persons?		103	
	o directly or indirectly controls, either alone or together with persons described on lines 11b and			
	he governing body of a supported organization?	11a		
	nber of a person described on line 11a above?	11b		
	olled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Pa		11c		
ection B. Ty	be I Supporting Organizations			-
			Yes	N
more suppo directors, c effectively of	erning body, members of the governing body, officers acting in their official capacity, or membership of or rted organizations have the power to regularly appoint or elect at least a majority of the organization's of trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) perated, supervised, or controlled the organization's activities. If the organization had more than one supp describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among	ficers,		
	rganizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	nization operate for the benefit of any supported organization other than the supported			
organizatio	(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	providing such benefit carried out the purposes of the supported organization(s) that operated,			
	or controlled the supporting organization.	2		
ection C. Ty	be II Supporting Organizations			
			Yes	N
I Were a maj	rity of the organization's directors or trustees during the tax year also a majority of the directors			
or trustees	f each of the organization's supported organization(s)? If "No," describe in Part VI how control			
or manager	ent of the supporting organization was vested in the same persons that controlled or managed			
the support	d organization(s).	1		
ection D. Al	Type III Supporting Organizations			
			Yes	N
I Did the org	nization provide to each of its supported organizations, by the last day of the fifth month of the			
organizatio	's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
year, (ii) a c	py of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
organizatio	's governing documents in effect on the date of notification, to the extent not previously provided?	1		
-	the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	tion maintained a close and continuous working relationship with the supported organization(s).	2		
-	the relationship described on line 2, above, did the organization's supported organizations have a			
-	pice in the organization's investment policies and in directing the use of the organization's			
-	ssets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	rganizations played in this regard.	3		
ection E. Ty	e III Functionally Integrated Supporting Organizations			•
Check the	ox next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	ructions).		
	ganization satisfied the Activities Test. Complete line 2 below.	,		
	ganization is the parent of each of its supported organizations. Complete line 3 below.			

С	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruction
C C	The organization supported a governmental entity.	. Describe in Fail VI now vou subborted a dovernmental entity isee instructio

18

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

За

Yes No

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	SPECIAL	OLYMPICS	NORTHERN	CALIFORNIA
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	SPECIAL OLYMPICS NORTHERN CALIFORN	IA,		
Sche	edule A (Form 990) 2023 INC.			68-0363121 Page <b>6</b>
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	izations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must			
Sect	ion 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	Ť		
Ŭ	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		
	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
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		
	ion 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 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

332026 12-21-23

_	edule A (Form 990) 2023 INC.	(a)(2) Supporting Area	nizations		68-0363121	Page 7		
	rt V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	inizations (continu	ued)	0			
	ion D - Distributions			4	Current Ye	ar		
	Amounts paid to supported organizations to accomplish exer			1				
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported						
	organizations, in excess of income from activity	a of our ported or conizations		2				
3		Administrative expenses paid to accomplish exempt purposes of supported organizations						
4	Amounts paid to acquire exempt-use assets		4 5					
<u>5</u> 6	Qualified set-aside amounts (prior IRS approval required - pro	<u>ovide details in Part VI)</u>		6				
7	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. <b>Total annual distributions.</b> Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the	o organization is responsivo		<b>_</b> '				
0	(provide details in <b>Part VI</b> ). See instructions.	le organization is responsive		8				
9	Distributable amount for 2023 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
10		(i)	(ii)	10	(iii)			
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	ıs	Distributab Amount for 2			
1	Distributable amount for 2023 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2023 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2023							
а	From 2018							
b	From 2019							
с	From 2020							
d	From 2021							
е	From 2022							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2023 distributable amount							
i	Carryover from 2018 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2023 from Section D,							
	line 7: \$							
а	Applied to underdistributions of prior years							
b	Applied to 2023 distributable amount							
C	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2023, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2023. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2024. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
	Excess from 2019							
	Excess from 2020							
	Excess from 2021							
	Excess from 2022							
P	Excess from 2023							

Schedule A (Form 990) 2023

SPECIAL OLY	MPICS NORTHERN CALIFORNIA,	
Schedule A (Form 990) 2023 INC.		68-0363121 Page <b>8</b>
Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c line 1; Part IV, Section D, lines 2 and 3; Par	de the explanations required by Part II, line 10; Part II, line 17 c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lin rt IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Pa ection E, lines 2, 5, and 6. Also complete this part for any add	es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,
SCHEDULE A, PART II, LINE 10, EXPLANATION	FOR OTHER INCOME:	
MISCELLANEOUS INCOME		
2020 AMOUNT: \$ 5,851.		
2021 AMOUNT: \$ 3,381.		
2022 AMOUNT: \$ 8,655.		
2023 AMOUNT: \$ 18,178.		
INVENTORY SALES INCOME		
2019 AMOUNT: \$ 27,622.		
2020 AMOUNT: \$ 21,622.		
2021 AMOUNT: \$ 27,359.		
2022 AMOUNT: \$ 19,953.		
2023 AMOUNT: \$ 28,392.		

#### \*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2023

Employer identification number

68-0363121

Name of the organizatio	Name	of the	organization
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Schedule B

Department of the Treasury

Internal Revenue Service

(Form 990)

SPECIAL OLYMPICS NORTHERN CALIFORNIA,

I	NC.
Organization type (check	< one):
Filers of:	Section:
Form 990 or 990-E7	$\begin{bmatrix} X \end{bmatrix}$ 501(c)( 3) (enter number) organization

Form 990 or 990-EZ	[A] SUI(C)( S) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

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

### **General Rule**

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

### Special Rules

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

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

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

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

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

	B (Form 990) (2023)			Page <b>2</b>
	rganization		Emplo	yer identification number
	OLYMPICS NORTHERN CALIFORNIA,		6	8-0363121
INC.			0	0-0303121
Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additiona	I space is needed.		
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Total contributio	ns	Type of contribution
		\$605,	,666.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Total contributio	ns	Type of contribution
2		\$394,	,275.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Total contributio	ns	Type of contribution
3		\$310	,646.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
4		\$250	,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
5		\$237	,669.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

