Form <b>8868</b> (Rev. January 2024)							
Department of the Treasury Internal Revenue Service	File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.						
Electronic filing (e-file)	. You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the for	ms					
listed below except for I	Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An ext	ension					
request for Form 8870 r	nust be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Fo	orm					
8868, visit www.irs.gov/	e-file-providers/e-file-for-charities-and-non-profits.						
Caution: If you are going	to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453 TE and Form	9970 TE for payment					

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

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

<u>must use</u>	Form 7004 to request an extension of time to file income	e tax retur	ns.			
<u>Part I - Ic</u>	lentification					
Type or	Name of exempt organization, employer, or other filer,	, see instru	uctions.	Taxpayer	identification num	oer (TIN)
Print	ATTIC ANGEL PLACE, INC.				39-191966	57
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, se 8301 OLD SAUK ROAD	ee instruct	ions.			
instructions.	City, town or post office, state, and ZIP code. For a fo MIDDLETON, WI 53562	reign addı	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			. 01
Applicati	on Is For	Return	Application Is For			Return
		Code				Code
Form 990	or Form 990-EZ	01	Form 4720 (other than individual)			09
Form 472	0 (individual)	03	Form 5227			10
Form 990	-PF	04	Form 6069			11
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12
Form 990	-T (trust other than above)	06	Form 5330 (individual)			13
Form 990	-T (corporation)	-07	Form 5330 (other than individual)			14
Form 104	1-A	08				
time to file	ou enter your Return Code, complete either Part II or Part e Form 5330. pplication is for an extension of time to file Form 5330, yo n Name			,		
	n Number					
	n Year Ending (MM/DD/YYYY)		· · · · · · · · · · · · · · · · · · ·			
	utomatic Extension of Time To File for Exempt Organi boks are in the care of JOHN KAISER	zations (s	see instructions)			
i ne bo	8301 OLD SAUK RD	_ МТГ				
Toloph	None No. (608)662-8895	MIL	Fax No			
	organization does not have an office or place of business	in the Uni				
	is for a Group Return, enter the organization's four-digit (					
box [	. If it is for part of the group, check this box	_				
	quest an automatic 6-month extension of time until <b>FI</b>					
	organization named above. The extension is for the orga				ipt organization rett	
	calendar year 20 or	anization 5	return for.			
x		20	23, and ending	MAR 3	1 20	D <b>24</b>
		, 20 _	, and ending		<u> </u>	<u> </u>
2 If th	ne tax year entered in line 1 is for less than 12 months, ch	neck reaso	on: 🗌 Initial return	Final retur	n	
	Change in accounting period					
	nis application is for Forms 990-PF, 990-T, 4720, or 6069,	, enter the	tentative tax, less		•	Δ
	nonrefundable credits. See instructions.		· · · · · · ·	<u>3a</u>	\$	0.
	nis application is for Forms 990-PF, 990-T, 4720, or 6069				<b>^</b>	0
	mated tax payments made. Include any prior year overpa			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa	-			¢	0.
USII	ng EFTPS (Electronic Federal Tax Payment System). See	Instructio	115.	3c	\$	0.

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

Joigi	LIIVE	юре 12. 30330	<b>Dotu</b>	* *	PU	BLIC IN	SPE	CTION CO	)PY	** ~ li			OMB No. 1545-0047
For	<b>9</b> "	90	Under section &	501(c), 5	27, or	4947(a)(1) of t	he Ir	ternal Revenue	e Cod	le (exc	ncome Tax	ons)	2023
Depa	rtment o	of the Treasury				-		s on this form a structions and			•		Open to Public Inspection
		nue Service e 2023 calenda	ar year, or tax ye			APR 1,					AR 31, 202	4	inspection
	heck if		organization	5						<u> </u>	D Employer ident		on number
а	pplicab	le:	C										
	Addre	Je ATTT	C ANGEL I	PLACE	, I	NC.							
	Name		usiness as								39-1919	667	
	Initial return		and street (or P.			ot delivered to s	treet a	address)	Roor	n/suite	E Telephone numb		
	Final return termin		OLD SAU								608-662	-88	
_	ated Amen	City or to	own, state or pro			and ZIP or for	eign	postal code			G Gross receipts \$		34,059,670.
F	_return _Applie	MIDD	LETON , WI		562		<u> </u>				H(a) Is this a group		
	⊥tión pendi		AS C ABO		icer: 1	пспеппе	G	JDFKEI			for subordinat		Yes X No
1.1	-22-02	empt status:		501(c	) (	) (insert	no )	4947(a)(1)	or	527	H(b) Are all subordinates		See instructions
	Vebsi		ATTICANGE			) (113011	. 110.)	+3+τ(α)(1)			H(c) Group exempt		
		f organization:		Tru		Association		Other		L Year			ate of legal domicile: WI
	art I	Summary											
	1	Briefly describ	e the organizatio	n's missi	on or r	nost significan	t act	ivities: ATTI	CA	NGE	L PLACE, II	NC ' S	S MISSION
Governance		IS TO P	ROVIDE SE	ENIOR	HO	USING A	ND	HEALTH C	CARI	E SE	RVICES.		
irna	2	Check this bo	x 🗌 if the	e organiza	ation d	liscontinued its	s ope	rations or dispo	sed o	f more	than 25% of its net a	ssets.	
ove			ing members of t									3	6
			ependent voting									1	6
ies			of individuals em									5	0
Activities &			of volunteers (est									<u>ه ا</u>	240
Act			d business reven										0.
		Net unrelated	business taxable	Income		<u>onn 990-1, Fa</u>	rt I, II	<u>ne mana ang ang ang ang ang ang ang ang ang </u>			Prior Year		Current Year
	8	Contributions	and grants (Part	VIII line	lh)						548,805		243,710.
nue	9		ce revenue (Part								14,487,993		15,684,942.
Revenue	10	•	ome (Part VIII, co	-	•						884,984		1,078,576.
č			(Part VIII, colum								88,319	•	56,792.
	12	Total revenue	- add lines 8 thro	ugh 11 (r	nust e	qual Part VIII, o	colun	nn (A), line 12)			16,010,101		17,064,020.
			nilar amounts pa				,				0		0.
	14	Benefits paid t	o or for members	s (Part IX	, colun	nn (A), line 4)					0		0.
es	15		compensation, e								11,173,408		11,507,630.
Expenses	16a		undraising fees (F								0	•	0.
ă	b		ng expenses (Pa				_		0.	_	5,338,693		5,686,152.
	''		es (Part IX, colum								16,512,101		17,193,782.
			s. Add lines 13-1 expenses. Subtra								-502,000		-129,762.
L S		Thevenue less	expenses. Subira		5 110111	ine 12			<u></u>		ginning of Current Yea		End of Year
t Assets or	20	Total assets (F	Part X. line 16)								37,135,333		38,034,961.
Ass	21		(Part X, line 26)								16,542,640	_	16,698,538.
Net /	22	Net assets or	fund balances. S								20,592,693	•	21,336,423.
	art II	Signature											
											ents, and to the best of i	ny kno	wledge and belief, it is
true	corre	ct, and complete.	Declaration of pre	parer (othe	er than	officer) is based	on al	l information of w	hich p	reparer	has any knowledge.		
		Cignoture of -f	ficor								Data		
Sig		Signature of of		,	~						Date		
Her	е	MICHELL	E GODFREY	7, CE	0								

	Type or print name and title											
	Print/Type preparer's name	Preparer S Signature	Date Check PTIN									
Paid	LAURA SCHWEITZER, CPA	LAURA SCHWEITZER, CP	09/05/24 self-employed P01760010									
Preparer	Firm's name CLIFTONLARSONALLEN LLP Firm's EIN 41-0746749											
Use Only	Firm's address 8215 GREENWAY BOU	LEVARD, SUITE 600										
	MIDDLETON, WI 535	62	Phone no. 608 - 662 - 8600									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions											
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)											

	n 990 (2023) ATTIC ANGEL PLACE, 3 rt III Statement of Program Service Accomplishm		39-1919667	Page
	Check if Schedule O contains a response or note to any line			X
1	Briefly describe the organization's mission:			·····
	ATTIC ANGEL PLACE, INC'S MISSION			
	HOUSING SERVICES IN A CARING AND	PERSONALIZED A	TMOSPHERE THAT RESPE	CTS
	THE DIGNITY, ENCOURAGES THE INDEP	ENDENCE, AND E	NHANCES THE QUALITY	OF
	LIFE OF EACH RESIDENT.			
2	Did the organization undertake any significant program services d	luring the year which were no		
	prior Form 990 or 990-EZ?		Υε	es 🛛 No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant chang	es in how it conducts, any p	rogram services?	es 🛛 No
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for			
	Section 501(c)(3) and 501(c)(4) organizations are required to report	rt the amount of grants and a	allocations to others, the total expenses,	and
4	revenue, if any, for each program service reported. (Code: ) (Expenses \$ 2,970,367. including		0.) (Revenue \$3,428	,271.
4a	(Code:) (Expenses \$ 2,970,367. including ATTIC ANGEL COMMUNITY - APARTMENT			-
	APARTMENT COMPLEX APARTMENTS (RCA			
	OFFERING CHOICES IN SIZE WITH SUP			
	AS NEEDED.			
/h	(Code: ) (Expenses \$ 4,803,135. including	a sugarda of the	0.) (Revenue \$ 4,920	,607.
10	ATTIC ANGEL COMMUNITY - HOUSEHOLD		, , ,	/ • • • / •
	LIVING UNITS IN A NEIGHBORHOOD ST			S A
	DAY AND ENHANCED PROFESSIONAL NUR			5 11
	SERVICES IN A HOME LIKE SETTING.		BOILOWILL FLAM	
4c	(Code: ) (Expenses \$ 2,223,897. including	grants of \$	0.) (Revenue \$ 2,717	,715.
-		ONSISTS OF 20		
	RESIDENTS RECEIVE BOTH NURSING CA			
	ADDRESS DEMENTIA AND PHYSICAL NEE			
44	Other program services (Describe on Schodulo O.)			
4d	Other program services (Describe on Schedule O.) (Example $4, 625, 876$ , including grant of $5$		μια <b>Δ 646 394</b> γ	
	(Expenses \$ 4,625,876 • including grants of \$	0.) (Reve	nue\$ <b>4,646,394.</b> )	
				990 (200
4e	(Expenses \$ 4,625,876 • including grants of \$			9 <b>90</b> (2023

