# EXTENDED TO NOVEMBER 15, 2022

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

~ ·	OI LIN	2021 Calendar year, or tax year beginning	enung						
<b>В</b> с	heck if oplicabl	C Name of organization		D Employer identifi	cation number				
	Addre	THE RED BARN							
	Name chang	Doing business as		**-***31	91				
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address) 2700 BAILEY ROAD	Room/suite	E Telephone number 205-699-8204					
	اreturn. termin ated			G Gross receipts \$ 1,067,707.					
	∖Amen	, , , , , , , , , , , , , , , , , , , ,		H(a) Is this a group re					
	_return _Applic _tion			for subordinates					
	pendir	2700 BAILEY ROAD SW, LEEDS, AL 35094		H(b) Are all subordinates in					
ıт	24-64	empt status: $X = 501(c)(3) = 501(c)(1)$ (insert no.) $4947(a)(1)$	or 527	<b>1</b> ' '	list. See instructions				
		te: THEREDBARN.ORG	01 021	H(c) Group exemption					
		organization: X Corporation	I Year		M State of legal domicile; AL				
	rt I	Summary	L 1001	or formation: = v = = [1	VI Ciato or logar dominono;===				
		Briefly describe the organization's mission or most significant activities: TO P.	ROVIDE	AND PROMOT	E EOUINE				
ဥ		ASSISTED ACTIVITIES TO INDIVIDUALS, ESPEC							
nar		Check this box  if the organization discontinued its operations or dispose							
Š	3			3	3				
ၓ	4	Number of independent voting members of the governing body (Part VI, line 1b)			2				
ο V		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			20				
ij		Total number of volunteers (estimate if necessary)			86				
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
^		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.				
				Prior Year	Current Year				
اه	8	Contributions and grants (Part VIII, line 1h)		918,645.	999,422.				
Revenue	9	Program service revenue (Part VIII, line 2g)		15,361.	46,851.				
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4.	-2,566.				
۳	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		35,274.	21,468.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		969,284.	1,065,175.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
န္မ		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		540,094.	583,524.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		32,500.	39,450.				
ă		Total fundraising expenses (Part IX, column (D), line 25)   82,1		252 222	200 545				
"ا		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		359,208.	389,745.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		931,802.	1,012,719.				
	19	Revenue less expenses. Subtract line 18 from line 12		37,482.	52,456.				
Net Assets or Fund Balances		T. I. I. (D. I.V.); 12)	Be	eginning of Current Year	End of Year 382,766.				
Ssel	20	Total assets (Part X, line 16)		325,018. 161,566.	166,858.				
E A	21	Total liabilities (Part X, line 26)		163,452.	215,908.				
Z <sub>□</sub>	rt II	Net assets or fund balances. Subtract line 21 from line 20		103,432.	213,300.				
		Ities of perjury, I declare that I have examined this return, including accompanying schedule:	e and etatem	ante and to the heet of my	/ knowledge and helief it is				
		et, and complete. Declaration of preparer (other than officer) is based on all information of wh			y kilowicago alia bolici, it is				
uu,	COLLEC		non proparoi	nas any knowicage.					
Sigr	,	Signature of officer		Date					
Here		JOY O'NEAL, PRESIDENT							
	-	Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Paid		DAVID COMPHER DAVID COMPHER	la	07/07/22 if self-employ	P00369019				
	arer	Firm's name CARR, RIGGS & INGRAM, LLC		Firm's EIN ▶	**-***6621				
-	Only	Firm's address 3700 COLONNADE PARKWAY, SUITE 30	0 0	o Lin					
	•	BIRMINGHAM, AL 35243		Phone no. 20	5.933.7822				
May	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No				