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2023.05000 SPECIAL OLYMPICS NORTHERN CUS00001

323452 12-26-23

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Schedule E	B (Form 990) (2023)		Page <b>3</b>
Name of or			Employer identification number
	OLYMPICS NORTHERN CALIFORNIA,		C0. 02C2101
INC.			68-0363121
Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed	ł.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	Sobodulo B (Form 990) (2022)

323453 12-26-23

Schedule B (Form 990) (2023)

## 14381112 701245 CUS000000358

Schedule I	B (Form 990) (2023)			Page 4					
	organization			Employer identification number					
	OLYMPICS NORTHERN CALIFORNIA,								
INC. Part III	Exclusively religious, charitable, etc., contribution			68-0363121 that total more than \$1,000 for the year					
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional s	charitable, etc., contributions of \$1,000 o	* less for the year. (Enter this info	b. once.) \$					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held					
		(e) Transfer of g	 ift						
	Transferee's name, address, a			ransferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held					
Part I									
	Transferee's name, address, a	(e) Transfer of g nd ZIP + 4		ransferor to transferee					
			<b>i</b>						
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4		Relationship of t	ransferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held					
·	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of t	ransferor to transferee					
323454 12-26				Schedule B (Form 990) (2023)					

14381112 701245 CUS000000358

Department of the Treasury Internal Revenue Service							
If the organization ans	wered "Yes" on	Form 990, Part IV, line 3, or Forr	n 990-EZ, Part V, line	46 (Political Campaign A	Activities), then:		
<ul> <li>Section 501(c)(3) org</li> </ul>	ganizations: Com	plete Parts I-A and B. Do not com	plete Part I-C.				
<ul> <li>Section 501(c) (othe</li> </ul>	r than section 50	1(c)(3)) organizations: Complete P	arts I-A and C below. I	Do not complete Part I-B.			
<ul> <li>Section 527 organiz</li> </ul>	ations: Complete	Part I-A only.					
If the organization answ	wered "Yes" on	Form 990, Part IV, line 4, or Forr	m 990-EZ, Part VI, line	e 47 (Lobbying Activities)	, then:		
<ul> <li>Section 501(c)(3) org</li> </ul>	ganizations that h	nave filed Form 5768 (election und	ler section 501(h)): Cor	mplete Part II-A. Do not co	mplete Part II-B.		
<ul> <li>Section 501(c)(3) org</li> </ul>	ganizations that h	nave NOT filed Form 5768 (election	n under section 501(h)	): Complete Part II-B. Do n	ot complete Part II-A.		
If the organization answ	wered "Yes" on	Form 990, Part IV, line 5 (Proxy	Tax) (see separate ins	structions) or Form 990-E	Z, Part V, line 35c (Proxy		
Tax) (see separate inst							
		ions: Complete Part III.		1			
Name of organization	SPECIAL OLY	MPICS NORTHERN CALIFORNIA	Α,	Emp	loyer identification number		
	INC.				68-0363121		
Part I-A Compl	ete if the org	anization is exempt under	r section 501(c) o	r is a section 527 or	ganization.		
		ures gn activities					
Part I-B Compl	ete if the org	anization is exempt under	r section 501(c)(3	).			
1 Enter the amount of	of any excise tax	incurred by the organization unde	r section 4955	\$			
		incurred by organization managers					
		n 4955 tax, did it file Form 4720 fo					
		·					
b If "Yes," describe ir	n Part IV.						
Part I-C Compl	ete if the org	anization is exempt under	r section 501(c), e	except section 501(c	)(3).		
1 Enter the amount d	lirectly expended	l by the filing organization for sect	ion 527 exempt function	on activities \$	S		
2 Enter the amount o	of the filing organ	ization's funds contributed to othe	er organizations for sec	ction 527			
exempt function ac	tivities			\$	i		
		. Add lines 1 and 2. Enter here and					
line 17b				\$	i		
4 Did the filing organ	ization file <b>Form</b>	1120-POL for this year?			Yes No		
made payments. For contributions received	or each organizat ved that were pro nmittee (PAC). If a	nployer identification number (EIN tion listed, enter the amount paid to pomptly and directly delivered to a st additional space is needed, provid	from the filing organiza separate political orgar le information in Part IV	tion's funds. Also enter th nization, such as a separat	e amount of political		
( <b>a)</b> Name	9	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

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

Schedule C (Form 990) 2023

OMB No. 1545-0047

2023

LHA 332041 11-06-23

SCHEDULE C

(Form 990)

	SPECIAL O	LYMPICS	NORTHERN CALIFOR	RNIA,		
	INC.					363121 Page <b>2</b>
Part II-A Complete if the org	anization	is exer	npt under sectior	n 501(c)(3) and file	ed Form 5768 (ele	ection under
section 501(h)).						
A Check if the filing organiza	tion belongs	s to an affi	liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and shar	re of excess	lobbying e	expenditures).			
B Check if the filing organiza	tion checked	d box A ar	nd "limited control" pro	ovisions apply.		
	ts on Lobby ditures" mea	• •	nditures Ints paid or incurred.)		<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public	opinion (	grassroots lobbying)			
b Total lobbying expenditures to influ	uence a legis	slative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lin	nes 1a and 1	1b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditures	s (add lines	1c and 1d	)			
f Lobbying nontaxable amount. Ente						
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:		
not over \$500,000,		20% of	the amount on line 1e.			
over \$500,000 but not over \$1,000	,000,	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
over \$1,000,000 but not over \$1,500,000, \$175,000 plus 10% of the excess over \$1,000,000.						
over \$1,500,000 but not over \$17,0	000,000,	\$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
over \$17,000,000,		\$1,000,	000.			
g Grassroots nontaxable amount (en	ter 25% of li	ne 1f)				
h Subtract line 1g from line 1a. If zero	o or less, en	ter -0				
i Subtract line 1f from line 1c. If zero	o or less, ent	er -0				
j If there is an amount other than zer						
reporting section 4911 tax for this	year?					Yes No
(Some organizations th	hat made a s See t	section 5 the separ	ate instructions for lir	have to complete all ones 2a through 2f.)	of the five columns b	elow.
	Lobby	ing Expe	nditures During 4-Yea	ar Averaging Period		T
Calendar year (or fiscal year beginning in)	<b>(a)</b> 20	)20	<b>(b)</b> 2021	(c) 2022	<b>(d)</b> 2023	<b>(e)</b> Total
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount e Grassroots ceiling amount						