Part M         Checklist of Required Schedules         Yes, No.           1         Is the organization described in section 501(a) or 4947(a)(1) (other than a private foundation?         1           2         Is the organization required in complete Schedule C, Carri I         1           2         Section 601(a) organizations. Dit the organization required in certer or inderce or inderce or inderce organization transmission. Dit the organization transmission. Dit the organization transmission. Dit the organization transmission activities or any enable schedule C, Parr II         1           3         Section 601(a) organization or organice schedule C, Parr II         5         X           4         Did the organization materian activities or any enable schedule C, Parr II         5         X           5         Did the organization materian activities or any enable schedule C, Parr II         6         X           7         X         6         X         6         X           7         X         6         X         6         X           8         Did the organization materian activities organization induce activities activitities activitities activities activitities activities activities	Form	990 (2023) ATTIC ANGEL PLACE, INC. 39-191	9667	Р	age <b>3</b>
1         Is the organization described in sectors 050(c)[0] or 4047(q)(1) (other than a private foundation)?         I         X           2         Is the organization required to complete Schedule <i>B</i> , Schedule of Contributors 756 in Structions         2         X           3         X         Sectors 051(k) contributors (Schedule <i>C</i> , Part I         3         X           4         Sectors 051(k) contributors in Schedule <i>C</i> , Part I         3         X           5         Is the organization assection 501(k) (c), Sof 10(k) (c) organization that receives membership dues, assessments, or similar anounts as defined in Heiv. Proc. 88 (197 H'Yes, 'complete Schedule <i>C</i> , Part II         4         X           6         Drives complete Schedule <i>C</i> , Part II         5         X           7         Define organization matchin any domic advised loads <i>c</i> any similar funds or accounts? If 'Yes, 'complete Schedule <i>C</i> , Part II         6         X           7         Define organization matchin and since in tabin funds or accounts? If 'Yes, 'complete Schedule <i>C</i> , Part II         6         X           8         Define organization matchin and since in tabin funds or accounts? If 'Yes, 'complete Schedule <i>C</i> , Part II         6         X           7         DX         Define organization matchin collectures? If 'Yes, 'complete Schedule <i>C</i> , Part II         7         X           8         Define organization matchin inelatt Y and Yes, 'complete Schedule <i>C</i>	Par	t IV Checklist of Required Schedules			
# "Yes," complete Schedule A         1         X           2         Is the organization required to complete Schedule B, Schedule of Contribution? See instructions         2         X           3         Define organization required to complete Schedule C, Part II         3         X           4         Section 501(c)(3) organizations. Did the organization require in tobbying activities, or have a section 501(b) election in effect during the taxy set? If "res," complete Schedule C, Part II         4         X           5         Is the organization maximum and during organization that recorves membership dues, assessments, or similar amounts as defined in Fev. Proc. 89137/ If "res," complete Schedule D, Part II         5         X           5         Dott the organization receiver of amounts in such funds or assemetin. Incluing assemets to preserve open space.         7         X           6         Dott the organization maximum collections of virus of an interiorial transaces. or the similar assets? If "Yes," complete Schedule D, Part II         8         X           7         Z         Dott the organization maniount in Part X, line 21, for escrow or custodial account lability, serve as a custodiain for amounts in listed in Part X, organizet Schedule D, Part IV         8         X           10         Dott the organization resonant amount for Part X, line 21, for escrow or custodial account lability, serve as a custodiain for amounts in listed in Part X, line 21, for escrow or custodiai account lability, serve as a custodiain for amounts in listed in Part X, lin				Yes	No
2         Is the organization required to complete Schedule 0, Schedule 0, Centrulusory 2 See instructions         2         X           3         Did the organization required indict or indiced political campaign activities on beal of on icoposition to candidates for public affice? If Yes, "complete Schedule 0, Part I         3         X           4         Section 601(c)(3) organizations. Did the organization many gen in bbsyling activities, on have a section 501(t)(a) (SD1(c)(6), or 501(c)(6) organization that neoves membership dues, assessments, or similar amounts as defined in Hev Price, Service (2), Part I         4         X           5         b the organization reaction of investment of amounts in such Indics a caccurst for which donors have the right to a similar amounts a defined in Part Vise, "complete Schedule 0, Part I         5         X           6         Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule 0, Part I         7         X           7         Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule 0, Part II         7         X           8         Did the organization, directly or through a related organization, and asset in donorrestricted endowments or in quaiced moments or any of the following questions as 'Yea,' then complete Schedule D, Part VI         10         X           10         Did the organization export an amount for investments - other securities in Part X, line 12, that is 5% or more of this total asset reported	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3         Diff the organization engage in direct or indirect political company activities on behalf of or in opposition to cardidates for public officer 97 Yrss, "complete Schedule C, Part II         3         X           4         Section 501(c)(3) organizations. Did the organization engage in tobbying activities, or have a section 501(b) election in effect during the taxy year? If "tss," complete Schedule C, Part II         5         X           5         Did the organization a section 501(c)(4), 501(c)(6), organization that receives membership dues, assessments, or animiz amounts as defined in Fev. Price. 39107 If "Yes," complete Schedule D, Part I         5         X           5         Did the organization review any doore adiveed in taking assemblic to provide advice on the distribution or investment of amounts in such funds or accounts for which dorons have the right to provide advice on the distribution or investment of amounts in such funds or accounts for Wine's complete Schedule D, Part I         6         X           7         X         8         X         7         X           8         Did the organization maintain diverses of an amount in Part X, line 21, for escore or custodial account lability, sarve as a custodian for amounts not listed in Part X, or provide organization, hold assets in donon-matrix-field endowments or in quasi advortment // wry, "complete Schedule D, Part V         10         X           10         Did the organization report an amount for land, building, and equipment in Part X, line 107 if "Yes," complete Schedule D, Part VI         10         X           11					
public offee? If 'Yes,' complete Schedule Q, Part I         3         X           4         Section 501(Q) organization. Did the organization engage in bubying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule Q, Part II         4         X           5         Is the organization a section 501(c)(A), 501(c)(B), or 501(c)(B) or 501(c)(B) or accounts for which downs have the right or similar amounts as defined in ther. Proc. 98:19? If 'Yes,' complete Schedule Q, Part II         5         X           6         Did the organization maintain any down advised funds or accounts for which downs have the right or parvide advise on the databation or investment of amounts in such funds or accounts for which downs have the right of the environment, historic fund mass, or historic attreasary, '''', complete Schedule D, Part II         8         X           7         Did the organization report an amount in Part X, line 21, for secrow or custodial account liability; serve as a custodian for amounts not listed in Part X, '' reg. ' complete Schedule D, Part I         8         X           9         Did the organization, directly or through a related organization, hold assets in domornestricide endowments or in quasi-endowmath? If 'Yes, ' complete Schedule D, Part V         10         X           11         If the organization in amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 12, /''res, ' complete Schedule D, Part X         11a         X           11         If the organization report an amount for live state	2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
4         Section 501(c)(3) organizatione. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the taxy year? if "Yes," complete Schedule C, Part II         4         X           5         Is the organization a section 501(h), 501(b)(5) or 501(h)(6) organization that receives membership dues, assessments, or similar anounts as offende in Rev. Proc. 86-197 II "Ves," complete Schedule C, Part II         5         X           5         Did the organization resetment of amounts in such funds or accounts? II "Yes," complete Schedule D, Part II         6         X           7         X         8         Did the organization receive to hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II         7         X           10         Did the organization received an amount in Part X, line 21, for servor or cutotodial account liability, serve as a cutotodian in Serve to hold account structures?         7         X           10         Did the organization servet an amount in Part X, line 21, for servor or cutotodial account liability, serve as a cutotodian in Servet and amount in part X, line 12, instantion, servet an amount in a part X, line 21, part V         10         X           10         If the organization servet an amount in Part X, line 12, Part V         10         X           11         If the organization asset in amount for lands the organization, hold assets in Part X, line 12, Hart is 5% or more of its total assets reported in	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? // 'Yes,' complete Schedule C, Parl II.     4     X       5     Is the organization a section Sol(c)(4), S01(c)(4), or S01(c)					<u>x</u>
5         Is the organization a section 501(c)(3, 001(c)(5, 007501(c)(6) organization that receives membership due, assessments, or similar amounts as defined in Rev. Proc. 90 197 # Yes," complete Schedule C, Part II         5         X           D of the organization maintain any doorn advised funds or accounts? If Yrse," complete Schedule D, Part II         8         X           D of the organization meeting in collection of vorking easements, funding easements to preserve open space, the environment, historic land areas, or historic attructures? If Yrse," complete Schedule D, Part II         8         X           D bit the organization meeting collection of vorking easements, funding easements in similar anacuts? If Yrse," complete Schedule D, Part II         7         X           D bit the organization meeting collection of vorking deat management, credit repair, or debt negotiation services? If Yrses," complete Schedule D, Part II         7         X           D bit the organization service an amount in Part X, line 21, for ecorow or custodial account liability, serve as a custodian for anounts not listod in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If Yrses," complete Schedule D, Part II         10         X           D bit the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 3% or more of its total assets reported in Part X, line 12, Part Y         10         X           D bit the organization report an amount for investments - ordan related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 12, Part Yrse, "complete Schedule D, Part X <td>4</td> <td>Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect</td> <td></td> <td></td> <td></td>	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
similar amounts as defined in Rev. Proc. 98197 # Yes," complete Schedule C, Part II         5         X           6         Did the organization maintain say door adviced funds or any summar funds or accounts? If "Yes," complete Schedule D, Part II         6         X           7         Did the organization maintain any door adviced funds or any summar funds or accounts? If "Yes," complete Schedule D, Part II         7         X           8         Did the organization maintain collections 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 escrov or custodial account liability, serve as a custodian for amounts no tilsed in Part X, or provide credit conneeling, debt management, credit repair, or debt negotiation service?         9         X           10         Did the organization answer to any of the following questions is "Yes," then complete Schedule D, Part IV.         10         X           11         If the organization answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, VII, VI, X, or X, as applicable.         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         11         X           11         If the organization report an amount for investments - other securities In Part X, line 10? If 'Yes,' complete Schedule D, Part XI         11			4		<u>x</u>
6       Did the organization maintain any done advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of ansuch funds or accounts for which donors have the right to provide advice or hold a conservation assement. Including assements to preserve open space.       If	5				
provide advice on the distribution or investment of amounts in such funds or accounts? // *Yes,* complete Schedule D, Part //       6       X         7       Did the organization receiver on hold a conservation exament, including examents to preserve open space, the environment, historic land areas, or historic structures? // *Yes,* complete Schedule D, Part //       7       X         8       Did the organization centre on the distributions of works of art, historical treasures, or other smillar assets? // *Yes,* complete Schedule D, Part //       7       X         9       Did the organization, directly or provide central counseling, dubt 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.       9       X         11       It he organization is answer to any of the tollowing questions is "Yes," then complete Schedule D, Part V       10       X         12       Did the organization centre and amount for investments - other securities in Part X, line 12() H*Yes,* complete Schedule D, Part W       11       11       X         13       Did the organization centre in a mount for investments - other securities in Part X, line 12() H*Yes,* complete Schedule D, Part X       11       X         14       X       Did the organization report an amount for investments - program related in Part X, line 12() H*Yes,* complete Schedule D, Part X       11       X         15		similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>x</u>
7       Did the organization receive or hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? If "kes," complete Schedule D, Part II       7       X         8       X       Did the organization maintenin collections of works of art, historical treasures, or pomplete Schedule D, Part II       8       X         9       Did the organization regorts an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization regort an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for any custodian for any complete Schedule D, Part V       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       10       X         11       Did the organization report an amount for investments - other escurities 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 VI       114       X         11       Did the organization report an amount for threastests 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 VI       114       X         11       Did the organization report an amount for threas asset in Part X, line 12, line 13, line 14, line 14, line 14, line	6				
the environment, historic land areas, or historic structures? #"Yes," complete Schedule D, Part II.     7     X       8     Did the organization maintain collections of works of art, historical treasures, or other similar assets? #"Yes," complete Schedule D, Part II.     7     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 donorrestricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V     10     X       11     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     11a     X       13     Did the organization report an amount for investments - other securities in Part X, line 16? If "Yes," complete Schedule D, Part VIII     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 16? If "Yes," complete Schedule D, Part X     11a     X       11a     Z     Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total as		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
B       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.       B         D       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counsaling, debt management, credit repair, or debt negotiation services?       IV         10       Did the organization of the tollowing questions is 'Yes,' then complete Schedule D, Part V, VII, VII, VII, VX, or X, as applicable.       IIII         11       If the organization report an amount for investments - other assuttions in Part X, line 10? If 'Yes,' complete Schedule D, Part V       IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	7				
Schedule D, Pert III       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       8       X         9       Did the organization, directly or through a related organization, hold assets in donorrestricted endowments or in quasi-endowments?       9       X         11       If the organization, directly or through a related organization, hold assets in donorrestricted endowments or in quasi-endowments?       9       X         12       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         13       assets reported in Part X, line 169. If "Yes," complete Schedule D, Part XIII       11       X         14       X       Did the organization report an amount for investments - other securities in Part X, line 150. If "Yes," complete Schedule D, Part XIII       11       X         14       X       Did the organization report an amount for hinvestments - other securities in Part X, line 167. If "Yes," complete Schedule D, Part XIII       11       X         14       X       Did the organization report an amount for hinvestments for the tax yea? If "Yes," complete Schedule D, Part X       114       X         15       Did the organization orbits a separate or consolidated financial			7		X
9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit regolitation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in donorrestricted endowments or in quasi-endowments? If "ise;" 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 VI       10       X         12       Did the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part VII       11a       X         13       Did the organization report an amount for linvestments - other associated D, Part VII       11a       X         14       X       Intel X, line 13? If "yes," complete Schedule D, Part VII       11a       X         14       X       Intel X, line 16? If "yes," complete Schedule D, Part VII       11a       X         15       Did the organization report an amount for other liabilities in Part X, line 15% or more of its total asset reported in Part X, line 16? If "yes," complete Schedule D, Part XII       11a       X         16       Did the organization ostant associated, independent audited financial statements for the tax year? If "yes," complete Schedule D, Part X <td< td=""><td>8</td><td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete</td><td></td><td></td><td></td></td<>	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         ID bit the organization, recording the provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10 bit the organization, recording the provide credit counseling, and equipment in Part X, line 10? 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 VI       11a       X         12 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         13 Did the organization report an amount for investments - other assets 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       11d       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 16? If "Yes," complete Schedule D, Part VI       11d       X         15 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         16 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         17 Did the organization neburgmathe independent a		Schedule D, Part III	8		X
If Yes,* complete Schedule D, Part IV     9     X       10     Did the organization, directly or through a related organization, hold assets in donon-restricted endowments or in quasi-indowments? If 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, VII, VX, or X, as applicable.     11     X       a     Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,* complete Schedule D, Part VII     11     X       b     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 VII     11     X       c     Did the organization report an amount for investments - program related in Part X, line 16? If 'Yes,* complete Schedule D, Part VII     11     X       d     Did the organization report an amount for other issetions under FIN 48 (ASC 7V) If 'Yes,* complete Schedule D, Part X     11     X       f     Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,* complete Schedule D, Part X     11     X       f     Did the organization obtain separate, independent audited financial statements for the tax year?     11     X       f     Did the organization on scholdsetd, independent audited financial statements for the tax year?     11     X       f     Did the organization maint an office, empl	9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       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.       10       X         a Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       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? If "Yes," complete Schedule D, Part VIII       11c       X         c 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 XIII       11d       X         c Did the organization's parate or consolidated financial statements for the tax year?       11d       X         12a       Did the organization separate, independent audited financial statements for the tax year?       11f       X         13       Is the organization included in ocnosolidated, independent audited financial statements for the tax year?       11d       X         14a       Did the organization asset ascodol described in section		amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
or in quasi-endowments? If "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, X, or X, as applicable.     11a     X       a Did the organization report an amount for investments - other securities 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, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11a     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 16? If "Yes," complete Schedule D, Part VII     11d     X       d Did the organization report an amount for other lassets 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 VII     11d     X       d Did the organization report an amount for other lassets in Part X, line 25? If "Yes," complete Schedule D, Part X     11d     X       11d     X     11d     X     11d     X       12a     Did the organization included in consolidated financial statements for the tax year?     11f     X       12a     Did the organization aschool described in section 170(b)(1)(Ni)(II "I" Yes," complete Schedule E     13a     X       13 is the organization aschool described in section 170(b)(1)(Ni)(II "I" Yes," complete Schedule E		If "Yes," complete Schedule D, Part IV	9		X
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VX, or X, as applicable.       111       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, Irtu is 5% or more of its total assets reported in Part X, line 169, If "Yes," complete Schedule D, Part VIII       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 169, If "Yes," complete Schedule D, Part VIII       11d       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 167, If "Yes," complete Schedule D, Part X       11d       X         d)       Did the organization separate or consolidated financial statements for the tax year include a foothort that addresses the organization asteria.       111d       X         12a       Did the organization asteria.       Not line 12a, then completing Schedule D, Part X       11f       X         12b       X       Was the organization asteria.       Not line 12a, then completing Schedule D, Part X X in 250, OI in 12a, then completing Schedule D, Part X X in 240, NIII in 24, NIII in 24, NIII in 24, NIII in 24, NIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, as applicable.       11       If the organization report an amount for land, buildings, and equipment 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 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         12       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       11c       X         13       Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         14       Did the organization obtain separate or consolidated financial statements for the tax year include a tochorte that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         15       Did the organization and intain an office, employees, or agents outside of the United State?       11f       X         14       Did the organization ontains and ontice, employees, or agents outside of the United State?       11f       X         12       Did the organization and ontain an ontice, employees, or agents outside of the United State?       11f       X <tr< td=""><td></td><td>or in quasi-endowments? If "Yes," complete Schedule D, Part V</td><td>10</td><td></td><td>X</td></tr<>		or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		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, that is 5% or more of its total assets reported in Part X, line 16? If '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? If '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? If 'Yes,' complete Schedule D, Part X       11d       X         e Did the organization report an amount for other assets in Part X, line 25? If 'Yes,' complete Schedule D, Part X       11e       X         e Did the organization separate or consolidated financial statements for the tax year molude a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       11e       X         13       Is the organization and school described in section T/Ob(1)(\u000000000000000000000000000000000000	11				
Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? (ff 'Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 16? (ff '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? (ff 'Yes," complete Schedule D, Part XII       11c       X         e 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? (ff 'Yes," complete Schedule D, Part X       11d       X         e Did the organization's separate or consolidated financial statements for the tax year?       11f       X       11d       X         12b Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X       11d       X         12a       X       11f       X       11d       X       11d       X         12b Did the organization aschool described in section 170(Pi(N)(N)(N)       11f 'Yes," complete Schedule D, Part X and XII is optional       11f       X         12a       X       11d       X       11d       X         11d b organization report anana o		as applicable.			
b       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? // '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 VIII       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 VIII       11c       X         d       Did the organization report an amount for other liabilities in Part X, line 25? // 'Yes," complete Schedule D, Part X       11d       X         f       Did the organization schoot bain separate, independent audited financial statements for the tax year?       11d       X         12a       X       Mas the organization included in consolidated, independent audited financial statements for the tax year?       11d       X         13       Is the organization aschool described in section 170(b)(1/A)(ii)? // 'Yes," complete Schedule D, Part X and XII       12a       X         14a       X       Did the organization aschool described in section 170(b)(1/A)(ii)? // 'Yes," complete Schedule E       13       X         14b       X       Did the organization report on Part X, column (A), line 3, more than \$5,000 of grants or other assistance to or for origin i	а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
assets reported in Part X, line 16? If "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? If "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? If "Yes," complete Schedule D, Part X       11c       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         e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       11f       X         13 Is the organization asswered "No" to line 12a, then completing Schedule D, Part X and XII is optional       12a       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       13a       X         14a       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, Part S II and IV       14b       X         15 Did the organization report on Part IX, colum		Part VI	11a	Х	
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 167, III "Yes," complete Schedule D, Part VIII       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 167, II''Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization obtain separate, independent audited financial statements for the tax year include a foothote that addresses the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         12a       Did the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule D, Part X       11f       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       14a       X         14       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of 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 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 organization report nore than \$15,000 of expenses for	b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.       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? If "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year' include a foothore that addresses the organization signature or consolidated financial statements for the tax year?       11f       X         12a       Did the organization botain separate, independent audited financial statements for the tax year?       11f       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete 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         14b       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 investment, and program service activities outside the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       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         f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization obtain separate, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Part X       11t       X         b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12a       X         b Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization nanotintian an office, employees, or agents outside of the United States?       14a       X         b Did the organization navered 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 garats or other assistance to or for any foreign organization? 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 gargate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV	С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
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         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X and XII       12a       X         b Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         f I' "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 maintain an office, employees, or agents outside of the United States?       11a       X         14       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 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 foreign individuals? It "Yes," complete Schedule F, Parts II and IV       16       X         15       Did the organization report on Part IX, column (A), lin		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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         f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization biability for uncertain tax positions under FIN 48 (ASC 740?) If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization biability for uncertain tax positions under FIN 48 (ASC 740?) If "Yes," complete Schedule D, Part X       11t       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Parts XI and XII is optional       11t       X         13       Is the organization naintain an office, employees, or agentes outside of the United States?       13       X         14a       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 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         14       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         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or	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			
e       Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization balan separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       11e       X         12a       Was the organization aschool described in sectrol 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional       13       X         13a       Ithe organization maintain an office, employees, or agents outside of the United States?       13a       X         14a       Did the organization report on Part IX, column (A), line 3, more than \$10,000 form grantmaking, fundraising, business, investment, and program service activities outside the United States, or 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         13       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or		Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       11a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       11b       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional       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?       14a       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       14b       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 or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       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 or foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report more than \$15,000 of expen	е		11e	Х	
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 answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13e       13c       13c <t< td=""><td>f</td><td>Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses</td><td></td><td></td><td></td></t<>	f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
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         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 any foreign individuals? If "Yes," complete Schedule F, Parts III and IV       15       X         16       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 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), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II       16       X		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       Image: the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       Image: the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Image: the organization animatin an office, employees, or agents outside of the United States?       Image: the organization maintain an office, employees, or agents outside of the United States?       Image: the organization maintain an office, employees, or agents outside of the United States?       Image: the organization animation and program service activities outside the United States?       Image: the organization maintain an office, employees, or agents outside of the United States?       Image: the organization maintain an office, employees, or agents outside of the United States?       Image: the organization animation and program service activities outside the United States?       Image: the organization program service activities outside the United States?       Image: 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 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       Image: the organization report more than \$15,000 of expenses for professional fundraising services 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       Image: the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or or fore foreign individuals? If	12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
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)(iii)? 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 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 G, Part II and IV       16       X         17       Did the organization report 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 II.       18       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or m		Schedule D, Parts XI and XII	12a		X
13       Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       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 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 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, line 9a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization oreport more	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
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 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 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.       16       X         18       Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization oreport more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II       19       X         20a       X       20a       X       20a       X <tr< td=""><td></td><td>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</td><td>12b</td><td>Х</td><td></td></tr<>		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions</li> <li>17 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>18 X</li> <li>20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a X</li> <li>20b Z</li> <li>20a X</li> <li>20b Z</li> <li>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></li> </ul>	13				X
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>	14a				X
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>	b				
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 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 and contributions on Part VIII, lines 1c and 82? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization oreport more than \$15,000 of gross income from gaming activities on Part VIII, line 92? If "Yes,"       19       X         20a       X       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					
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions</li> <li>17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>18 X</li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>21 X</li> </ul>			14b		x
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions</li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>21 X</li> </ul>	15				
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions</li> <li>18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"</li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> <li>21</li> </ul>			_15		X
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 report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       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       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	16				
<ul> <li>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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions</li> <li>18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"</li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>19 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> <li>20 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></li> <li>21 X</li> </ul>			16		X
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       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "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? If "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         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			17		x
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,"       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       20b         21       Did the organization operate on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X	18				
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," omplete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "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       20b         21       Did the organization operate on Part IX, column (A), line 1? <i>If</i> "Yes," complete Schedule I, Parts I and II       21       X	-		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       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				
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       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		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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X	20a				
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					
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			200		<u> </u>
332003 12-21-23			21		x
	332003			990	