Form	1 990 (2021) THE RED BARN	**-***3191	Page 2
	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		···· <u></u>
•	THE MISSION OF THE RED BARN IS TO PROMOTE AND PROVIDE EQU	TIME ASSISTE	₹D
	SERVICES TO LOW-INCOME INDIVIDUALS WITH DISABILITIES AND		
	CIRCUMSTANCES.	DIECIAL	
	CIRCOMSTANCES.		
_			
2	Did the organization undertake any significant program services during the year which were not listed on the		<b>v</b> .
	prior Form 990 or 990-EZ?	Yes	s X No
	If "Yes," describe these new services on Schedule O.	<b>A</b> —	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	neasured by expenses	•
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expenses, a	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$	ue\$ <b>46</b> ,	,851.
	THE RED BARN, INC. IS A NON-PROFIT ORGANIZATION INCORPORA	ATED UNDER T	'HE
	LAWS OF ALABAMA FOR THE PURPOSE OF PROMOTING AND SUPPORT	ING	
	EQUINE-ASSISTED ACTIVITIES TO LOW INCOME INDIVIDUALS OF A	ALL ABILITIF	IS
	AND CIRCUMSTANCES, ESPECIALLY CHILDREN. THE ORGANIZATION	PROVIDES	
	WEEKLY RIDING LESSONS FOR CHILDREN WITH PHYSICAL, COGNIT	IVE, OR	
	EMOTIONAL DISABILITIES AND SPECIAL CIRCUMSTANCES, SUCH AS		Œ.
	ADOPTION, SOCIAL DELAYS, AND GRIEF AS WELL AS OCCUPATIONA		
	USING HORSES. THE ORGANIZATION ALSO HOSTS TRADITIONAL DA		
	CHILDREN AND VETERANS AND HOSTS TRAINING SESSIONS FOR THO		
	INTERESTED IN IMPROVING HORSEMANSHIP SKILLS, BECOMING AN		OR
	FORMING AN AGENCY. THE ORGANIZATION IS FUNDED BY A COMBIN		
	CORPORATE AND INDIVIDUAL GRANTS AND DONATIONS, FUNDRAISING		ND -
4b	(Code:) (Expenses \$ including grants of \$) (Revenue)	ue\$	)
4c	(Code:) (Expenses \$) (Revenue)	ue \$	)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	١	
4e	001 000		
10	rotal program control expenses p		200

11220707 794202 55-03160.000

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# Form 990 (2021) THE RED BARN Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<del></del>
0				x
•	Schedule D, Part III	8		
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?			\ <b>.</b> ,
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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
С	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		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
192	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
b		405		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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			\ <sub>3,7</sub>
	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		<u> X</u>
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		<u> </u>
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	Х	
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	Х	L_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	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			
-1		21		x
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II		000	

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Form **990** (2021)

Form	n 990 (2021) THE RED BARN **-***  rt IV   Checklist of Required Schedules <sub>(continued)</sub>	3191	P	age 4
Га	Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	INO
	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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		L
25a	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			
	Schedule L, Part I	25b	-	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%			37
	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,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
00	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	28a		x
h	"Yes," complete Schedule L, Part IV			X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 200		
C	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash 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	. 23		
00	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			х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		ſ	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	. 38	X	
Pal	rt 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>	 T	
		1	Yes	No
1a		.1		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

Form 990 (2021) THE RED BARN

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) \*\*-\*\*\*3191 Page 5

	o d d d d d d d d d d d d d d d d d d d									
			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  20									
	, , , , , , , , , , , , , , , , , , , ,	01	v							
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X							
0-	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	0-		Х						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a								
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4-		X						
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a								
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
<b>5</b> 0		5a		х						
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
C										
6a										
ou		6a		x						
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ou								
-	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).	0.0								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х						
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 required									
	to file Form 8282?	7c		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?									
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
a	Gross income from members or shareholders  Cross income from other courses. (Do not not amount due or poid to other courses against									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)									
12a	amounts due or received from them.)  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									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	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									
	organization is licensed to issue qualified health plans									
С	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			_						
	excess parachute payment(s) during the year?	15		X						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any									
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes " complete Form 6069									

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

	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	3		
	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	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	Х	
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
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		Х
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	Each committee with authority to act on behalf of the governing body?	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		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This doctor) Divides and April and		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	, 23		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure		•	
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s onlv)	availal	ole
-	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finan	cial	
	statements available to the public during the tax year.		- 101	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_0	JOY O'NEAL - 205-699-8204			
	2700 BAILEY RD SW, LEEDS, AL 35094			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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, 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 organizat	ion nor any related	orga	ıniza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more to box, unless person is officer and a director			nore than one son is both an		Reportable	Reportable	Estimated
	hours per	box						compensation	compensation	amount of
	week	-			recio	rector/trustee)		from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	nstee	trust		96	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ualtr	tional		yoldr	t con	_	1099-1420)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) ALEXIS BRASWELL	40.00	<del>  -</del>	╀┈		Ť	1 0				
VICE PRESIDENT & SECRETARY				х				52,553.	0.	0.
(2) JOY O'NEAL	50.00							·		
PRESIDENT				Х				0.	0.	0.
(3) EMMET O'NEAL	10.00									
TREASURER			L	X				0.	0.	0.
		١,								
		14								
			М							
			_							
		-								
			$\vdash$							
		1								
			_	_	_	_				000