Schedule C (Form 990) 2023

332042 11-06-23

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

TNC			

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Part II-B Complete if the organization is exempt under section 501(c)(3) and ha (election under section 501(h)).	s NOT file	ed Form	5768	
	, i	,		<u>,                                     </u>
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(	o)
of the lobbying activity.	Yes	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:	х			
<ul> <li>a Volunteers?</li> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> </ul>	X		-	
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		Х		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X			132,383.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?	X			38,965.
j Total. Add lines 1c through 1i				171,348.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X		
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	n 501(c)(5	b). or se	ction	
501(c)(6).		,,		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from th				
Part III-B Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."	'No" OR (	(b) Part		3, is
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	ai			
a Current year		2a		
b Carryover from last year				
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information		5		
	liet), Dert II.	A lines 1 (		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES:	115t), Fait 119		110 2 (366	
THE ORGANIZATION MET WITH GOVERNOR'S OFFICE STAFF, STATE LEGISLATIVE				
MEMBERS AND STAFF, CONGRESSIONAL REPS AND STAFF, COUNTY SUPERVISORS AND				
STAFF TO EDUCATE THEM ON THE SCOPE AND BENEFITS OF SPECIAL OLYMPICS				
PROGRAMMING AND ADVOCATED FOR FUNDING APPROPRIATIONS IN GOVERNMENT				
BUDGETS.				
332043 11-06-23		Sched	ule C (Form	990) 2023

Schedule C (Form 990) 2023

 Schedule C (Form 990) 2023
 INC.

 Part IV
 Supplemental Information (continued)

PART II-B, LINE 1I :

OTHER ACTIVITIES: TRAVEL, ETC TO SACRAMENTO FOR 2023 CALIF CAPITAL DAY

OTHER ACTIVITIES: TRAVEL, ETC TO SACRAMENTO FOR 2023 DC HILL DAY

OTHER ACTIVITIES: TRAVEL, ETC TO SACRAMENTO FOR 2024 DC HILL DAY

Schedule C (Form 990) 2023

332044 11-06-23

30 2023.05000 SPECIAL OLYMPICS NORTHERN CUS00001

14381112 701245 CUS000000358

SCI	HEDULE D	Supplementa	al Financial Statements	3		OMB No. 15	45-0047	
	(Form 990) Complete if the organization answered "Yes" on Form 990,						23	
Departi	nent of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12 Attach to Form 990.	b.		Open to	Public	
Interna	Revenue Service	· · · · · · · · · · · · · · · · · · ·	0 for instructions and the latest informa			Inspecti		
Nam	e of the organizati	on SPECIAL OLYMPICS NORTHERN C INC.	ALIFORNIA,			identification 68-0363121		
Par		ations Maintaining Donor Advise		or Acc	ounts.	Complete if th	e	
	organizatio	n answered "Yes" on Form 990, Part IV, lin						
			(a) Donor advised funds	(b)	) Funds and	d other accou	nts	
1		nd of year f contributions to (during year)						
2 3		f grants from (during year)						
4								
5		on inform all donors and donor advisors in		ed funds				
	are the organizatio	n's property, subject to the organization's	exclusive legal control?			Yes	No No	
6	•	on inform all grantees, donors, and donor a			•			
		oses and not for the benefit of the donor o	, , , , , ,		0	Vee		
Par	t II Conserv	ation Easements. Complete if the org	panization answered "Yes" on Form 990. F	Part IV, lii	ne 7.	Yes	NoNo	
1		servation easements held by the organization		urere, m				
		of land for public use (for example, recrea		a histori	cally impor	tant land area	L	
	Protection o	f natural habitat	Preservation of	a certifie	ed historic s	structure		
	Preservation	of open space						
2		through 2d if the organization held a qualit	fied conservation contribution in the form of	of a cons				
-	day of the tax year					at the End of th	e lax fear	
a b		onservation easements			2a 2b			
c	•	vation easements on a certified historic structure	ucture included on line 2a	····· F	20 2c			
		vation easements included on line 2c acqu						
		ture listed in the National Register			2d			
3		vation easements modified, transferred, rel			ation during	the tax		
	year							
4		where property subject to conservation eas						
5	8	tion have a written policy regarding the per						
6		orcement of the conservation easements it r hours devoted to monitoring, inspecting,				U Yes	No No	
U		nouis devoted to monitoring, inspecting,	handing of violations, and emotoring cons	civation	cascinents	during the ye		
7	Amount of expens	es incurred in monitoring, inspecting, hanc	lling of violations, and enforcing conservat	ion ease	ments duri	ng the year		
8	Does each conser	vation easement reported on line 2d above	satisfy the requirements of section 170(h)	(4)(B)(i)				
	and section 170(h)					Yes	No	
9		be how the organization reports conservation						
		I include, if applicable, the text of the footr ounting for conservation easements.	note to the organization's financial stateme	ents that	describes 1	ine		
Par		ations Maintaining Collections of	Art, Historical Treasures, or Ot	her Sin	nilar Ass	ets.		
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	nd balan	ce sheet w	orks		
	of art, historical tre	easures, or other similar assets held for put	blic exhibition, education, or research in fu	rtherance	e of public			
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these items	s.				
b	-	elected, as permitted under FASB ASC 95						
		ures, or other similar assets held for public	exhibition, education, or research in furth	erance o	of public sei	rvice,		
	•	ng amounts relating to these items.			¢			
		ded on Form 990, Part VIII, line 1 d in Form 990, Part X						
2	.,	received or held works of art, historical tre			Ψ ovide			
_		unts required to be reported under FASB A		J, PN				
а	-	on Form 990, Part VIII, line 1	-		\$			
		Form 990, Part X						
LHA	For Paperwork R	eduction Act Notice, see the Instructions	s for Form 990.		Schee	dule D (Form	990) 2023	
332051	09-28-23		31					