332003 12-21-23

16030905 131839 A298092

4 2023.04020 ATTIC ANGEL PLACE, INC.

A2980921

39-1919667 Page 3

Form	990 (2023) ATTIC ANGEL PLACE, INC. 39-191	9667	Р	age <b>4</b>
Pa	TIV Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	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	<u> </u>
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		v	
L	Schedule K. If "No," go to line 25a	24a 24b	X	x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
Ŭ	any tax-exempt bonds?	24c		x
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
00	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		<u> </u>
	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			
<b>b</b>	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		
U	"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		X
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		<u>x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
00	Schedule N, Part II	32		X X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</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	- 55		<u> </u>
•••	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
07	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 and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	- 57		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	38	Х	
Pa	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
		7	Yes	No
-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a2'Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0	/ ]		
b c	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Ĥ		
U	(gambling) winnings to prize winners?	1c	х	
332004	4 12-21-23			(2023)
	5			, in the second s

# 16030905 131839 A298092

Form	990 (2023) ATTIC ANGEL PLACE, INC. t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		39-1919	667	P	<sub>age</sub> 5			
					Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				103				
	filed for the calendar year ending with or within the year covered by this return	2a	0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b					
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο		3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other a								
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	4a		X			
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	ccoun	ts (FBAR).						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact			5b		X			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		<u> </u>			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the any contributions that were not tax deductible as charitable contributions?			6a		x			
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	gifts						
	were not tax deductible?			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 ser	vices p	rovided to the payor?	7a		X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b					
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs requ	uired						
	to file Form 8282?			7c		X			
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7e		x			
е									
f									
-									
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		<u> </u>			
8									
•	sponsoring organization have excess business holdings at any time during the year?								
9									
	Did the sponsoring organization make any taxable distributions under section 4966?			9a 9b		<u> </u>			
10	Section 501(c)(7) organizations. Enter:			90					
	Initiation fees and capital contributions included on Part VIII, line 12	10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
	Section 501(c)(12) organizations. Enter:		1						
	Gross income from members or shareholders	11a							
	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	I						
	organization is licensed to issue qualified health plans	13b							
С	Enter the amount of reserves on hand	13c							
14a				14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		<b> </b>			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					v			
	excess parachute payment(s) during the year?			15		X			
40	If "Yes," see the instructions and file Form 4720, Schedule N.		0	40		v			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		X			
17	If "Yes," complete Form 4720, Schedule O.	hiv viti a -							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activative value result in the imposition of an excise tax under section 4951, 4952 or 49532			17					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.			17					
332005	12-21-23			Form	990	(2023)			
002000				1 0111		(2020)			

16030905 131839 A298092

<sup>6</sup> 2023.04020 ATTIC ANGEL PLACE, INC. A2980921

	Check if Schedule O contains a response or note to any line in this Part VI			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	끽					
	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 6	2					
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?	2		X			
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	Х				
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	Х				
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?	8a	Х				
b		8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X			
Sec	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		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				
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х				
b	···· ··· · · · · · · · · · · · · · · ·	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		x			
	Other officers or key employees of the organization	15b		x			
5	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	100					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
104		16a		x			
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		- 23			
U	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
		16b					
Sec	exempt status with respect to such arrangements?						
17	List the states with which a copy of this Form 990 is required to be filed						
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)		availal				
10		is offiy)	avalla	JIE			
	for public inspection. Indicate how you made these available. Check all that apply.          X       Own website       X       Upon request       Other (explain on Schedule O)						
10		dfinar					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u iinano	Jial				
20	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 JOHN KAISER - (608)662-8895						
	001111  KAIDER = (000/002-003)						
	8301 OLD SAUK RD, MIDDLETON, WI 53562						

Form 990 (2023) ATTIC ANGEL PLACE, INC.	39-1919667	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
Employees, and Independent Contractors										
Check if Schedule O contains a response or note to any line in this Part VII										
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
<ul> <li>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.</li> <li>List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.</li> <li>Enter -0- in columns (D), (E), and (F) if no compensation was paid.</li> </ul>										

• 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.

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			ne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of
	week		cer an	dad	irecto	r/trus T	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	tional		ploye	t com	~	1099-NEC)		and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MICHELLE GODFREY	15.20		_	0	-		4			
PRESIDENT/CEO	24.80			х				0.	205,554.	8,413.
(2) DEREK BUCKLEY	2.00									
VP HOUSING AND MANAGED SERVICES	38.00					X		0.	149,365.	10,769.
(3) KIMBERLY BLUM	38.00	D)						100		
RESIDENT SERVICES DIR	2.00					Х		0.	123,654.	34,351.
(4) JOHN KAISER	22.00									
CHIEF FINANCIAL OFFICER	18.00			Х				0.	125,208.	16,916.
(5) JUDITH HINZE	40.00									
NURSING MANAGER	0.00					X		0.	105,890.	33,275.
(6) KELLY DUBOIS	10.00									
VP MARKETING & DONOR RELATIONS	30.00					X		0.	119,529.	4,821.
(7) MOUSSA DISSA	40.00									
NURSING MANAGER	0.00					X		0.	104,012.	4,804.
(8) PATTY SCHULTZ	5.00									_
CHAIR	15.00	Х		Х				0.	0.	0.
(9) TERRY MOUCHAYLEH	2.00									_
VICE CHAIR	15.00	Х		Х				0.	0.	0.
(10) NANCY OLSON	1.00									_
SECRETARY	0.00	Х		X				0.	0.	0.
(11) MICHELE JOSLYN	1.00									-
DIRECTOR	15.00	Х						0.	0.	0.
(12) KIM KUNDERT	1.00									-
DIRECTOR	0.00	Х						0.	0.	0.
(13) BARBARA BERVEN	1.00									-
DIRECTOR	0.00	Х						0.	0.	0.
						-				
		1								
332007 12-21-23	•									Form <b>990</b> (2023)

8

332007 12-21-23

Form 990 (2023)

# 16030905 131839 A298092

		NGEL PLAC	Έ,	II	NC	•			39-19	19667	Page <b>8</b>
Par	t VII Section A. Officers, Directors, Tr	ustees, Key Emp	oloy	ees, a	and	High	nest (	Compensated Employe	es (continued)		
	(A) (B) Name and title Average hours per week				s pers	tion nore the son is t	an one ooth an trustee)	compensation	(E) Reportable compensation from related	Est am	<b>(F)</b> imated ount of other
		(list any hours for related organizations below line)	In dividual trustee or director	Institutional trustee	Officer	Key employee Hinhest compensated	employee Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	/ frc orga and	ensation om the nization related nizations
1b c	Subtotal Total from continuation sheets to Part	VII, Section A						0.	933,21	0.	0.
_ <u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including bu							0 . received more than \$100		2.113	,349.
	compensation from the organization										0 Yes No
3	Did the organization list any <b>former</b> offic line 1a? <i>If "Yes," complete Schedule J fo</i>	or such individual						· · · · ·		3	x
4	For any individual listed on line 1a, is the and related organizations greater than \$	150,000? If "Yes,	" со	mplei	te So	ched	lule J	for such individual	-	4	x
5	Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," or									5	X
<u> </u>	tion B. Independent Contractors Complete this table for your five highest	•	•						•	nsation from	 n
	the organization. Report compensation f (A) Name and busine	*	ear e	nding	g wit	th or	withi	n the organization's tax y (B) Description of s		(C) Compen	
	IFTKEY, LLC		<u> </u>								
ASC	D. BOX 735913, DALLAS CENDO HEATHCARE, 500 N RT LAUDERDALE, FL 333	W CYPRESS		REE	EK	RD	,	AGENCY STAFF AGENCY STAFF			.,998. ,145.
ZEAL CLINICAL STAFFING 500 E MILWAUKEE ST, JANESVILLE, WI 5								AGENCY STAFF			,041.
2	Total number of independent contractor \$100,000 of compensation from the org		ot lin	nited	to ti	hose 3	listeo	d above) who received m	ore than		
	wroo,ooo or compensation nom the org	anzauun				5				Form 9	90 (2023)

332008 12-21-23

Check If Schedule O contains a response or note to any line in the Part VII.         Image: Check If Schedule O contains a response or note to any line in the Part VII.           Image: Check If Schedule O contains a response or note to any line in the Part VII.         Check If Schedule O contains of the max and part of the schedule or severe in the schedule of the sche				2023) ATTIC ANGEL P	LACE, INC	•		39-1919	667 Page <b>9</b>
A         Cite         Ci	Pa	rt V		Statement of Revenue					
Total revenue     Pletited or seempt function revenue     Immediate basiness revenue     Revenue function function revenue       1 a     Federated campaigns     1a       b     Membership dues     1b       c     1a     1b       d     Helated organizations     1a       d     Helated organizations     1a       d     Helated organizations     1a       d     Helated organizations     1a       d     Home contributions, gits, grants, and smilar anounts on thicked allows 1st 1     197,052.       g     House contributions (his grants, and smilar anounts)     1a     197,052.       g     House contributions (his grants, and smilar anounts)     1a     197,052.       g     HOUSEBOLD     Edatado 4,914,627.     4,924,627.       e     ADDEXENT CAMPER     Eda200     4,424,773.       d     MIRORY CAMP     HARCH 10000     100       e     A Total, add lines 2a:7     15,684,942.     100       d     Income from Investment of tax-exempt bond proceeds     14,925,684,942.     100       d     Income from Investment of tax-exempt bond proceeds     10,926,480.     388,680.     388,680.       f     A laster sprenzes     10,926,480.     100     100       d     Bace stortent final inventory				Check if Schedule O contains a response	or note to any line	2	(5)	(0)	
Open Set Display         2 a         HOUSEHOLD         Business Code         Main Set							Related or exempt	Unrelated	(D) Revenue excluded from tax under sections 512 - 514
Business Code         Image: Code of the second	S S	1 :	а	Federated campaigns 1a					
Business Code         Image: Code of the second	rani								
Business Code         Image: Code of the second	, Mo	(	с						
Open Set Display         2 a         HOUSEHOLD         Business Code         Main Set	ar A				46,658.				
Open Set Display         2 a         HOUSEHOLD         Business Code         Main Set	s, 0		е	Government grants (contributions) 1e					
Open Set Display         2 a         HOUSEHOLD         Business Code         Main Set	tion S	1	f	All other contributions, gifts, grants, and					
Open Set Display         2 a         HOUSEHOLD         Business Code         Main Set	ibu								
Business Code         Image: Code of the second	utr Dd	!	-		5,029.	0.40 = 4.0			
90         2 a         HOUSEHOLD         624200         4,914,627.         4,914,627.           b         HEALTH CENTER         624200         4,627,972.         4,627,972.         4,627,972.           c         MEMORY CARE - HAVEN         624200         3,424,773.         62427.         624200         2,717,570.         2,717,570.           c         All other program service revenue         55,684,942.         15,684,942.         388,680.         388,6           c         All other program service revenue         564,942.         388,680.         388,6         388,6           c         Revalues         5         Royaties         5         80,940.         388,680.         388,6           c         Rental income of (loss)         66         66         66         66         66           d         Net rental income of (loss)         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,17,570.         70,1	<u>a ŭ</u>	l	h	Total. Add lines 1a-1f		243,710.			
Open Set		-		UQUCEUOI D		4 014 627	4 014 627		
g Total. Add lines 2a:2f         15,684,942.           3         Investment income (including dividends, interest, and other similar amounts)         388,680.           4         Income from investment of tax-exempt bond proceeds         388,680.           5         Royaties         6           6         Gross rents         6           b         Less: rental expenses         6b           c         Rental income or (loss)         6c           d         Net rental income or (loss)         6c           d         Net rental income or (loss)         6c           d         Net rental income or (loss)         6c           assets other than inventory         5a         15,955,550.           c         Gain or (loss)         7a         17,685,546.           7b         16,995,650.         7b         16,995,650.           7c         689,896.         689,896.         689,8           d         Net gain or (loss)         7d         689,896.         689,8           d         Net gain or (loss)         7d         689,896.         689,8           d         Net gain or (loss) from fundraising events (not including §         689,896.         689,8           g         Gross income from gaming activities.	vice	2 6							
g Total. Add lines 2a:2f         15,684,942.           3         Investment income (including dividends, interest, and other similar amounts)         388,680.           4         Income from investment of tax-exempt bond proceeds         388,680.           5         Royaties         6           6         Gross rents         6           b         Less: rental expenses         6b           c         Rental income or (loss)         6c           d         Net rental income or (loss)         6c           d         Net rental income or (loss)         6c           d         Net rental income or (loss)         6c           assets other than inventory         5a         15,955,550.           c         Gain or (loss)         7a         17,685,546.           7b         16,995,650.         7b         16,995,650.           7c         689,896.         689,896.         689,8           d         Net gain or (loss)         7d         689,896.         689,8           d         Net gain or (loss)         7d         689,896.         689,8           d         Net gain or (loss) from fundraising events (not including §         689,896.         689,8           g         Gross income from gaming activities.	serv ue		D						
g Total. Add lines 2a:2f         15,684,942.           3         Investment income (including dividends, interest, and other similar amounts)         388,680.           4         Income from investment of tax-exempt bond proceeds         388,680.           5         Royalties         0) Real           6         Gross rents         6           b         Less: rental expenses         6b           c         Rental income or (loss)         6c           d         Net rental income or (loss)         6c           assets other than inventory         6c         10           b         Less: cost or other basis         7a           7a         Gross income from fundraising events (not including §         7b           7a         Gross income from fundraising events         689,896.           7a         Gross income from gaming activities. See Part IV, line 18         8a           b         Less: direct expenses         8b           c         Net IN: Ine 19         9a           9a         Gross sales of inventory, less returns and allowances         9a           9a         Gross also of inventory, less returns and allowances         9a           9b         C         Net income or (loss) from gaming activitities         00	ver S		с Л						
g Total. Add lines 2a:2f         15,684,942.           3         Investment income (including dividends, interest, and other similar amounts)         388,680.           4         Income from investment of tax-exempt bond proceeds         388,680.           5         Royalties         0) Real           6         Gross rents         6           b         Less: rental expenses         6b           c         Rental income or (loss)         6c           d         Net rental income or (loss)         6c           assets other than inventory         6c         10           b         Less: cost or other basis         7a           7a         Gross income from fundraising events (not including §         7b           7a         Gross income from fundraising events         689,896.           7a         Gross income from gaming activities. See Part IV, line 18         8a           b         Less: direct expenses         8b           c         Net IN: Ine 19         9a           9a         Gross sales of inventory, less returns and allowances         9a           9a         Gross also of inventory, less returns and allowances         9a           9b         C         Net income or (loss) from gaming activitities         00	gra Re		u e			-,,	_,,		
g Total. Add lines 2a:21         15,684,942.           3         Investment income (including dividends, interest, and other similar amounts)         388,680.         388,680.           4         Income from investment of tax-exempt bond proceeds         388,680.         388,680.         388,680.           6         Gross rents         6         6         6         6         6           b Less: rental expenses         6         6         6         6         6         6           7         6 cross amount from sales of assets other than inventory         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6         6	Pro			All other program service revenue					
3       Investment income (including dividends, interest, and other similar amounts)       388,680.       388,680.       388,680.         4       Income from investment of tax-exempt bond proceeds          388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       388,680.       380,680.       388,						15,684,942.			
4       Income from investment of tax-exempt bond proceeds         5       Royalties       Image: Second se		3							
4       Income from investment of tax-exempt bond proceeds         5       Royalties       (i) Real       (ii) Personal         6 a       Gross rents       6a       6a         b       Less: rental expenses       6a       6b         c       Rental income or (loss)       6c       6c         d       Net rental income or (loss)       6c       6c         d       Net rental income or (loss)       7a       17, 685, 546.       6         f       assets other than inventory       7b       16, 995, 650.       7b       689, 896.       689, 896.         c       Gain or (loss)       7c       689, 896.       689, 896.       689, 8         d       Net gain or (loss)       of       of       689, 896.       689, 8         d       Net gain or (loss)       of       of       689, 896.       689, 8         g       Gross income from fundraising events (not including \$\sum_order on line 1c). See       8a       8a       680       689, 8         g       Gross income from gaming activities. See       9a				other similar amounts)		388,680.			388,680.
G a Gross rents         (i) Real         (ii) Personal           b Less: rental expenses         6b         6b         6c         7c		4							
6 a Gross rents         6a           b Less: rental expenses         6b           c Rental income or (loss)         6c           d Net rental income or (loss)         68 / 80 / 80 / 80 / 80 / 80 / 80 / 80 /		5							
b       Less: rental expenses       6b					(ii) Personal				
e         Rental income or (loss)         Gc         Image: Constraint of the second									
d       Net rental income or (loss)       iii Other         7       a Gross amount from sales of assets other than inventory       iii Other         7       a Gross amount from sales of assets other than inventory       iii Other         b       Less: cost or other basis and sales expenses       iii 0, 995, 650.         c       Gain or (loss)       iiii 0, 995, 650.         d       Net gain or (loss)       iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii									
7 a Gross amount from sales of assets other than inventory       Image: constraint of the sais and sales expenses       Image: constraint of the sais and sale expenses       Image: constraint of the sais									
assets other than inventory       7a       17, 685, 546.         b       Less: cost or other basis and sales expenses       7b       16, 995, 650.         c       Gain or (loss)       7c       689, 896.       689, 896.         d       Net gain or (loss)       689, 896.       689, 896.       689, 896.         d       Net gain or (loss)       of       689, 896.       689, 896.         d       Net gain or (loss)       of       689, 896.       689, 896.         d       Net gain or (loss)       of       689, 896.       689, 896.         b       Less: direct expenses       Bb       b       b         c       Net income or (loss) from fundraising events       b       a         g       Gross income from gaming activities. See       9a       b       a         g       Gross income from gaming activities. See       9a       b       a         b       Less: direct expenses       9b       b       a       a         c       Net income or (loss) from gaming activities       a       a       a         d       A Gross sales of inventory, less returns and allowances       a       a       a         b       Less: cost of goods sold       tob       a <th></th> <td></td> <td></td> <td>· · · · · · · · · · · · · · · · · · ·</td> <td>(ii) Other</td> <td></td> <td></td> <td></td> <td></td>				· · · · · · · · · · · · · · · · · · ·	(ii) Other				
Box       Less: cost or other basis and sales expenses       Th       16,995,650.         C       Gain or (loss)       Tc       689,896.       689,896.         d       Net gain or (loss)       689,896.       689,896.       689,896.         d       Net gain or (loss)       of       689,896.       689,896.       689,8         d       Net gain or (loss)       of       of       689,896.       689,8         b       Less: direct expenses       8b       b       b       e         e       Net income or (loss) from fundraising events       a       a       a         9       Gross income from gaming activities. See       9a       a       a       a         9       Gross sales of inventory, less returns and allowances       a       a       a       a       a         b       Less: cost of goods sold       10b       b       a       a       a       a         b       Less: cost of goods sold       10b       a       a       a       a       a         b       Less: cost of goods sold       10b       b       b       a       a       a       a       a         b       Less: cost of goods sold       10b		1	a						
and sales expenses       7b       16,995,650.         c       Gain or (loss)       7c       689,896.         d       Net gain or (loss)       689,896.       689,896.         d       Net gain or (loss)       689,896.       689,896.         d       Net gain or (loss)       of       of       689,896.       689,896.         d       Net gain or (loss)       of       of       689,896.       689,896.       689,896.         e       Part IV, line 18       sa       sa       sa       sa       sa       sa         g       Gross income from gaming activities. See       ga       ga <t< td=""><th></th><td></td><td>b</td><td>·····, ····,</td><td></td><td></td><td></td><td></td><td></td></t<>			b	·····, ····,					
generative       c       Gain or (loss)       7c       689,896.       689,896.       689,896.       689,896.       689,8         d       Net gain or (loss)	e				.				
<sup>a</sup> by get get or (loss) <sup>b</sup> constributions (loss) <sup>c</sup> contributions reported on line 1c). See Part IV, line 18 <sup>b</sup> contributions reported on line 1c). See Part IV, line 18 <sup>b</sup> contributions reported on line 1c). See Part IV, line 18 <sup>b</sup> contributions reported on line 1c). See Part IV, line 18 <sup>b</sup> contributions reported on line 1c). See Part IV, line 19 <sup>b</sup> contributions from fundraising events <sup>c</sup> contributions reported on line 1c). See Part IV, line 19 <sup>b</sup> constrained constratened constratened constrained constrained co	/ent		с						
contributions reported on line 1c). See   Part IV, line 18   b Less: direct expenses   8b   c Net income or (loss) from fundraising events   9 a Gross income from gaming activities. See   Part IV, line 19   b Less: direct expenses   9a   b Less: direct expenses   9b   c Net income or (loss) from gaming activities   9b   c Net income or (loss) from gaming activities   9b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns and allowances   b Less: cost of goods sold   c Net income or (loss) from sales of inventory     Business Code						689,896.			689,896.
contributions reported on line 1c). See       8a         Part IV, line 18       8b         b Less: direct expenses       8b         c Net income or (loss) from fundraising events       9a         9 a Gross income from gaming activities. See       9a         Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       9a         9 a Gross sales of inventory, less returns and allowances       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10b	her	8	а	Gross income from fundraising events (not					
Part IV, line 18 8a   b Less: direct expenses 8b   c Net income or (loss) from fundraising events 9   9 a Gross income from gaming activities. See Part IV, line 19 9a   b Less: direct expenses 9b   c Net income or (loss) from gaming activities 9a   10 a Gross sales of inventory, less returns and allowances 10a   b Less: cost of goods sold 10b   c Net income or (loss) from sales of inventory 10a	₫			including \$ of					
b       Less: direct expenses       8b       Image: constraint of the set									
c       Net income or (loss) from fundraising events       Image: constraint of the second se									
9 a Gross income from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       9b         10 a Gross sales of inventory, less returns and allowances       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10b         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10b									
Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       9b         10 a Gross sales of inventory, less returns and allowances       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       Business Code									
b       Less: direct expenses       9b       Image: Constraint of the second		91	d						
c       Net income or (loss) from gaming activities       Image: Comparison of the second sec			h						
10 a Gross sales of inventory, less returns and allowances     10a       b Less: cost of goods sold     10b       c Net income or (loss) from sales of inventory     Business Code									
and allowances     10a       b     Less: cost of goods sold       c     Net income or (loss) from sales of inventory   Business Code									
b     Less: cost of goods sold     10b     Image: cost of goods sold     Image: cost of goods sold       c     Net income or (loss) from sales of inventory     Image: cost of goods sold     Image: cost of goods sold       Business Code     Image: cost of goods sold     Image: cost of goods sold     Image: cost of goods sold				-	a				
Business Code		I	b		b				
					Ī				
11 a         INSURANCE PREMIUM REBATE         900099         28,747.         28,77           b         OTHER REVENUE         900099         28,045.         28,045.	s								
b OTHER REVENUE 900099 28,045. 28,045.	eou	11 :				,			28,747.
	llan.			OTHER REVENUE	900099	28,045.	28,045.		
	scel	•	C						
d All other revenue	Ä				L	56 700			
			e			,	15712987	0	1107323.
	33200		21-		····· I	_ , 2, • 20,			Form <b>990</b> (2023)

#### ATTIC ANGEL PLACE, INC. Form 990 (2023) Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon			·····	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	167,152.	145,646.	21,506.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	<u> </u>	0 000 404	1 106 005	
7	Other salaries and wages	9,219,729.	8,033,494.	1,186,235.	
8	Pension plan accruals and contributions (include	1 6 0 0 7 1	147 210		
_	section 401(k) and 403(b) employer contributions)	169,071.	147,318.	21,753.	
9	Other employee benefits	1,361,381.		175,159.	
0	Payroll taxes	590,297.	514,348.	75,949.	
1	Fees for services (nonemployees):				
a		736.		736.	
b		69,056.		69,056.	
c	<b>3</b>	09,000.		09,050.	
d	, ,				
e	, , , , , , , , , , , , , , , , , , ,	56,625.		56,625.	
f	Investment management fees	50,025.		50,025.	
g	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	39,619.		39,619.	
12 13	Office expenses	310,654.	253,893.	56,761.	
4	Information technology	212,466.	27,254.	185,212.	
5	Royalties		27,2010		
16	Occupancy	640,542.	581,648.	58,894.	
7	Travel	,	,		
8	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	680,490.	667,678.	12,812.	
20	Interest	443,541.	443,541.		
21	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,995,735.	1,995,735.		
3	Insurance	143,204.		143,204.	
4	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.)				
а	THERAPY	454,550.	163,699.	290,851.	
b	RESIDENT AID SUBSIDY	167,254.	167,254.		
с	AGENCY EXPENSES	125,053.	125,053.		
d	EQUIPMENT REPAIR	101,153.	78,201.	22,952.	
е	All other expenses	245,474.	92,291.	153,183.	
25	Total functional expenses. Add lines 1 through 24e	17,193,782.	14,623,275.	2,570,507.	0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