	SPECIAL OLY	MPICS NORTHERN	CALIF	ORNIA,							
	dule D (Form 990) 2023 INC.	allestions of Ar	4   :a4					-036		Р	age <b>2</b>
	t III Organizations Maintaining C								(contii	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the f	ollowing that	t make sig	nificant use c	of its			
	collection items (check all that apply).		. —								
а	Public exhibition	c			hange progra	am					
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co				0			Part 3	XIII.		
5	During the year, did the organization solicit o								7		-
De	to be sold to raise funds rather than to be ma								Yes		No
Pa	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	organizatior	n answered "	Yes" on Fo	orm 990, Parl	t IV, lir	ne 9, or		
	· · · · · · · · · · · · · · · · · · ·										
1a	Is the organization an agent, trustee, custodi		•					_	1.	_	٦.,
	on Form 990, Part X?							. L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing t	able:					Amoun	+	
									Amoun		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f		1		1
	Did the organization include an amount on F						/?	L	Yes		No
Pa	If "Yes," explain the arrangement in Part XIII.										
Fai	TV Endowment Funds Complete if		1		m 990, Part (c) Two yea		d) Three years	book	(a) Equ	NOORO	book
		(a) Current year	(0) F	Prior year	(C) TWO yea	IS DACK (	a) Three years	DACK	<b>(e)</b> Fou	years	DACK
	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		e (line 1ç	g, column (a	) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment										
С		%									
	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held ar	nd administer	red for the				X	
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Pa	<b>t VI</b> Land, Buildings, and Equipm				<b>.</b>	De tV l	10				
	Complete if the organization answere										
	Description of property	(a) Cost or c		• •	or other		cumulated		( <b>d)</b> Boo	k valu	е
		basis (investr	nent)	Dasis	(other)	aepr	reciation				
	Land							-			
	Buildings				20.044		28 21-	+			005
	Leasehold improvements				38,244.		37,247	-			997.
	Equipment				345,504.		266,636	-		,	868.
e	Other				286,377.		228,021	·		58,	356.

138,221. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 INC.			68-0363121 Page
Part VII Investments - Other Securities Complete if the organization answered "Yes" o	n 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 e	end-of-vear market value
(1) Financial derivatives	(		······································
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	enu-or-year market value
<u>(1)</u>			
(2)			
(3)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1) DEPOSITS			52,790
(2) BARTER ACCOUNT			62,089
(3) OPERATING LEASE RIGHT-OF-USE ASSET			2,297,131
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	<i>(R</i> ))		2,412,010
Part X Other Liabilities	(0))		, ,
Complete if the organization answered "Yes" o	n 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) EIDL LOAN			145,254
(3) OPERATING LEASE			2,362,391
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col.	\ <i>//</i>		2,507,645

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

Schedule D (Form 990) 2023

X

332053 09-28-23

SPECIAL OLYMPICS NORTHERN CALIFORNI	PECIAL	OLYMPICS	NORTHERN	CALIFORNI
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Sche	dule D (Form 990) 2023 INC.			68-0363121	Page 4
	t XI Reconciliation of Revenue per Audited Financial Statem	ents With I	Revenue per Re	turn	<u></u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	25,495,286.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	25,158.		
b	Donated services and use of facilities	2b	14,103,831.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e :	14,128,989.
3	Subtract line 2e from line 1			3	11,366,297.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				11,366,297.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten		Expenses per H	Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	а.			
1	Total expenses and losses per audited financial statements			1 3	28,549,460.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	<b>2</b> a	14,103,831.	-	
b	Prior year adjustments	2b		-	
с	Other losses			-	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			<u> </u>	14,103,831.
3	Subtract line 2e from line 1			3 3	14,445,629.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b			-	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	14,445,629.
Pa	t 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.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL

REVENUE CODE ("IRC") SECTION 501(C)(3) AND FROM STATE FRANCHISE AND/OR

INCOME TAXES UNDER THE CALIFORNIA REVENUE AND TAXATION CODE SECTION

23701(D). THE ORGANIZATION HAS EVALUATED ITS CURRENT TAX POSITIONS AND HAS

CONCLUDED THAT, AS OF DECEMBER 31, 2023 AND 2022, THE ORGANIZATION DOES

NOT HAVE ANY SIGNIFICANT UNCERTAIN TAX POSITIONS FOR WHICH A RESERVE WOULD

BE NECESSARY. THE ORGANIZATION FILES U.S. FEDERAL, AND CALIFORNIA STATE

TAX RETURNS. FOR U.S. FEDERAL TAX RETURNS, THE ORGANIZATION IS NO LONGER

SUBJECT TO TAX EXAMINATION FOR YEARS PRIOR TO 2020. FOR CALIFORNIA STATE

TAX RETURNS, THE ORGANIZATION IS GENERALLY NO LONGER SUBJECT TO TAX

EXAMINATIONS FOR YEARS PRIOR TO 2019.

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 Schedule D (Form 990) 2023
 INC.

 Part XIII
 Supplemental Information (continued)

PART XI, LINE 2B AND PART XII LINE 2A:

TOTAL IN-KIND DONATIONS OF \$14,103,831 CONSIST OF:

\$12,168,767 CERTIFIED COACHES' TIME

\$247,375 TRAINING/COMPETITION FACILITIES AND LODGING

\$1,027,000 MEDICAL AND OFFICIATING SERVICES

\$660,689 OF ADVERTISING

Schedule D (Form 990) 2023

332055 09-28-23

35 2023.05000 SPECIAL OLYMPICS NORTHERN CUS00001

14381112 701245 CUS000000358

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047			
(Form 990)	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.									
Department of the Treasury	Lange at the second									
Name of the organization										
	3121									
Part I Fundrais	ing Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, li	ne 17. Form 990	)-EZ filers are not			
	complete this part									
<ul> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solicitat</li> <li>d In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	ions email solicitations tations licitations on have a written o ed in Form 990, Pa	f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p	tion of tion of fundra (includ	non-g gover iising o ling of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?		Yes 🗌 No			
b If "Yes," list the 10 compensated at le	•	viduals or entities (fundraisers) pursuation	ant to	agreer	ments under which th	ie fundraiser is t	o be			
(i) Name and addres	s of individual	(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col. (	by) to (or retained by)			
			Yes	No						
Total										
	ch the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is exempt fror	n registration			