11

16030905 131839 A298092

#### ATTIC ANGEL PLACE, INC. 39-1919667 Page 11 Form 990 (2023) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 485,712. 669,093. 1 1 Cash - non-interest-bearing 65,714. 65,902. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 546,679. 579,955. 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disgualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 Assets 53,421. 81,567. 8 Inventories for sale or use 8 107,096. 114,636. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other \_\_\_\_\_<u>10a</u> 44,974,412. basis. Complete Part VI of Schedule D 25,912,922. 19,170,143. 19,061,490. b Less: accumulated depreciation 10b 10c 16,618,085. 17,422,074. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 80,943. 47,784. 15 15 Other assets. See Part IV, line 11 37,135,333. 38,034,961. 16 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 1,086,770. 1,770,832. Accounts payable and accrued expenses 17 17 18 18 Grants payable 2,732,827. 2,910,073. 19 19 Deferred revenue 12,507,058. 11,416,148. Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 215,985. 601,485. 25 of Schedule D 16,542,640. 16,698,538. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 20,524,068. 21,260,641. 27 27 Net assets without donor restrictions Net assets with donor restrictions 68,625. 75,782. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 20,592,693. 21,336,423. 32 Total net assets or fund balances 32 37,135,333. 38,034,961. 33 33 Total liabilities and net assets/fund balances

Form 990 (2023)

16030905 131839 A298092

Form	990 (2023) ATTIC ANGEL PLACE, INC.	39-	1919667	Pa	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,06		
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,19	<u>3,7</u>	82.
3	Revenue less expenses. Subtract line 2 from line 1	3	-12		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,59	2,6	93.
5	Net unrealized gains (losses) on investments	5	87	<u>3,4</u>	92.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	21,33	6,4	23.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
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 reviewed	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 separate	basis,			
	consolidated basis, or both:				
	Separate basis X 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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2023)

SCHEDULE A (Form 990)       Public Charity Status and Public Support         Department of the Treasury Internal Revenue Service       Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.							OMB No. 1545-0047		
Name of the	organization		U U					Employer	identification number
			C ANGEL PLA						9-1919667
Part I	Reason fo	r Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	IS.	
1 A 2 A 3 A 4 A cit	church, conve school descril hospital or a c medical resea ty, and state:	ention of chu bed in <b>secti</b> cooperative l rch organiza	urches, or associatio on 170(b)(1)(A)(ii). ( hospital service orga ation operated in cor	For lines 1 through 12, cl n of churches described Attach Schedule E (Form anization described in <b>se</b> njunction with a hospital	in section 1990).) ection 170 described	n 170(b)(1 (b)(1)(A)(ii in sectio	ii). n 170(b)(1)(A		
				lege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
6 A 7 Ar 8 A 9 Ar	federal, state, n organization ection 170(b)( community true n agricultural r	or local gov that normal <b>1)(A)(vi).</b> (Co ust describe esearch org	lly receives a substar complete Part II.) ed in <b>section 170(b)(</b> anization described	nental unit described in s ntial part of its support fr ( <b>1)(A)(vi).</b> (Complete Part in <b>section 170(b)(1)(A)(</b> i ulture (see instructions).	rom a gove t II.) i <b>x)</b> operate	ernmental ed in conju	unit or from th Inction with a	land-grant	college
	niversity:	a norriana g	ran conege of agric			name, eny	, and state of	the conege	
ac ind Se 11 Ar 12 X Ar m	tivities related come and unree <b>section 50</b> n organization n organization ore publicly su	I to its exem elated busin 9(a)(2). (Cor organized a organized a upported org	npt functions, subjections in the set of the	than 33 1/3% of its supp t to certain exceptions; a (less section 511 tax) fro vely to test for public saf vely for the benefit of, to d in <b>section 509(a)(1)</b> of	and (2) no om busines fety. See perform th r <b>section</b>	more than sses acqui section 50 he function 509(a)(2).	33 1/3% of it red by the org 09(a)(4). ns of, or to ca See section	s support figanization a rry out the <b>509(a)(3).</b> (	rom gross investment Ifter June 30, 1975. purposes of one or
	-			f supporting organization				-	
			-	upervised, or controlled	• • • •	-			
	• •	°	on(s) the power to reg complete Part IV, Se	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the sl	ipporting
b 🗌	<b>Type II.</b> A sup control or mai organization(s	porting organagement of (). <b>You mus</b> t	anization supervised f the supporting orga <b>t complete Part IV</b> ,	or controlled in connect anization vested in the sa Sections A and C.	ame perso	ns that co	ntrol or mana	ge the supp	ported
	••	-		g organization operated				ly integrate	d with,
d 🗌 .	<b>Type III non-</b> 1 that is not fun requirement (s Check this bo	tunctionally ctionally inte see instruction x if the orga	rintegrated. A supp egrated. The organiz ons). You must con mization received a v	). You must complete F porting organization oper ation generally must sati inplete Part IV, Sections written determination from nally integrated supporting ally integrated supporting	ated in col isfy a distr <b>A and D,</b> m the IRS	nnection w ibution rec <b>and Part</b> that it is a	vith its suppor quirement and <b>V.</b>	l an attentiv	. ,
f Enter th	ne number of	supported o	rganizations						1
			about the supporte	d organization(s).	( ) I. P				
(i) N	ame of supporte	ed	(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 support (see ir	-	(vi) Amount of other
	organization			above (see instructions))	Yes	No		istructions)	support (see instructions)
ATTIC A			20 0054041	10			14 605	075	0
ASSOCIA	TION		39-0854841	10	X		14,623	, 4/3.	0.
							1.1.50	075	
Total							14,623	3,275.	0.

			L PLACE,			39-191	
Ра	rt II Support Schedule for	-					-
	(Complete only if you checke fails to qualify under the tests			° °	on failed to qualify u	nder Part III. If the	organization
Sec	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(4) 2013	(6) 2020			(6) 2020	
•	membership fees received. (Do not						
	•						
-	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						L
		(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(1) TOTAI
-	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		PTC				
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third, <sup>.</sup>	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	ic Support Per	rcentage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	livided by line 11, o	column (f))		14	%
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2023. If the					ore, check this bo	k and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2022. If the	organization did no	ot check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-	-				
	meets the facts-and-circumstances te			-	-		
b	10% -facts-and-circumstances test	-		• • • •	-	7a, and line 15 is <sup>.</sup>	10% or
~	more, and if the organization meets th	-	-				
	organization meets the facts-and-circl						
_18	Private foundation. If the organization				•		·
	<b>-</b>			· · ·			(Form 990) 2023

332022 12-21-23

Schedule A (Form 990) 2023	ATTIC ANGE	L PLACE,	INC.		39-191	9667 Page 3
Part III Support Schedule for	r Organizations	Described in	Section 509(a)	(2)		
(Complete only if you check	ed the box on line 10	) of Part I or if th	e organization failed	to qualify under I	Part II. If the organiz	ation fails to
qualify under the tests listed	below, please comp	olete Part II.)	-		-	
Section A. Public Support						
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(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, an	d					
3 received from disqualified persor	IS					
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties,						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from business	es					
acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
11 Net income from unrelated busines						
activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12						
14 First 5 years. If the Form 990 is fo	,	rst second thir	fourth or fifth tax	vear as a section	501(c)(3) organizatio	ו מכ
-				•		·
Section C. Computation of Pul	blic Support Per	centage				
15 Public support percentage for 202			column (f))		15	%
16 Public support percentage from 202			, oolanni (i))		16	%
Section D. Computation of Inv						,,
17 Investment income percentage for					17	%
18 Investment income percentage from						%
19a 33 1/3% support tests - 2023. If t						
more than 33 1/3%, check this box						
b 33 1/3% support tests - 2022. If t						
line 18 is not more than 33 1/3%, c						
20 Private foundation. If the organiza						
		· · · · · · · · · · · · · · · · ·	.,,,			

332023 12-21-23

16030905 131839 A298092

Schedule A (Form 990) 2023

<sup>16</sup> 2023.04020 ATTIC ANGEL PLACE, INC. A2980921

#### ATTIC ANGEL PLACE, INC.

(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.)

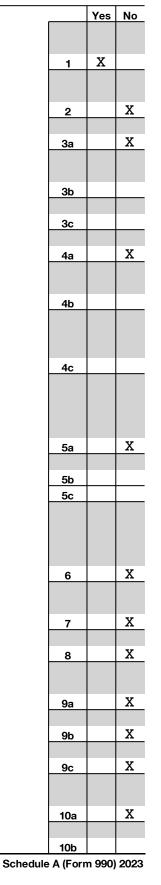
# Section A. All Supporting Organizations

Part IV Supporting Organizations

Schedule A (Form 990) 2023

- 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.
- 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