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

Schedule G (Form 990) 2023

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68-0363121 Page **2** 

INC. Schedule G (Form 990) 2023 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

		HIGH TECH	SUMMER GAMES FINAL	.,	(d) Total events
		CHALLENGE GOLF	LEG RUN	26	(add col. <b>(a)</b> through
		(event type)	(event type)	(total number)	col. <b>(c)</b> )
Ine			(010111)[00)		
Revenue	1 Gross receipts	558,415.	. 413,987.	1,060,326.	2,032,728.
	2 Less: Contributions		382,648.	936,758.	1,696,127.
	3 Gross income (line 1 minus line	2)	. 31,339.	123,568.	336,601.
	4 Cash prizes				
	5 Noncash prizes	2,353.	. 31,021.	43,761.	77,135.
penses	6 Rent/facility costs	83,792.	. 250.	31,855.	115,897.
Direct Expenses	7 Food and beverages	74,148.		35,393.	109,541.
_	8 Entertainment	5,737.	,		5,737.
	9 Other direct expenses		68.	20,662.	36,395.
1	10 Direct expense summary. Add				344,705.
1	11 Net income summary. Subtract	line 10 from line 3, column (d)			-8,104.

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.

Revenue		<b>(a)</b> Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1 Gross revenue				
ss	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Direct E	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes %	└── Yes % └── No	└── Yes % └── No	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7 f	rom line 1, column (d)			
9	Enter the state(s) in which the organization conduc	ts gaming activities:			
	I Is the organization licensed to conduct gaming act If "No," explain:	ivities in each of these s	states?		Yes No
	Were any of the organization's gaming licenses rev If "Yes," explain:	• •	• •		Yes No
2					

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Schedule G (Form 990) 2023

SPECIAL OLYMPICS NORTHERN CALIFORNIA,

Sche	edule G (Form 990) 2023 INC.	6	8-036312	21	Page 3
11	Does the organization conduct gaming activities with no	onmembers?		Yes	No
		trust, or a member of a partnership or other entity formed			
		· · · · · ·		Yes	No
	Indicate the percentage of gaming activity conducted in				
		· 	13a	1	%
				<u> </u>	%
			[130		70
		s the organization's gaming/special events books and records:			
	Name				
	Address				
15a	Does the organization have a contract with a third party	from whom the organization receives gaming revenue?		Yes	No No
b	If "Yes," enter the amount of gaming revenue received I	by the organization \$ and the amount			
	of gaming revenue retained by the third party \$				
	If "Yes," enter name and address of the third party:				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	· · · · ·				
	Description of services provided				
	Director/officer Employee	Independent contractor			
17	Mandatory distributions:				
	Is the organization required under state law to make ch	aritable distributions from the gaming proceeds to			
				Yes	No No
		aw to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year				
-		explanations required by Part I, line 2b, columns (iii) and (v); and	Part III lir	105 9	9h 10h
	15b, 15c, 16, and 17b, as applicable. Also prov		r art m, m	103 0,	55, 105,
		de any additional information. See instructions.			
32000	13 00 13 03	Cal	adule C /	Form	990) 2023
JJ208	3 09-13-23	3.8	ieuule G	,r-orm	JJUJ 2023

		SFECTRE OBIMFICS NORTHEF	IN CALIFORNIA,		
Schedule C	G (Form 990) Supplemental Info	INC.		68-0363121	Page 4
Part IV	Supplemental Info	rmation (continued)			
				Schedule G	(Form 990)
332084 04-01-	-23				
			39		
			- <del>-</del>		

14381112 701245 CUS000000358

SCHEDULE I (Form 990)		OMB No. 1545-0047						
Department of the Treasury nternal Revenue Service			Go to www.irs	Attach to Form a.gov/Form990 for		ation.		Open to Public Inspection
Name of the organizatio	n SPECIAL OLYMPI INC.	CS NORTHERN						Employer identification numb 68-0363121
Part I General Inf	ormation on Grants ar	d Assistance						
criteria used to aw 2 Describe in Part IV Part II Grants and	tion maintain records to vard the grants or assist / the organization's pro- Other Assistance to D at received more than \$	tance? cedures for moni omestic Organ	toring the use of grant izations and Domestic	funds in the United c Governments. C	States. complete if the orga			X Yes
1 (a) Name and add	ress of organization prnment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MISSION VALLEY SEL 4210 TECHNOLOGY DF FREMONT, CA 94538			PUBLIC SCHOOL	32,000.	0.			SUPPORT SCHOOL DAY BASE PROGRAMS IN LOCAL SCHOO DISTRICT(S) OR SELPA(S)
DUBLIN UNIFIED SCH 8151 VILLAGE PKWY DUBLIN, CA 94568	OOL DISTR		PUBLIC SCHOOL	37,333.	0.			SUPPORT SCHOOL DAY BASE PROGRAMS IN LOCAL SCHOO DISTRICT(S) OR SELPA(S)
CONTRA COSTA CNTY 77 SANTA BARBARA F PLEASANT HILL, CA	D		PUBLIC SCHOOL	69,334.	0.			SUPPORT SCHOOL DAY BASE PROGRAMS IN LOCAL SCHOO DISTRICT(S) OR SELPA(S)
WEST CONTRA COSTA 1108 BISSELL AVE RICHMOND, CA 94801			PUBLIC SCHOOL	8,000.	0.			SUPPORT SCHOOL DAY BASE PROGRAMS IN LOCAL SCHOO DISTRICT(S) OR SELPA(S)
MONTEREY PENINSULA 700 PACIFIC ST MONTEREY, CA 95401			PUBLIC SCHOOL	10,333.	0.			SUPPORT SCHOOL DAY BASE PROGRAMS IN LOCAL SCHOO DISTRICT(S) OR SELPA(S)
PALO ALTO UNIFIED 25 CHURCHILL AVE	SCHOOL DISTR		PUBLIC SCHOOL	6,750.	0.			SUPPORT SCHOOL DAY BASH PROGRAMS IN LOCAL SCHOO DISTRICT(S) OR SELPA(S)

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

Schedule I (Form 990) 2023

,				(	68-0363121	Page 1
· Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Par	t II.)		