2023.04020 ATTIC ANGEL PLACE, INC. A2980921

17

Bart IV         Supporting Organizations (contributed)         Sector 1         Sector 1         Sector 1         Yes         No.           11         Has the organization assepted a gift or contribution from any of the following persons?         a person who directly or unitexty controls, alther alther or together with persons described on lines 11b and 11b and 11b adds.         Image: 1         Image: 1 <td< th=""><th>Sche</th><th>dule A (Form 990) 2023 ATTIC ANGEL PLACE, INC. 39–1</th><th>L91966</th><th>7 P:</th><th>age <b>5</b></th></td<>	Sche	dule A (Form 990) 2023 ATTIC ANGEL PLACE, INC. 39–1	L91966	7 P:	age <b>5</b>
11       Has the organization accepted a gift or contribution from any of the following persons?       a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b above?       yes       No         2       A Starting member of a support of organization?       Into alone, which alone in the support of a support of organization is the support of organization is activities. If the organization is official capacity, or mombership of on or membership body, membership of body, membership of one or membership body, membership of one or organization cells which the bayent to organization is activities. If the organization is directly operated, supported organizations is activities. If the organization is directly operated, supported organization or estart of the support of organization or estart on the support of organization operated organization or estart on the support of organization operated support of organization of the support of organization operated support of organization of the support of organization of the support of organization operated support of organization operated support of organization of the support of organization operated support of organization of the support of organization of the support of organization operated support of organization of the support organization of the support of organization of the support o				, 10	ige <b>o</b>
<ul> <li>a. A person who directly or indirectly controls, after advice or together with persons described on lines 11b and 11b below.</li> <li>b. A family member of a person described on line 11a above? (# 'Yes' to line 11a, 11b, or 11c, provide 10b advices 11b below?)</li> <li>c. A S9% controlled entity of a person described on line 11a or 11b above? (# 'Yes' to line 11a, 11b, or 11c, provide 10b advices 11b below?)</li> <li>c. A S9% controlled entity of a person described on line 11a or 11b above? (# 'Yes' to line 11a, 11b, or 11c, provide 10b advices 10b advices 11b below?)</li> <li>c. A S9% controlled entity of a person described on line 11a or 11b above? (# 'Yes' to line 11a, 11b, or 11c, provide 10b advices 11b below?)</li> <li>c. D D the governing body, members of the governing body, officers adting in their difficial capacity, or membership of one or more explored or ganization of the samp term of the apportant or generation is advices there with persons during the tay at a support of ganization or restrictions, if any, applied to subopt term or ganization of the support of ganization or restrictions, if any, applied to subopt term or ganization (%) that comparised among the support of ganization or restrictions is apported or ganization? (# 'Yes, 'applier) in Part II how control or management of the support of ganization or restrictions. If the support of ganization (%) that comparised is a support of ganization is support of ganizations? (# 'Yes, 'applier) in the support of ganization or restrictions is support of ganization or support of ganization or support of ganization or support of ganization is support of ganization or the support of ganization or management of the support of ganization is support o</li></ul>				Yes	No
the below, the governing body of a supported organization? <ul> <li>A stamp member of a person described on line 11 as note?             <ul></ul></li></ul>	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person described on line 11a active?     b A 53% controlled mithy of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide     destin (P Pert M.     Section B. Type I Supporting Organizations     1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or,     detection, of cescribe how a power to appoint and/or envice of the cognization is active in the support of organization of the powers to appoint and/or envice of the cognization of the support of organization of the their and/or envice of the cognization is active in the support of organization of the their active is a provide organization of the their active is apported organization of the their the support of the organization of the their the support of organization of the their the support of organization of the their the support of the organization.     Section C. Type II Supporting Organizations     The the organization support of organization of the their the support of the directors     or instates of each of the supporting Organization.     Section D. All Type III Supporting Organizations     The the director of the director or the director or the director or instates were allowed organizations     the support of the organization's support of organization.     The organization order the support of organization or the support order organization or the the organization or the director orbit of the support of the directors     or instates of each of the support of Organiz	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
<ul> <li>a A 3% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide dual in Pert V.</li> <li>Section B. Type I Supporting Organizations</li> <li>1 Ded the governing body, members of the governing body, officers acting in their official capacity, or membership of one or mees supported organizations have the power to regularly appoint or objective in the support of organizations officers, determined the support of organization of the organization officers of the segmentation of the organization of the power to regularly appoint or objective of the support of organization officers, determined the support of organization officers of the segmentation and what or onto the organization of the support of organization of the organization of the organization officers of the support of organization or trustees of each of the organization or trustees during the tax year also a majority of the directors or trustees of each of the organization or trustees of accord the organization or support organization and the support of organization organ</li></ul>		11c below, the governing body of a supported organization?	11a		
control         11c         X           Section 8. Type I Supporting Organizations         Image: Section 8. Type I Supporting Organization share the power to regularly appoint or elect a least a majority of the organization of sections of the organization of sections in Part VI how, describe in Part VI how describe in Part VI how describe in Part VI how describ in th			11b		X
Section B. Type I Supporting Organizations       Yes         1       Did the opximing body, members of the opvinning body, officers acting in their official capacity, or membership of one or more supported organizations there the power to repulsity appoint or elect at latat a majority of the organization admost operated, supervised, or controlled the organizations admost black there argonated in a standard organization of admost organization admost organization admost repulsity appoint or electrons, or trustees of admost one supported organizations admost the argonated in a standard organization admost repulsity appoint or electrons, or trustees of admost one supported organization admost repulsity appoint or generation (1997). The specific operated, uservised, or controlled the supported organization admost repulsity appoint or generation (1997). The specific operated, uservised, or controlled the supported organization (1997). The specific operated, uservised, or controlled the supported organization (1997). The specific operated, uservised, or controlled the supported organization (1997). The specific operated, uservised, or controlled the supported organization (1997). The specific operated, uservised, or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's directors or trustees during the tax year and the tax year also a majority of the directors or trustees of each of the organization's directors or trustees during the tax year (1997). The specific optical directors or trustees of each of the organization's apported organizatio	С				
Ded the opcomming body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization officers, directors, or trustees at all times during that ayy appoint of view the supported organization, develop beyows to appoint and/or review officers, directors, or trustees well officers, directors, direc	800	detail in Part VI. tion B. Type I. Supporting Organizations	11c		_ X_
<ol> <li>Did the governing body, members of the governing body, officers acting in their official capacity, or membershol or one or more supported organization is an endry of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization and monor of the organization of the monor of the organization and the tax year at a sampler of the directors or trustees of each of the organization and the describing the type and amount of support for organization and the organization and the organization and the organiz</li></ol>	Sec	tion B. Type i Supporting Organizations		Vee	
<ul> <li>supported organization parts for the benefit or any supported organization of the than the supported organization of the the parts of any supported organization of the the the support of any supported organization of the the support of any support</li></ul>	1	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported		Yes	
2 Did the organization operate for the benefit of any supported organization other than the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supporting organization? If "Yes," explain in Part VI how control or management of the supporting organization? If "No," describe in Part VI how control or management of the supporting organization? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or management of the supporting Organizations.           9         Did the organization is supported organizations, by the last day of the fifth month of the organization is any eart, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a written notice describing the type and amount of support provided 7           9         Were any of the organization is officers, directors, or trustees ther( (i) apoint of the organization is direct, referent, with e supported organizations, by the last day of the organization maintained a close and continuous working relationship with the supported organizations).         1           9         Were any of the organization sinvestment policies and in directing the use of the organization's anginficant voice in the organization sinvestment policies and in directing the use of the organization's as supported organization was responsive in Part VI how costex at a line organization stated with the organization stated with the arganization stated with the organization stated with the organization stated with the organization state with the organization supported organization's supported organization's s			1	x	
erganization(s) that operated, supervised, or controlled the supported organization? // **es, "explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,     supported organization(s) that operated,     supported organization(s) that operated,     supported organization(s) that operated,     vera a majority of the organization's directors or trustees during the tax year also a majority of the directors     or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors     or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors     or trustees of each of the organization was vested in the same persons that controlled or managed     the supported organizations.     Section D. All Type III Supporting Organizations, by the last day of the fifth month of the     organizations governing documents in effect on the date of notification, and (iii) copies of the     organization's directors, or trustees either (i) appointed or elected by the supported     organization signment policies and in directing the use of the organization's     were any of the organization's investment policies and in directing the use of the organization's     income or assets at all times during the tax yea? / / *tes, * describe in Part VI the role the organization's     supported organization's investment policies and in directing the use of the organization's     supported organization's investment policies and in directing the eargenization's     supported organization's investment policies and in directing the use of the organization's     supported organization's investment policies and in directing the tax year of the organization's investment policies and in directing the eargenization's     supported organization's investment policies and in directing the eargenization's     supported organization's investment policies and in directing the aregularity in strus	2				
Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated.       2       X         Section C. Type II Supporting Organizations       Yes       No         1       Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the supporting Organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organizations bits       Yes       No         Section D. All Type II Supporting Organizations       I       I       I       I         Section D. All Type II Supporting Organizations, by the last day of the fifth month of the organization's supported organization's directors of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's organization's or trustees either 0) appointed organization's supported organization's supported organization's supported organization's supported organization's income or assets at all times during the tax year (ii'''es', ''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc'''esc	_				
Section C. Type II Supporting Organizations     Yes No     or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control     or management of the supporting Organization was vested in the same persons that controlled or managed     the supported organization's support of organization, by the last day of the fifth month of the     organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax     year, (i) a copy of the Form 990 that was most recently liked as of the date of notification, and (iii) copies of the     organization's support of the organization's unsported organizations, by the last day of the fifth month of the     organization's governing documents in effect on the date of notification, and (iii) copies of the     organization's of the organization's investment policies and in directing the supported organization's     supported organization's investment policies and in directing the uses of the organization's     supported organization's investment policies and in directing the use of the organization's     supported organization's investment policies and in directing the use of the organization's     supported organization's investment policies and in directing the use of the organization's     supported organization's supported organization's     supported organization subported a governmental entity. Pascribe in Part VI the role the organization's     supported organization subported organization's     supported organization's activities during the tax year? If "Yes," describe in Part VI there were the organization's     supported organization's activities during the tax year? If "Yes," describe in Part VI there is a below.     C The organization subported organization's activities during the tax year and there are ponsize? If "Yes," then in Part VI identify     those supported organization's activities during the tax year anot the organization's     no erganization subuported a governmen					
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting Organization was vested in the same persons that controlled or managed the support of the organization is supported organizations. 2 Dettion D. All Type III Supporting Organizations 3 Did the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a cony of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's officers, directors, directors, directors, or trustees eather (i) appointed or elected by the supported organization(s). 2 Were amy of the organization's officers, directors, directors, directors, or trustees of a control work work or assets at all interested. 3 By reason of the relationship described on line 2, above, did the organization's income or assets tax ill interested. 3 cettor E. Type III Functionally Integrated Supporting Organizations: 3 Cettor E. Type III Functionally Integrated Supporting Organizations is novemental entity (see instructions). a			2		Х
<ol> <li>Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</li> <li>Section D. All Type III Supporting Organizations to the date of notification, and (iii) copies of the organization's axy year. (i) a written notice describing the type and amount of support provided during the prior tax year. (i) a written notice describing the type and amount of support provided during the prior tax year. (i) a copy of the Form 990 that was most recervity filed as of the date of notification, and (iii) copies of the organization's governing obdy of a supported organization? If "No," (explain in Part VI how the organization is unported organization's supported organization's unported organization's apported organization's activities the unported organiz</li></ol>	Sec	tion C. Type II Supporting Organizations			
or trustees of each of the organization's supported organization(s)? If *No,* describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations, by the last day of the fifth month of the organization's tax year, (i) a worthen notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees effect organization? (i) explain in Part VI how the organization maintaned a close and continuous working relationship with the supported organizations (s). By reason of the relationship described on line 2, above, did the organization's supported organizations (s). Sectron E. Type III Functionally Integrated Supporting Organizations supported organization substitutes and in directing the use of the organization's isocomental entity. See enstructionals. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Check the supported organization subported organizations. Complete line 3 below. C In the organization subported organizations and responsive? If Yes," then in Part VI identify those supported organization is novement, one or more of the organization's position that its supported organization's involvement, one or more of the organization's position that it				Yes	No
or management of the supporting organization was vested in the same persons that controlled or managed     the supported organization(s).     Section D. All Type III Supporting Organizations     The organization provide to each of its supported organizations, by the last day of the fifth month of the     organization's tax year, () a written notice describing the type and amount of support provided during the prior tax     year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the     organization's overning documents in effect on the date of notification, not the extent not previously provided?     Were any of the organization's directors, or trustees either (i) appointed or regularization(s).     Section E. Type III Functionally Integrated Supporting Organization's     income or assets at all times during the tax year? () <i>tryes,</i> ' describe in Part VI her organization's     is supported organizations     supported organizations     is supported organization's investment policies and in directing the use of the organization's     is supported organization's     is used the programization's supported organization's     is used to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).     Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).     Check the box next to the method that the organization used to satisfy the Integral Part VI how you supported a governmental entity.     Describe in Part VI how you supported a governmental entity.     Section E. Type III Functionally integrated Supported organization.     Complete line 2 below.     Did the organization supported a governmental entity.     Describe in Part VI how you supported a governmental entity (see instructions).     The organization address and expline how these sactivities directly further the exempt purposes of     the supported organization's activities d	1				
Section D. All Type III Supporting Organizations It is supported organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,'' explain in Part VI how the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax yea? If 'Yes,'' describe in Part VI the role the organization's income or assets at all times during the tax yea? If 'Yes,'' describe in Part VI the role the organization's upported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations. Content to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). A ctivities Test. Answer lines 2 and 2b below. D id the organization subported organization's activities during the tax year directly further the exempt purposes of the supported organization's activities during the tax year directly further the exempt purposes, how the organization's activities during the activities direct their exempt purposes, how the organization's supported organization's activities during the activities direct their exempt purposes, how the organization's supported organization's supported organization's unovernent. Parent of Supported organization's neovernent. D id the organization's supported organization's supported organization's molement. Parent of Support		or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
Section D. All Type III Supporting Organizations    Yes No  Lot the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization of (ii) serving on the governing body of a supported organization? If "No," <i>explain in</i> Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization is pupped organization's income or assets at all times during the tax year? If "Yes," <i>describe in</i> Part VI the role the organization's supported organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Complete line 2 below. Col The organization satisfied the Activities Test. Answer lines 2 and 2 below. Col The organization satisfied the Activities Test. Answer lines 2 and 2 below. Col The organization satisfied the Activities that, but for the organization's involvement, one or more of the organization's activities during the tax year directly further the exempt purposes of the supported org		or management of the supporting organization was vested in the same persons that controlled or managed			
1       Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?         2       Were any of the organization's difficers, directors, or trustese either (i) appointed or elected by the supported organization's investment policies and in directing the use of the organization's, a supported organization's investment policies and in directing the use of the organization's assignificant voice in the organization is the parent of each of its supported organization's supported organizations played in this regard.       2         3       Section E. Type III Functionally Integrated Supporting Organizations       3         1       Check the box next to the method that the organization used to satisfy the Integral Part V there to the governmental entity (see instructions).         2       Activities Test. Answer lines 2 and 2b below.       Complete line 3 below.       2         2       Activities constitute advinites that, but for the organization's involvement, one or more of the organization's activities.       Part VI how y	<b>6</b> 00	the supported organization(s).	1		L
<ul> <li>Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization's income or assets at all times during the tax year? (II'Yes,'' describe in Part VI the role the organization's income or assets at all times during the tax year? (I 'Yes,'' describe in Part VI the role the organization's supported organizations is provided?</li> <li>Check the box next to the method that the organization supported organizations.</li> <li>Check the box next to the method that the organization supported organizations.</li> <li>Check the box next to the method that the organization supported a governmental entity (see instructions).</li> <li>The organization subported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).</li> <li>Activities Test. Answer lines 2a and 2b below.</li> <li>Did substantially all of the organization was responsive? If "Yes," then in Part VI identify those supported organization's activities during the tax year (if the resempt purposes, how the organization's novicement.</li> <li>Parent of Supported Organization's position that its supported organization's involvement, one or more of the organization's position that its supported organization's movement, one or more of the organization's position that its supported organization's involvement.</li> <li>Parent of Supported Organization's position that its supported orga</li></ul>	Sec	tion D. An Type in Supporting Organizations			
organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent non, and (iii) copies of the organization's differs, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described on line 2, above, did the organization is supported organizations have a significant voice in the organization is nestment policies and in directing the use of the organization's is upported organizations layed in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a In the organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). a Did substantially all of the organization's activities during the tax year directly further the exempt purposes, how the organization's activities directly furthered their exempt purposes, how the organization's supported organization's activities. b Did the activities described on line 2, above, constitute activities directly furthered their exempt purposes, how the organization's supported organization's involvement, one or more of the organization's position that its supported organization, is involvement, one or more of the organization's position that its supported organization, sinvolvement, one or more of the organization's position that its supported organization, word the activities describe on line 2,	4	Did the executation provide to each of its supported executations, by the last day of the fifth month of the		Yes	NO
<ul> <li>year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?</li> <li>Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's officers, directors, or trustees either (i) appointed organization's <i>Part VI</i> how the organization's officers directing the use of the organization's activities described on line 2, above, constitute activities dation's supported organization's supported organization's supported organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's supported organizations played in this regard.</li> <li>Section E. Type III Functionally Integrated Supporting Organizations.</li> <li>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</li> <li>The organization subsfied the Activities Test. Complete line 2 below.</li> <li>D is clustantially all of the organization activities during the tax year? If "Yes," <i>espine in</i> Part VI how you supported a governmental entity (see instructions).</li> <li>A chivities Test. Answer lines 2a and 2b below.</li> <li>D id substantially all of the organization's activities directly further the exempt purposes, how the organization's supported organizations, and how the organization determined that these activities dosribed organization's supported organization's involvement, one or more of the organization's position that its supported organization's involvement, one or more of the organization's position that its supported organization's involvement.</li> <li>Parent of Supported Organization's position that its supported organization's involvement, one or more of the organization's position that its supported organization's involvement.</li> <li>D id the</li></ul>	•				
organization's governing documents in effect on the date of notification, to the extent not previously provided?       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1					
<ul> <li>2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</li> <li>3 By reason of the relationship described on line 2, above, did the organizations. and how the organization is supported organization is supported organization as the supported organization is used to the organization. Some or assets at all times during the tax year? If "Yes," describe in Part VI herole the organization's supported organizations played in this regard.</li> <li>3 Section E. Type III Functionally Integrated Supporting Organizations. Complete line 3 below.</li> <li>a The organization supported organization used to satisfy the Integral Part Test during the year (see Instructions).</li> <li>a Activities Test. Answer lines 2 and 2b below.</li> <li>a Did substantially all of the organization was responsive? If "Yes," then in Part VI identify those supported organization is supported organization, supported organization as responsive? If "Yes," then in Part VI identify those supported organization's supported organization's activities directly furthered their exempt purposes, how the organization's supported organization's activities directly furthered their exempt purposes, how the organization's supported organization's supported organization's involvement, one or more of the organization's nuolement.</li> <li>9 Parent of Supported Organization's nuolement.</li> <li>9 Parent of Supported Organization's involvement.</li> <li>9 Parent of Supported organization's involvement.</li> <li>9 Parent of Supported organization's nuolement.</li> <li>9 Parent of Supported organization's nuolement.</li> <li>9 Parent of Supported organization's nuolement.</li> <li>9 Did the organization have the power to regulary appoint or elect a majority of the officers, or trust</li></ul>			1		
organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how       2         3       By reason of the relationship described on line 2, above, did the organization's supported organization's have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.       2         Section E. Type III Functionally Integrated Supporting Organizations       3       3         1       Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).       3         a       The organization satisfied the Activities Test. Complete line 2 below.       3         b       The organization supported organization's activities during the tax year? If "Yes," then in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.       Yes No         2       Activities dorganization's activities during the tax year? If "Yes," then in Part VI how you supported a governmental entity (see instructions).       2         2       Activities Test. Answer lines 2a and 2b below.       Yes No         3       Did substantially all of the organization's activities during the tax year? If "Yes," then in Part VI identify         those supported organizations and explain how these activitites directly furthered their exempt purposes,	2				
the organization maintained a close and continuous working relationship with the supported organization(s).       2         3       By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's       3         Section E. Type III Functionally Integrated Supporting Organizations       3       3         1       Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).       3         a       The organization satisfied the Activities Test. Complete line 2 below.       3         b       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         a       Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's activities during the se activities directly furthered their exempt purposes, how the organization's outported organization's involvement, one or more of the organization's involvement.       2a         b       Did substantially all of its activities.       2a         b       Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's involvement.       2a         c       Did the activities described on line 2a, above,	_				
<ul> <li>3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</li> <li>3 Section E. Type III Functionally Integrated Supporting Organizations</li> <li>a</li></ul>			2		
income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's       3         supported organizations played in this regard.       3         Section E. Type III Functionally Integrated Supporting Organizations       3         1       Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).         a       The organization satisfied the Activities Test. Complete line 2 below.         b       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.         a       The organization is the parent of each of its supported organization was responsive? If "Yes," then in Part VI identify those supported organization's activities during the tax year directly furthered their exempt purposes of the supported organization was responsive to those supported organization determined that these activities dustantially 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 position that its supported organization(s) would have engaged in these activities but for the organization's involvement.       2a         3       Parent of Supported Organizations. Answer lines 3a and 3b below.       2b       2b       2b       2b       2b       2b       2b       2b       2b       2a       2b <t< td=""><td>3</td><td></td><td></td><td></td><td></td></t<>	3				
supported organizations played in this regard.       3         Section E. Type III Functionally Integrated Supporting Organizations       Image: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).       Image: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).         a       Image: The organization satisfied the Activities Test. Complete line 2 below.       Image: Complete line 3 below.         b       Image: The organization supported organization.       Complete line 3 below.         c       Image: The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.       Yes. No         a       Did substantially all of 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 described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have been engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.       2b         3       Parent of Supported Organizations. Answer lines 3a and 3b below.       3a       2b		significant voice in the organization's investment policies and in directing the use of the organization's			
Section E. Type III Functionally Integrated Supporting Organizations         1       Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).         a       The organization satisfied the Activities Test. Complete line 2 below.         b       The organization is the parent of each of its supported organizations. Complete line 3 below.         c       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.         a       Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization 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 during the tax supported organization's involvement, one or more of the organization's position that its supported organization(s) would have been engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities to for the organization's novement.         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.         3       Did the organization exercise a substantial degree of direction over t		income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
1       Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).         a       The organization satisfied the Activities Test. Complete line 2 below.         b       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         c       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.         a       Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive? If "Yes," then in Part VI identify those supported organization was responsive to those supported organization's involvement, one or more of the organization's position that its supported organization's involvement, one or more of the organization's position that its supported organization(s) would have been engaged in these activities but 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? 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		supported organizations played in this regard.	3		
<ul> <li>a The organization satisfied the Activities Test. Complete line 2 below.</li> <li>b The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).</li> <li>2 Activities Test. Answer lines 2a and 2b below.</li> <li>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.</li> <li>b Did the activities constituted substantially all of its activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have been engaged in these activities but for the organization's involvement.</li> <li>3 Parent of Supported Organizations. Answer lines 3a and 3b below.</li> <li>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 organization? If "Yes" or "No" provide details in Part VI.</li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>	Sec	tion E. Type III Functionally Integrated Supporting Organizations			
b       The organization is the parent of each of its supported organizations. Complete line 3 below.         c       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.       Yes         a       Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how 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 dostantially all of its activities.       2a         b       Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's involvement.       2b         3       Parent of Supported Organization's involvement.       2b         4       Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.       3a         b       Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       3a			ns).		
c       The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).         2       Activities Test. Answer lines 2a and 2b below.       Yes       No         a       Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the 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 described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have been engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.       2b         3       Parent of Supported Organizations. Answer lines 3a and 3b below.       2b         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.       3a         b       Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       3a					
<ul> <li>2 Activities Test. Answer lines 2a and 2b below.</li> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If</i> "Yes," <i>then in</i> Part VI identify those supported organizations and explain <i>how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i></li> <li>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 position that its supported organization(s) would have been engaged in? <i>If</i> "Yes," <i>explain in Part</i> VI <i>the reasons for the organization's involvement.</i></li> <li>3 Parent of Supported Organizations. Answer lines 3a and 3b below.</li> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.</li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>				19)	
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If</i> "Yes," <i>then in</i> <b>Part VI identify those supported organizations and explain</b> <i>how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities</i>.</li> <li>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 position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</li> <li>3 Parent of Supported Organizations. Answer lines 3a and 3b below.</li> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in <b>Part VI.</b></li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>			instruction		No
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.       2a         b       Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.       2b         3       Parent of Supported Organizations. Answer lines 3a and 3b below.       2b         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.       3a         b       Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       3a	а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
how the organization was responsive to those supported organizations, and how the organization determined       2a         that these activities constituted substantially all of its activities.       2a         b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in       2a         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.       2b         3 Parent of Supported Organizations. Answer lines 3a and 3b below.       2b         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.       3a         b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       4a		the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
how the organization was responsive to those supported organizations, and how the organization determined       2a         that these activities constituted substantially all of its activities.       2a         b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in       2a         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.       2b         3 Parent of Supported Organizations. Answer lines 3a and 3b below.       2b         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.       3a         b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       4a		those supported organizations and explain how these activities directly furthered their exempt purposes,			
<ul> <li>b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If</i> "Yes," <i>explain in</i> <b>Part VI</b> <i>the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i></li> <li>2b</li> <li>3 Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b></li> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in <b>Part VI.</b></li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>					
one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in       Image: Comparization in the image: Comparization image: C		that these activities constituted substantially all of its activities.	2a		
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.       2b         3       Parent of Supported Organizations. Answer lines 3a and 3b below.       2b         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.       3a         b       Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       4a	b				
these activities but for the organization's involvement.     2b       3     Parent of Supported Organizations. Answer lines 3a and 3b below.     a       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.     3a       b     Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each     4a					
<ul> <li>3 Parent of Supported Organizations. Answer lines 3a and 3b below.</li> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i></li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>		Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
<ul> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in</i> <b>Part VI.</b></li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>	-	•	2b		
trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.       3a         b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each       3a					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	а		0		
	h	•	Ja		
	U		3b		

332025 12-21-23

16030905 131839 A298092

Schedule A (Form 990) 2023

A2980921

<sup>18</sup> 2023.04020 ATTIC ANGEL PLACE, INC.

	edule A (Form 990) 2023 ATTIC ANGEL PLACE, INC			39-1919667 <sub>Page</sub>
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifyi			Part VI). See instructions
	All other Type III non-functionally integrated supporting organizations mus	st complete S	Sections A through E.	
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			
	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		
ect	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		
ect	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-function	ally integrated	1 Type III supporting orga	nization (see

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

_	dule A (Form 990) 2023 ATTIC ANGEL P			3	9-1919667 Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting O	rganizations (continu	ued)	1
Sect	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organiza	tions	3	
_4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
_7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is respon	sive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	(1)	(**)	10	(
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distribution	(ii) S Underdistribution Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
e	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: \$				
<u>a</u>	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				
e	Excess from 2023				

Schedule A (Form 990) 2023

	Form 990) 2023			PLACE,			39-1919667	Page 8
	Part IV, Section A, line 1; Part IV, Sect	lines 1, 2, 3b, 3c, 4 tion D, lines 2 and 3	b, 4c, 5a, 6, 5; Part IV, Se	9a, 9b, 9c, 11 ction E, lines	quired by Part II, line 10; a, 11b, and 11c; Part IV, Ic, 2a, 2b, 3a, and 3b; P I 6. Also complete this p	Section B, lines 1 art V, line 1; Part V	and 2; Part IV, Sectior Section B, line 1e; Pa	n C, irt V,
20020 10 01 0	,						Schedule A (Form S	2001 2021
32028 12-21-23	3 131839 A29			2	1 .04020 ATTIC			A2980

DocuSign Envelope ID: 5033814E-23E9-443D-BDF5-83EE3C10B1FE	CODV	**
<b>o</b>		

### Schedule B Schedule of Contributors OMB No. 1545-0047 (Form 990) Attach to Form 990, 990-EZ, or 990-PF. 2023Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Employer identification number Name of the organization 39-1919667 ATTIC ANGEL PLACE INC. Organization type (check one): Filers of: Section: $\mathbf{X}$ 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not 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**

X 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 of the parts unless to the set of the year for an *exclusively* set of the parts unless to the general Rule applies to this organization because it received *nonexclusively* set of the year for an *exclusively* set of the year for an *exclusively* set of the year for the year for an *exclusively* set of the year for the ye

**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.

chedule B (Form 9			Page
ame of organization	on		Employer identification number
TTIC ANGE	EL PLACE, INC.		39-1919667
Part I Cont	tributors (see instructions). Use duplicate copies of Part I i	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
<u>   1                                 </u>		\$8,50	) 0 . Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
2		\$46,65	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
3	In Pro	\$ <u>10,53</u>	Person X Payroll Noncash (Complete Part II for

			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>   5                                 </u>		\$6,100.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>	וזמוווס, מענוססס, מווע בור דד	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
3452 12-26-23		I	Schedule B (Form 990) (2023)
905 1318	23 39 A298092 2023.04	4020 ATTIC ANGEL PLAC	E, INC. A29809

	3 (Form 990) (2023)		Page <b>3</b>
Name of o	rganization		Employer identification number
ATTIC	ANGEL PLACE, INC.		39-1919667
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional 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	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
	In Proc	ess •	5
(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	
		\$	

24

Schedule B (Form 990) (2023)

	B (Form 990) (2023)		Page 4
Name of o	rganization		Employer identification number
	ANGEL PLACE, INC.		39-1919667
Part III	from any one contributor. Complete columns (a)	through (e) and the following line entry.	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations
	completing Part III, enter the total of exclusively religious, c Use duplicate copies of Part III if additional s	haritable, etc., contributions of <b>\$1,000 or less</b> pace is needed.	for the year. (Enter this info. once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			_
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
		[	
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			_
			_
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
		Prod	
(c) No.			_
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			_
			_
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
	·		
(a) Na			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
	uuu uuu uuu uuu uuu uuu uuu uuu		

323454 12-26-23

Schedule B (Form 990) (2023)

DocuSign Envelope ID: 5033814E-23E9-443D-BDF5-83EE3C10B1FE

		OMB No. 1545-0047			
(Forr	n 990)	Part IV, line 6, 7, 8, 9, 10			2023
	ment of the Treasury I Revenue Service	A Go to www.irs.gov/Form99	ttach to Form 990. 0 for instructions and tl	he latest information.	Open to Public Inspection
Nam	e of the organization				Employer identification number
De		ATTIC ANGEL PLACE,		imilar Funda ar Ar	39-1919667
Pa		ations Maintaining Donor Advise n answered "Yes" on Form 990, Part IV, lin		Similar Funds of Ad	COUNTS. Complete if the
	organization		(a) Donor advise	ed funds	(b) Funds and other accounts
1	Total number at en	nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5		on inform all donors and donor advisors in v		eld in donor advised fund	ds
	are the organizatio	on's property, subject to the organization's	exclusive legal control?		Yes 🗌 No
6	•	on inform all grantees, donors, and donor a	• •		
		oses and not for the benefit of the donor o	,	, , ,	°
Pa	impermissible priva				
		ation Easements. Complete if the org		s" on Form 990, Part IV,	line 7.
1		servation easements held by the organization of land for public use (for example, recrea	· · · · ·	Draconvotion of a hist	prically important land area
		f natural habitat		Preservation of a certi	
		n of open space			
2		through 2d if the organization held a qualif	fied conservation contrib	ution in the form of a co	nservation easement on the last
	day of the tax year	<b>c c</b> .			Held at the End of the Tax Year
а	Total number of co	onservation easements			2a
b					2b
с	Number of conserv	vation easements on a certified historic stru	ucture included on line 2	а	2c
d		vation easements included on line 2c acqu			
		ture listed in the National Register			2d
3		vation easements modified, transferred, rel	eased, extinguished, or t	erminated by the organi	zation during the tax
4	year	where property subject to conservation eas	comont is located		
-+ 5		tion have a written policy regarding the per		tion handling of	
Ū	•	orcement of the conservation easements it			Yes No
6	Staff and voluntee	r hours devoted to monitoring, inspecting,			
7	Amount of expense	es incurred in monitoring, inspecting, hanc	lling of violations, and en	forcing conservation eas	sements during the year
8		vation easement reported on line 2d above			
-		)(4)(B)(ii)?			
9		be how the organization reports conservation		-	
		d include, if applicable, the text of the footr ounting for conservation easements.	note to the organization's	s financial statements that	at describes the
Pa	t III Organiza	ations Maintaining Collections of	Art, Historical Tre	asures, or Other S	imilar Assets.
		f the organization answered "Yes" on Form		·	
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its rev	enue statement and bala	ance sheet works
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, education	, or research in furtherar	nce of public
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that des	cribes these items.	
b		elected, as permitted under FASB ASC 95			
		sures, or other similar assets held for public	exhibition, education, o	r research in furtherance	e of public service,
		ing amounts relating to these items.			<b>^</b>
		ded on Form 990, Part VIII, line 1			
2		ed in Form 990, Part X received or held works of art, historical tre			
2	•	unts required to be reported under FASB A		• •	Si Ovide
а	•	on Form 990, Part VIII, line 1	U U		\$
		Form 990, Part X			
		eduction Act Notice, see the Instructions			Schedule D (Form 990) 2023
33205	09-28-23				
			26		

Sche	dule D (Form 990) 2023 ATTIC A	NGEL PLACE,	IN	с.				191966		Page <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Hist	orical Tre	easures, o	r Other	Similar Ase	sets <sub>(cont</sub>	inued)	
3	Using the organization's acquisition, accession	on, and other records	s, checl	k any of the f	following that	t make sig	nificant use of	its		
	collection items (check all that apply).									
а	Public exhibition	d		Loan or exc	hange progra	am				
b	Scholarly research	е		Other						
с	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5	During the year, did the organization solicit o	r receive donations o	f art, hi	storical treas	sures, or othe	er similar a	assets			
	to be sold to raise funds rather than to be ma	aintained as part of th	ie orga	nization's co	llection?			Yes		No
Par	t IV Escrow and Custodial Arrang	gements Complet	e if the	organizatior	n answered "	Yes" on F	orm 990, Part	IV, line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	an, or other intermed	iary for	contributior	ns or other as	sets not i	ncluded			
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII									
								Amour	nt	
с	Beginning balance						1c			
d	Additions during the year									
е	Distributions during the year									
f	Ending balance						1f			
2a	Did the organization include an amount on Fe						y?	Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	olanatio	on has been	provided in F	Part XIII				
Par	t V Endowment Funds Complete if	the organization ans	wered	"Yes" on For	rm 990, Part	IV, line 10				
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back (	( <b>d)</b> Three years b	back (e) Fou	ur years	s back
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
d	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	ent year end balance	(line 1	g, column (a	)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiza	tion tha	at are held ar	nd administer	red for the	9			
	organization by:								Yes	No
	(i) Unrelated organizations?							3a(i)		
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on S	Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		vment	funds.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 990	, Part I\	V, line 11a. S	See Form 990	), Part X, I	ine 10.	1		
	Description of property	(a) Cost or of		• • •	or other		cumulated	(d) Boo	ok valı	le
		basis (investm	ient)		(other)	dep	reciation		4	
1a	Land				1,337.			1,41		
b	Buildings			39,47	0,030.	22,4	65,525.	17,00	4,5	05.
С	Leasehold improvements							_ =	-	
d	Equipment				6,423.	3,4	47,397.			26.
	Other				6,622.					22.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part >	K. line 1	0c, column	<u>(B))</u>			19,06	-	
							Sche	dule D (For	m 990	) 2023

332052 09-28-23

# Schedule D (Form 990) 2023 ATTIC ANGEL PLACE, INC.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(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" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

## Part IX Other Assets

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	
Part X Other Liabilities	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See	e Form 990, Part X, line 25.
(a) Description of liability	(b) Book value

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RESERVATION FEES AND REFUNDABLE	
(3) DEPOSITS	187,500.
(4) OPERATING LEASES	7,036.
(5) FINANCING LEASES	44,949.
(6) WAIT LIST DEPOSIT	362,000.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	601,485.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

332053 09-28-23

Sche	dule D (Form 990) 2023 ATTIC ANGEL PLACE, INC.		39-1919667 <sub>Page</sub> 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Reven	ue per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	. 2b	
С	Recoveries of prior year grants	. 2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
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
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	•	nses per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	. 2a	
b	Prior year adjustments	_ <b>2</b> b	
с	Other losses	2c	
d	Other (Describe in Part XIII.)	. 2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
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	. 4a	
b	Other (Describe in Part XIII.)	. 4b	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
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.