Part II Continuation of Grants and Othe	er Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	art II.)	I
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA CLARA USD							SUPPORT SCHOOL DAY BASEI
L889 LAWRENCE RD							PROGRAMS IN LOCAL SCHOOL
SANTA CLARA, CA 95051		PUBLIC SCHOOL	7,125.	٥.			DISTRICT(S) OR SELPA(S)
SAN FRANCISCO USD							SUPPORT SCHOOL DAY BASEI
LO98 HARRISON ST							PROGRAMS IN LOCAL SCHOOL
SAN FRANCISCO, CA 94103		PUBLIC SCHOOL	64,000.	0.			DISTRICT(S) OR SELPA(S)
FAIRFIELD-SUISUN USD							SUPPORT SCHOOL DAY BASED
2490 HILLBORN RD							PROGRAMS IN LOCAL SCHOOL
FAIRFIELD, CA 94534		PUBLIC SCHOOL	8,500.	0.			DISTRICT(S) OR SELPA(S)
,							
SANTA ROSA CITY SCHOOLS							SUPPORT SCHOOL DAY BASEI
217 REDGEWAY DR							PROGRAMS IN LOCAL SCHOOL
SANTA ROSA, CA 95401		PUBLIC SCHOOL	11,978.	0.			DISTRICT(S) OR SELPA(S)
CLARK CNTY SCHOOL DISTR							SUPPORT SCHOOL DAY BASED
5100 W SAHARA AVE							PROGRAMS IN LOCAL SCHOOL
LAS VEGAS, NV 89146		PUBLIC SCHOOL	30,187.	0.			DISTRICT(S) OR SELPA(S)
WASHOE CNTY SCHOOL DISTR							SUPPORT SCHOOL DAY BASED
425 E 9TH ST							PROGRAMS IN LOCAL SCHOOL
RENO, NV 89512		PUBLIC SCHOOL	7,500.	0.			DISTRICT(S) OR SELPA(S)
			,,				
SPECIAL OLYMPICS NEVADA INC							SUPPORT START OF SEPARAT
4000 S EASTERN AVE SUITE 320							NEW SPECIAL OLYMPICS
LAS VEGAS, NV 89119	93-2574727	501(C)(3)	70,000.	0.			PROGRAM IN NV
	1	1	1				1

Schedule I (Form 990)

SPECIAL OI	LYMPICS	NORTHERN	CALIFORNIA,
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Schedule I (Form 990) 2022

Schedule I (Form 990) 2023 INC.					68-0363121	Page 2			
Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assista	ince			

PART I, LINE 2:

GRANTEES ARE SELECTED BY THE ORGANIZATION TO BE APPROACHED FOR THIS GRANT

PROGRAM. GRANTEES WORK WITH ORGANIZATION TO CREATE MUTUAL ANNUAL

PERFORMANCE METRICS. METRICS PERFORMANCE IS REVIEWED QUARTERLY AND

RENEWED/ADJUSTED EACH YEAR PRIOR TO AWARD OF ANY FURTHER GRANTS.

sc	HEDULE J	Compensation Information		OMB No.	1545-00	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highe	st	20	22	2
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line	23.			
	tment of the Treasury	Attach to Form 990.		Open to	o Publection	
	al Revenue Service 1e of the organizatior	Go to www.irs.gov/Form990 for instructions and the latest informatio		r identificati		
Indii	le of the organization	n SPECIAL OLYMPICS NORTHERN CALIFORNIA, INC.		-0363121	on nu	Inper
Pa	rt I Question	s Regarding Compensation	00-	-0303121		
	ducotion.				Yes	No
19	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on	Form 990		Tes	
Id		line 1a. Complete Part III to provide any relevant information regarding these items.	F0IIII 990,			
	First-class or c		nersonaluse			
	Travel for com		•			
		ation and gross-up payments Health or social club dues or initiation				
		spending account				
			autour, ottoly			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment o	or			
-	•	provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all director				
	-	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if ar	ny, of the following the organization used to establish the compensation of the organiza	ation's			
		ector. Check all that apply. Do not check any boxes for methods used by a related orga				
		ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation					
	·	compensation consultant X Compensation survey or study				
	X Form 990 of o		tion committee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	lated organization:				
а	Receive a severanc	e payment or change-of-control payment?		4a		x
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compe	nsation			
	contingent on the re					
а	The organization?			<u>5</u> a		X
b	Any related organiz	ation?		<u>5</u> b		X
		or 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compe	nsation			
	contingent on the n					
а	The organization?			<u>6a</u>		X
b		ation?		<u>6b</u>		X
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed pay				
		nes 5 and 6? If "Yes," describe in Part III		7	х	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	t to the			
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
_		1 53.4958-6(c)?				<u> </u>
For	Paperwork Reducti	ion Act Notice, see the Instructions for Form 990.	Sche	edule J (Forr	n 990	) 2023

LHA 332111 11-06-23

INC.

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

68-0363121

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		<b>(B)</b> Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DAVID SOLO	(i)	242,000.	65,000.	0.	12,280.	10,623.	329,903.	0.
CEO/PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CATHERINE DOMANSKI	(i)	183,071.	34,818.	0.	8,716.	17,339.	243,944.	0.
CDO	(ii)	0.	٥.	0.	0.	0.	0.	0.
(3) ILISA KESSLER	(i)	188,964.	26,367.	0.	8,613.	11,854.	235,798.	0.
соо	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MICHAEL A. MAYO	(i)	189,577.	17,635.	0.	8,288.	14,856.	230,356.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MATT COHEN	(i)	147,201.	13,991.	0.	6,448.	1,162.	168,802.	0.
CPO	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) TERRENCE THORNTON	(i)	151,612.	5,000.	0.	4,273.	7,591.	168,476.	0.
NV EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KEVIN ANDREWS	(i)	135,200.	4,750.	0.	5,568.	10,537.	156,055.	0.
SR DIRECTOR, IT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

68-0363121

Page 3

### Part III Supplemental Information

Schedule J (Form 990) 2023

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

DAVID SOLO IS ELIGIBLE FOR ANNUAL BONUS OF UP TO 20% OF HIS PRIOR YEAR BASE

PAY, SUBJECT TO REVIEW OF HIS PRIOR YEAR ANNUAL PERFORMANCE

INC.