332054 09-28-23

DocuSign Envelope ID: 5033814E-23E9-443D-BDF5-83EE3C10B1FE

SC	HEDULE J	Compensation Information		OMB No. 1	545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	<b>7</b> 7	)
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	ĽIJ	)
Depar	tment of the Treasury	Attach to Form 990.		Open to		
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nam	e of the organization			identificatio		mber
		ATTIC ANGEL PLACE, INC.	39-	191966	7	
Ра	rt I Question	s Regarding Compensation				T
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c					
	Travel for com	panions Payments for business use of personal re ation and gross-up payments I Health or social club dues or initiation fee				
		spending account Personal services (such as maid, chauffer	ur, chei)			
h	If any of the boyce	on line 1a are checked, did the organization follow a written policy regarding payment or				
D		rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
-	•	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if ar	y, of the following the organization used to establish the compensation of the organization's				
		ctor. Check all that apply. Do not check any boxes for methods used by a related organizati				
		ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
	·	ompensation consultant Compensation survey or study				
	·	her organizations Approval by the board or compensation of	ommittee			
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	ated organization:				
а	Receive a severanc	e payment or change-of-control payment?		4a		X
		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	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
_		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	-	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	on			
	contingent on the re			_		v
						X
b		ation?		<u>5b</u>		X
~		r 5b, describe in Part III.				
6	•	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation of a complexity of the section o	n			
-	contingent on the n	•		6-		x
		ntion?				X
U		ation? r 6b, describe in Part III.		<u>6b</u>		
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
'		es 5 and 6? If "Yes," describe in Part III		7		x
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				<u> </u>
5	•			8		x
9		d the organization also follow the rebuttable presumption procedure described in				
5	Regulations section			9		
<b>F</b> ar		on Act Notice, see the Instructions for Form 990.		dule J (Forn	n 990)	) 2023

LHA 332111 11-06-23

# Schedule J (Form 990) 2023 ATTIC ANGEL PLACE, INC.

#### 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.

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.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 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)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MICHELLE GODFREY	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	200,554.	5,000.	0.	6,167.	2,246.	213,967.	0.
(2) DEREK BUCKLEY	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	149,365.	0.	0.	6,721.	4,048.	160,134.	0.
(3) KIMBERLY BLUM	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	123,654.	0.	0.	5,564.	28,787.	158,005.	0.
	(i)							
	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
	ii)							
	(i)							
(	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
(	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
(	ii)							

Schedule J (Form 990) 2023

Page **2** 

39-1919667

#### Schedule J (Form 990) 2023 ATTIC ANGEL PLACE, INC.

#### Part III Supplemental Information

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 3:

ATTIC ANGEL ASSOCIATION IS THE EMPLOYER OF ALL THE EMPLOYEES OF ATTIC ANGEL

ASSOCIATION AND ATTIC ANGEL PLACE. THERE IS AN HR COMMITTEE THAT REPORTS

TO THE BOARD OF DIRECTORS. THE CEO/PRESIDENT'S JOB DESCRIPTION IS REVIEWED

ANNUALLY BY THE HR COMMITTEE AND SALARY RECOMMENDATIONS ARE MADE TO THE

BOARD FOR APPROVAL AND IMPLEMENTED BY THE PAYROLL AREA.

THE HR DIRECTOR AND THE HR DIRECTOR'S TEAM REVIEW MARKET DATA THROUGH

SALARY SURVEYS AND ONLINE MARKET COMPENSATION TOOLS. ANY RECOMMENDATIONS

ARE DOCUMENTED IN THE MINUTES OF THE HR COMMITTEE AND ANY RECOMMENDATIONS

APPROVED BY THE BOARD ARE APPROVED IN THE MINUTES OF THE BOARD MEETING.

SCHED (Form 9 Departmen Internal Re	990) Co	mplete if the organ	explanations, and	"Yes" on Form 990 any additional info	0, Part IV, I prmation in	ine 24a. F Part VI.	Provide descriptio				C	20	1545-00 )23 o Publ tion	
Name o	f the organization		_								identif		n num	ber
	ATTIC ANGEL			. (.)					3	9-1	919	667		
Part I		E PART VI			INUATI				1					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	le price	(f) Description	n of purpose	(g) De	efeased	(h) On of is:		(i) Po	
													finan	<u> </u>
	SCONSIN HEALTH AND						REFINANCE		Yes	No	Yes	No	Yes	No
	DUCATIONAL FACILITIES A	30-1337855	NONE	12/28/17	1782	4500.		SERIES		x		х		х
	OCATIONAL FACILITIES A	55 1557055	NONE	12/20/1/	1/02	<u>+300.</u>						<u></u>		
в														
с														
D														
Part II	Proceeds													
				Α			В	С				D		
<b>1</b> A	mount of bonds retired				1,522.									
<b>2</b> A	mount of bonds legally defeased													
	otal proceeds of issue			. 17,824	1,500.		S							
<b>4</b> G	ross proceeds in reserve funds													
<b>5</b> C	apitalized interest from proceeds													
<u>6</u> P	roceeds in refunding escrows													
<b>7</b> Is	suance costs from proceeds			175	5,000.									
-	redit enhancement from proceeds													
	lorking capital expenditures from proceeds													
	apital expenditures from proceeds													
	ther spent proceeds													
					000									
<u>13</u> Y	ear of substantial completion			Yes	No	Yes	No	Yes	No		Yes		No	
14 W	/ere the bonds issued as part of a refunding i	ssue of tax-exempt h	oonds (or	162	INU	105		103	NU		162		NU	
	issued prior to 2018, a current refunding issued	•		x										
	/ere the bonds issued as part of a refunding issued as part of a refunding is													
	sued prior to 2018, an advance refunding iss				х									
	las the final allocation of proceeds been made	-		37										
	oes the organization maintain adequate book													
	L - II			X										

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

Schedule K (Form 990) 2023

# Schedule K (Form 990) 2023 ATTIC ANGEL PLACE, INC. 39–1919667

Part III Private Business Use				<u> </u>		<u> </u>		
	<i>I</i>		-	3		<b>)</b>		
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No X	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		<u>A</u>						
2 Are there any lease arrangements that may result in private business use of	v							
bond-financed property?	X							
<b>3a</b> Are there any management or service contracts that may result in private		v						
business use of bond-financed property?		Х						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of								
bond-financed property?		X						-
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities								
other than a section 501(c)(3) organization or a state or local government		%		%		%		
5 Enter the percentage of financed property used in a private business use as a								
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		
6 Total of lines 4 and 5		%		%		%		
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		Х						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
disposed of		%		%		%		
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all								
nonqualified bonds of the issue are remediated in accordance with the								
requirements under Regulations sections 1.141-12 and 1.145-2?	Х							
Part IV Arbitrage								
	ŀ		I	3	(		[	D
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		Х						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	Х							
b Exception to rebate?		Х						
c No rebate due?		Х						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?		Х						

Page 2

Schedule K (Form 990) 2023 ATTIC ANGEL PLACE, INC.			39-2	1919667	1			Page <b>3</b>
Part IV Arbitrage (continued)		A		3		c		)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
<b>b</b> Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
<b>b</b> Name of provider								
c Term of GIC								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	x							
Part V Procedures To Undertake Corrective Action	•			•	•			
		A		3		C	C	)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	X							
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instru	ictions.		•			
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME:								
WISCONSIN HEALTH AND EDUCATIONAL FACILITIES AUTHO	RITY -	2017						

DocuSign Envelope ID: 5033814E-23E9-443D-BDF5-83EE3C10B1FE

SCHEDULE O S	Supplemental Information to Form 990 or 9 Complete to provide information for responses to specific questions	
Department of the Treasury Internal Revenue Service	Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.	Open to Public Inspection
Name of the organization	ATTIC ANGEL PLACE, INC.	Employer identification number 39-1919667
FORM 990, PART I	II, LINE 4D, OTHER PROGRAM SERVICES:	
ATTIC ANGEL COMM	JNITY - HEALTH CENTER - 44 BED CBRF SERV	'ES RESIDENTS
WITH BOTH LONG-TI	ERM CARE AND SHORT-TERM REHABILITATION S	ERVICES.
EXPENSES \$ 4,625	,876. INCLUDING GRANTS OF \$ 0. REVEN	WE \$ 4,646,394.
FORM 990, PART VI	I, SECTION A, LINE 1A:	
THE EXECUTIVE CON	MMITTEE SHALL CONSIST OF THE OFFICERS OF	THE AAP BOARD OF
DIRECTORS. THE CH	HAIR OF THE BOARD SHALL SERVE AS CHAIR O	F THE COMMITTEE.
THE EXECUTIVE CON	MMITTEE, EXCEPT TO THE EXTENT THAT ITS A	UTHORITY MAY BE
LIMITED BY RESOLU	JTION ADOPTED BY AN AFFIRMATIVE VOTE OF	A MAJORITY OF THE
BOARD, SHALL HAVI	E POWER TO TRANSACT ALL REGULAR BUSINESS	OF AAP DURING THE
INTERIM BETWEEN N	MEETINGS OF THE AAP BOARD OF DIRECTORS.	THE EXECUTIVE
COMMITTEE SHALL 1	NOT HAVE THE POWER TO ELECT OFFICERS OF	THE BOARD OR FILL
VACANCIES IN THE	AAP BOARD OF DIRECTORS OR IN THE EXECUT	IVE COMMITTEE.
FORM 990, PART V	I, SECTION A, LINE 6:	
THE CORPORATION I	HAS A SINGLE CLASS OF MEMBERS, AND THE S	OLE MEMBER OF THAT
CLASS IS ATTIC AN	NGEL ASSOCIATION, EIN 39-0854841.	
		_

FORM 990, PART VI, SECTION A, LINE 7A:

THE MEMBER'S VOLUNTEER/NOMINATING COMMITTEE MAKES RECOMMENDATIONS FOR BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE DRAFT 990 IS PROVIDED TO ALL BOARD MEMBERS PRIOR TO

 FINALIZING AND SUBMITTING TO THE IRS. MEMBERS ARE ENCOURAGED TO REVIEW AND

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2023

 LHA
 332211 11-14-23

36

Doc

Schedule O (Form 990) 2023	Page 2
Name of the organization ATTIC ANGEL PLACE, INC.	Employer identification number 39-1919667
PROVIDE FEEDBACK.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ALL BOARD OF DIRECTOR MEMBERS ARE REQUIRED TO READ AN	ID SIGN ANNUAL CONFLICT
OF INTEREST. IT IS ALSO PART OF EMPLOYEE HANDBOOK AND	EMPLOYEES ARE
REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICTS. PUBLIC	AUDITORS, AS PART OF
THE ANNUAL AUDIT, REVIEW TRANSACTIONS FOR ANY EVIDENC	CE OF CONFLICTS OF
INTEREST.	
FORM 990, PART VI, SECTION C, LINE 18:	
PREVIOUSLY FILED FEDERAL RETURNS ARE AVAILABLE UPON R	EQUEST. CURRENT YEAR
RETURNS ARE AVAILABLE ON THE ATTIC ANGEL'S PUBLIC WEE	SITE
FORM 990, PART VI, SECTION C, LINE 19:	3 <u>S</u>
ATTIC ANGEL PLACE'S FINANCIAL STATEMENTS AND TAX RETU	IRNS ARE AVAILABLE UPON
REQUEST AT 8301 OLD SAUK ROAD, MIDDLETON, WI 53562.	

332212 11-14-23

SCHEDULE R (Form 990) Completion Department of the Treasury Internal Revenue Service Name of the organization	Related Organizations ete if the organization answered "Yo Attac Go to www.irs.gov/Form990 for	es" on Form 990, Part IV, lir h to Form 990.	ne 33, 34, 35b, 36	, or 37.		MB No. 1545 <b>202</b> Ppen to P Inspecti cation nu	3 ublic ion
ATTIC ANGEL PI	ACE, INC.				39-19190	567	
Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes"	on Form 990, Part IV, line 33	3.				
<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state c foreign country)	or (d) Total inco	me End-of-year	assets Direct of	<b>(f)</b> controlling ntity	g
	-						
	In Pr		<b>\$\$</b>				
Part IIIdentification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990	J, Part IV, line 34, t	because it had one	or more related tax-exe	mpt	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled tity? <b>No</b>
ATTIC ANGEL ASSOCIATION - 39-0854841 640 JUNCTION ROAD MADISON, WI 53717	OPERATION OF HEALTH CENTER/FUNDRAISE/VOLUNTEER TRAINING & SUPPORT	WISCONSIN	501(C)(3)	LINE 10	N/A		x
ATTIC ANGEL PRAIRIE POINT, INC 39-1978106 640 JUNCTION ROAD MADISON, WI 53717	CONTINUE CARE RETIREMENT COMMUNITY	WISCONSIN	501(C)(3)		ATTIC ANGEL ASSOCIATION		x
RIVERSONG, INC. 640 JUNCTION ROAD MADISON, WI 53717	SENIOR RESIDENT HOUSING SERVICES	WISCONSIN	501(C)(3)		ATTIC ANGEL ASSOCIATION		x

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

Schedule R (Form 990) 2023

# Schedule R (Form 990) 2023 ATTIC ANGEL PLACE, INC.

39-1919667 Page 2

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.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	l) (ł	n)	(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	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	amount in box	partner	Percentag ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
	-										
	-										
	-										
	-										

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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512(I contr ent	i) b)(13) rolled tity?
		country)		5. 1. 000				Yes	No
									<u> </u>
									<u> </u>
	]								

# Schedule R (Form 990) 2023 ATTIC ANGEL PLACE, INC.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b		X
	Gift, grant, or capital contribution from related organization(s)	1c	X	
	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e	X	
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
I.	Performance of services or membership or fundraising solicitations for related organization(s)	11	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
	Sharing of paid employees with related organization(s)	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p		X
	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
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)			
<u>(2)</u>			
(3)			
<u>(4)</u>			
<u>(5)</u>			
(6)			

# Schedule R (Form 990) 2023 ATTIC ANGEL PLACE, INC.

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) Name, address, and EIN	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile	(d) Predominant income	(e) Are all	(f) ec. Share of	<b>(g)</b> Share of	<b>(h)</b> Dispropor- tionate	(i) Code V-UBI	(j) General o	(k)
of entity		(state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners s 501(c)(3 orgs.?	) total	end-of-year assets	tionate allocations Yes No	of Schedule K-1	managing partner? Yes NO	ownership
			, , , , , , , , , , , , , , , , , , ,							
	- T-		bro		000					

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 Part VII Supplementa Dravido additiona		aa ta quaatiana an C	chadula D. Cas instructions	
Provide additiona	a information for respons	es to questions on 5	chedule R. See instructions.	
	T		0000	
32165 09-28-23		-		Schedule R (Form 990) 202
			42	• • • • • • • • • • • • • • • • • • •