GOALS/ACHIEVEMENTS AS PART OF HIS ANNUAL COMPENSATION REVIEW BY THE

EXECUTIVE COMMITTEE AND APPROVAL BY THE BOARD OF DIRECTORS.

OTHER EMPLOYEES ALSO RECEIVED BONUSES DURING THE YEAR BASED ON SIMILAR

CRITERIA.

## SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

23

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Employer identification number

68-0363121

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

INC.

SPECIAL OLYMPICS NORTHERN CALIFORNIA,

Par	tl T	ypes of Property							
			(a)	(b)	(c)		(d)		
			Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of noncash contr			-
			applicable		Form 990, Part VIII, line 1	g	ibution ai	nount	5
1	Art - Wor	ks of art							
2		orical treasures							
3		tional interests							
4		nd publications							
5		and household goods			37,500	.FMV			
6		other vehicles							
7		d planes							
8		al property							
9		s - Publicly traded							
10		s - Closely held stock							
11		s - Partnership, LLC, or							
	trust inte								
12	Securitie	s - Miscellaneous							
13		conservation contribution -							
	Historic s	structures							
14	Qualified	conservation contribution - Other							
15		ite - Residential							
16	Real esta	te - Commercial							
17		ite - Other							
18		les							
19		entory		6	49,723	.FMV			
20		d medical supplies							
21	Taxiderm								
22		l artifacts							
23		specimens							
24		gical artifacts							
25	Other	(ZOO PASSES )	х	1	27,000	.FMV			
26	Other	(EYE CARE )	х	2	18,40	.FMV			
27	Other	(,							
28	Other	(,							
29		of Forms 8283 received by the organ	nization during	the tax year for c	ontributions				
		the organization completed Form 8	-					0	
		<b>c</b> .		C				Yes	No
30a	During th	e year, did the organization receive	by contributio	n any property rep	orted in Part I, lines 1 thro	ugh 28, that it			
		d for at least 3 years from the date of							
		ourposes for the entire holding perio			•		30a		х
b		describe the arrangement in Part II.							
31	,	organization have a gift acceptance	e policy that re	equires the review of	of any nonstandard contrib	outions?	31	х	
		organization hire or use third partie							
	contribut			-			32a	x	
b		describe in Part II.							
33		anization didn't report an amount in	column (c) fo	r a type of property	/ for which column (a) is ch	ecked,			
	-	in Part II.		,, ,, ,, ,, ,, ,,					
For F		Reduction Act Notice, see the In	structions for	Form 990.		Schedule	e M (Forn	n 990)	2023

LHA 332141 09-11-23

SPECIAL OLYMPICS NORTHERN CALIFORNIA,		
Schedule M (Form 990) 2023 INC.	68-0363121	Page <b>2</b>
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and is reporting in Part I, column (b), the number of contributions, the number of items received, or a c this part for any additional information.	d 33, and whether the organization of both. Also comp	tion blete
SCHEDULE M, PART I, COLUMN (B):		
THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS RATHER THAN		
THE NUMBER OF ITEMS CONTRIBUTED.		
SCHEDULE M, LINE 32B:		
SOLD VIA WELLS FARGO ADVISORS OR CITY NATIONAL SECURITIES.		
332142 09-11-23	Schedule M (Form	990) 2023

14381112 701245 CUS000000358

ORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
BLIC EDUCATION, ATHLETE LEADERSHIP PROGRAMS, SUPPORT (SPECIAL
YMPICS INC) FOR NATIONAL PROGRAMMING
PENSES \$ 4,492,771. INCLUDING GRANTS OF \$ 70,000. REVENUE \$ 0.
ORM 990, PART VI, SECTION B, LINE 11B:
RM 990 IS PREPARED BY AN OUTSIDE TAX PROFESSIONAL WITH ASSISTANCE FROM
E ORGANIZATION. THE FORM IS THEN REVIEWED BY THE CFO AND MEMBERS FROM THE
DIT COMMITTEE. AFTER REVIEW AND MODIFICATIONS WHERE NECESSARY, THE FINAL
RSION OF THE TAX RETURN IS PROVIDED TO THE BOARD OF DIRECTORS. THE CEO
GNS, THEN THE CFO FILES, ALL REQUIRED TAX FILINGS.
ORM 990, PART VI, SECTION B, LINE 12C:
L BOARD MEMBERS, DIRECTORS AND OFFICERS OF SONC SHALL COMPLY WITH ANY
WARD POLICIES REGARDING CONFLICTS OF INTEREST. IF A BOARD MEMBER HAS A
NFLICT OF INTEREST, S/HE SHOULD BRING IT TO THE ATTENTION OF THE BOARD
MEDIATELY. IN ADDITION, THE PROCEDURE REQUIRES THAT THE OFFICIAL MINUTES
' THE BOARD REFLECT THAT THE CONFLICT WAS DISCLOSED AND THAT THE
TERESTED PERSON DID NOT PARTICIPATE IN THE VOTING OR DISCUSSION RELATED
THE DISCLOSED MATTER.
DRM 990, PART VI, SECTION B, LINE 15:
RECTORS ARE NOT COMPENSATED. DIRECTORS ARE NOT REIMBURSED FOR ANY OF
EIR OUT-OF-POCKET EXPENSES INCURRED IN FULFILLING THEIR ROLE.
HIR OUT OF FOCKET ENERGIES INCOMMEND IN FOLFIELING THEIR ROLL.
GHLY COMPENSATED STAFF -
or Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990)
IA 332211 11-14-23
48 1112 701245 CUS000000358 2023.05000 SPECIAL OLYMPICS NORTHERN CUS

Supplemental Information to Form 990 or 990-EZ **SCHEDULE O** Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. SPECIAL OLYMPICS NORTHERN CALIFORNIA,

2023 **Open to Public** Inspection

OMB No. 1545-0047

Employer identification number 68-0363121

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INC.

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2023

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Schedule O (Form 990) 2023 Name of the organization SPECIAL OLYMPICS NORTHERN CA INC.	ALIFORNIA,	Page Employer identification numbe 68-0363121
GENERAL SALARY RANGES FOR POSITIONS ARE REVIEWED	AGAINST VARIOUS PUBLISHED	
SALARY SURVEYS, SOME OF WHICH ARE SPECIFIC TO TH	E NON-PROFIT INDUSTRY AND	
OTHERS WHICH ARE SPECIFIC TO THE GEOGRAPHICAL RE		
AN ANNUAL INCREASE POOL IS CALCULATED AS A PERCE	NTAGE OF CURRENT BASE	
COMPENSATION, AND IS INCLUDED IN THE ANNUAL BUDG	ET. TOTAL SALARY AND	
BENEFITS BUDGETS FOR THE ORGANIZATION ARE APPROV	ED BY THE BOARD AS PART OF	
OUR ANNUAL OPERATING BUDGET.		
ALL EMPLOYEES ARE COMPENSATED BASED UPON THEIR A	NNUAL PERFORMANCE	
EVALUATIONS. THEY ARE EVALUATED AGAINST OPERATION	NAL GOALS AND OBJECTIVES	
THAT ARE DEVELOPED ALONG WITH OUR ANNUAL OPERATI	NG PLAN AND BUDGETS AT THE	
BEGINNING OF EACH YEAR.		
FORM 990, PART VI, SECTION C, LINE 19:		
THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOC	UMENTS OR ITS CONFLICT OF	
INTEREST POLICY AVAILABLE TO THE PUBLIC. HOWEVER	, THE ANNUAL SUMMARY	
REVENUE & EXPENSE REPORT, BALANCE SHEET, AND ASS	OCIATED REVENUE AND EXPENSE	
PIE CHARTS ARE POSTED ON THE ORGANIZATION'S WEBS	ITE. OUR MOST RECENT AUDIT	
AND FORM 990 ARE AVAILABLE FOR DOWNLOAD FROM OUR	WEBSITE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:		
GENERAL CONTRACTS:		
PROGRAM SERVICE EXPENSES	698,573.	
MANAGEMENT AND GENERAL EXPENSES	31,593.	
FUNDRAISING EXPENSES	380,238.	
TOTAL EXPENSES	1,110,404.	
PROFESSIONAL FUNDRAISING FEES:		
PROGRAM SERVICE EXPENSES	0.	
332212 11-14-23	49	Schedule O (Form 990) 20

<sup>2023.05000</sup> SPECIAL OLYMPICS NORTHERN CUS00001

Name of the organization SPECIAL OLYMPICS NORTHERN CALIFORNIA,		Employer identification number
INC.		68-0363121
MANAGEMENT AND GENERAL EXPENSES	0.	
	۰.	
FUNDRAISING EXPENSES	661,261.	
TOTAL EXPENSES	661,261.	
	001,201.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,771,665.	
332212 11-14-23 50		Schedule O (Form 990) 2023

SCHEDULE R (Form 990)	<b>Related Organizations and Unrelated Partnerships</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.	OMB No. 1545-0047 2023 Open to Public Inspection Employer identification number 68-0363121	
Department of the Treasury	Attach to Form 990.		Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection
Name of the organizatio	n SPECIAL OLYMPICS NORTHERN CALIFORNIA,	Employer id	entification number
	INC.	68-036	3121

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity		<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
SPECIAL OLYMPICS, INC 52-0889518	INTL SPORTS TRAININGS &						
1133 19TH ST NW	COMPETITIONS FOR INDIV W/						
WASHINGTON, DC 20036	INTELLECTUAL DISABILITIES	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7	N/A		х
	-						
	-						

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

Schedule R (Form 990) 2023

OMB No. 1545-0047

Schedule R (Form 990) 2023 INC.

organizations treated as a part	thership during the tax	k year.	•								
(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	1)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managin partner	<sup>r</sup> Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	Sec 512(t contr ent	b)(13) rolled
of folded organization		foreign	Ontry	or trust)	inconte	assets		ent	ity?
		country)				400010		Yes	No

# Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

SPECIAL OLYMPICS NORTHERN CALIFORNIA,

Schedule R (Form 990) 2023 INC.

art V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b,	or 36.					
ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.						
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in	n Parts II-IV?					
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х			
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		Х			
c Gift, grant, or capital contribution from related organization(s)	1c	Х				
Loans or loan guarantees to or for related organization(s)	1d		Х			
e Loans or loan guarantees by related organization(s)	4.		X			
Dividends from related organization(s)	<u>1f</u>		Х			
Sale of assets to related organization(s)	10		х			
Purchase of assets from related organization(s)	1h		х			
Exchange of assets with related organization(s)	1i		х			
Lease of facilities, equipment, or other assets to related organization(s)	1j		Х			
Lease of facilities, equipment, or other assets from related organization(s)	1k		х			

k Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
I Performance of services or membership or fundraising solicitations for related organization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
o Sharing of paid employees with related organization(s)	<b>1</b> 0		Х
p Reimbursement paid to related organization(s) for expenses	1p	Х	1
q Reimbursement paid by related organization(s) for expenses	1q		Х
r Other transfer of cash or property to related organization(s)	1r	Х	
s Other transfer of cash or property from related organization(s)	1s		Х

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			0. h. d. h. D. (5

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## SPECIAL OLYMPICS NORTHERN CALIFORNIA,

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### Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e	)	(f)	(g)	0	ו)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	(e) Are a partners 501(c) orgs	all s sec.	Share of	Share of		opor- nate	Code V-UBI	General	Percentage
of entity		(state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	501(c) orgs	)(3) .?	total		alloca	tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin partner?	ownership
		country)	sections 512-514)	Yes		income	assets	Yes	No	(Form 1065)	Yes No	
					_							+
					_							

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

INC.

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