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

ı aı	Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)			
	(A) (B)		(C) Position						(D)	(E)		(F)	
	Name and title	Average hours per		not c	heck i	more	than o		Reportable compensation	Reportable	1	stimate	
		week					s both or/trus		from	compensation from related	ª	mount other	Oi
		(list any	ector						the	organizations	con	npensa	tion
		hours for related	or dir	96			ated		organization	(W-2/1099-MISC/		rom th	
		organizations	rustee	l truste		99	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	1 '	ganizat nd relat	
		below	Individual trustee or director	Institutional trustee	<u></u>	Key employee	st cor	e.	100011120)			anizati	
		line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former					
										5			
											+		
											+-		
			_								+		
						X							
	Subtotal								52,553.	0.			0.
	Total from continuation sheets to Part VI			-					0.	0.			0.
	Total (add lines 1b and 1c)							<u> </u>	52,553.		•		0.
2	Total number of individuals (including but n compensation from the organization	ot ilmited to th	ose	liste	o ac	ove	) wn	o re	eceived more than \$100,	ooo of reportable			0
	compensation from the organization		7		$\sigma$	7						Yes	No
3	Did the organization list any <b>former</b> officer,	director, trust	ee, k	еу е	empl	oye	e, or	hig	hest compensated emp	oyee on			
	line 1a? If "Yes," complete Schedule J for s	uch individual									3		Х
4	For any individual listed on line 1a, is the su												
	and related organizations greater than \$150			•							4		X
5	Did any person listed on line 1a receive or a		_								_		v
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	plete Schedule	<u> </u>	or su	ıch r	oers	on .				5		Х
1	Complete this table for your five highest co	mpensated inc	lene	nder	nt co	ontra	actor	rs th	nat received more than \$	100,000 of compens	ation fr	om	
	the organization. Report compensation for												
	(A) Name and business	addross	BT/	\ <b>\</b> TT	-				<b>(B)</b> Description of s	orvicos	() Compe	C)	n
	Name and business	addicas	INC	ONE	<u>.</u>				Description of s	CIVICCS	Compa	ZHSatio	···
								$\dashv$					
								$\downarrow$					
2	Total number of independent contractors (in \$100,000 of compensation from the organic		ot lin	nited	d to t	thos		ted	above) who received mo	ore than			
	The state of the s										Form	<b>990</b> (	2021)

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Form 990 (2021) THE RED
Part VIII Statement of Revenue

			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			<u> </u>	,	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
						iunction revenue	business revenue	sections 512 - 514
S S	1	a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
يَ ق			Fundraising events 1c					
ifts			Related organizations 1d					
nila			Government grants (contributions) 1e	101,100.				
Sir			All other contributions, gifts, grants, and	,				
uti		•	similar amounts not included above 1f	898,322.				
Q ţ		a	Noncash contributions included in lines 1a-1f 1g \$	,				
Sol		_	Total. Add lines 1a-1f	<b>•</b>	999,422.			
<u> </u>			Totali / log iii log i a i i	Business Code				
o l	2	а	PROGRAM SERVICE FEES	324100	46,851.	46,851.	7	
Š		b				/		
Ser		c						
ım (		d						
gra Re		_						
Program Service Revenue		f	All other program service revenue					
			Total. Add lines 2a-2f		46,851.			
	3	3	Investment income (including dividends, interest		20,00			
	•		other similar amounts)		-2,566.			-2,566.
	4		Income from investment of tax-exempt bond p					,
	5		Royalties					
	•		(i) Real	(ii) Personal				
	6	а	Gross rents 6a	,				
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
			Gross amount from sales of (i) Securities	(ii) Other				
		_	assets other than inventory 7a					
		b	Less: cost or other basis					
ē			and sales expenses 7b					
enr		С	Gain or (loss) 7c		1			
Şe		d	Net gain or (loss)					
her Revenue			Gross income from fundraising events (not					
퉏			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	24,000.				
		b	Less: direct expenses	2,532.				
			Net income or (loss) from fundraising events		21,468.			21,468.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19					
		b	Less: direct expenses 9b	,				
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10	a				
		b	Less: cost of goods sold 10	o				
		С	Net income or (loss) from sales of inventory .	<b>&gt;</b>				
				Business Code				
on a	11	а						
Miscellaneous Revenue		b						
Sell		С						
Ais		d	All other revenue					
		е	Total. Add lines 11a-11d			4.5		46.55
	12		Total revenue. See instructions		1,065,175.	46,851.	0.	18,902.

## Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 403,862. 335,205. 56,541. 12,116. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 48,467. 58,394. 8,175. 1,752. Other employee benefits 9 121,268. 100,652. 16,978. 3,638. 10 Payroll taxes Fees for services (nonemployees): Management 426. 426. Legal 10,471. 10,471. Accounting Lobbying 39,450. 39,450. Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 3,992. 1,240.1,512. 1,240. Advertising and promotion 12 50,550. 40,088. 7,796. Office expenses 13 Information technology ..... 14 15 Royalties 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 1,500. 1,500. Depreciation, depletion, and amortization 22 36,288. 32,760. 3,528. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 100,175. 100,175. HORSE CARE REPAIR AND MAINTENANCE 84,658. 84,658. 29,129. 14,199. 14,199. POSTAGE AND PRINTING 731. 11,300. CONTRACT LABOR 11,300. 61,256. 43,980. 10,160. 7,116. All other expenses 1,012,719. 801,028. 129,514. 82,177. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

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# Form 990 (2021) Part X | Balance Sheet

<u>Par</u>	t X	Balance Sheet					
		Check if Schedule O contains a response or no	ote to an	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			206,831.	1	172,511
	2	Savings and temporary cash investments			104,887.	2	201,212
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current	officer, director,				
		trustee, key employee, creator or founder, sub	stantial o	ontributor, or 35%		A	
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe	tion 4958(c)(3)(B)		6		
ış	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			8		
⋖	9				9,151.	9	8,996
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		80,000.	1 500		
	b	Less: accumulated depreciation		80,000.	1,500.	10c	0
	11	Investments - publicly traded securities		0.640	11	4.5	
	12	Investments - other securities. See Part IV, line		2,649.	12	47	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			225 010	15	202 766
	16	Total assets. Add lines 1 through 15 (must eq			325,018.	16	382,766
	17	Accounts payable and accrued expenses			11,566.	17	16,858
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to any current or for					
<u> </u>		trustee, key employee, creator or founder, sub				00	
<u>a</u>	00	controlled entity or family member of any of the				22	
	23 24	Secured mortgages and notes payable to unre Unsecured notes and loans payable to unrelate				24	
	2 <del>4</del> 25	Other liabilities (including federal income tax, p				24	
	25	parties, and other liabilities not included on line					
		of Schedule D			150,000.	25	150,000
	26	Total liabilities. Add lines 17 through 25			161,566.	26	166,858
		Organizations that follow FASB ASC 958, ch					
es		and complete lines 27, 28, 32, and 33.		, —			
auc	27	Net assets without donor restrictions			163,452.	27	215,908
Rai	28	Net assets with donor restrictions				28	
힏		Organizations that do not follow FASB ASC					
교		and complete lines 29 through 33.					
ğ	29	Capital stock or trust principal, or current fund	s			29	
Set	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			163,452.	32	215,908
_	33	Total liabilities and net assets/fund balances			325,018.	33	382,766

Form **990** (2021)

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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		<u>1,06</u>					
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,01					
3	Revenue less expenses. Subtract line 2 from line 1			2, <u>4</u> 3,4					
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4								
5	Net unrealized gains (losses) on investments	5							
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	5,9	08.			
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>			Ш			
					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				Х				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a							
	separate basis, consolidated basis, or both:								
	Separate basis X Consolidated basis Both consolidated and separate basis								
b	b Were the organization's financial statements audited by an independent accountant?								
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,							
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the								
	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 School	edule (	).						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	•							
	Act and OMB Circular A-133?			3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b	200				
				Form	990	(2021)			

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

**Employer identification number** Name of the organization \*\*-\*\*\*3191 THE RED BARN Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

# Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	71	1	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and		• •				
	membership fees received. (Do not						
	include any "unusual grants.")	501,261.	597,960.	848,706.	918,645.	999,422.	3865994.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to					A	
	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	501,261.	597,960.	848,706.	918,645.	999,422.	3865994.
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,						400==44
	column (f)						1825544.
	Public support. Subtract line 5 from line 4.						2040450.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017 501, 261.	(b) 2018 597,960.	(c) 2019	(d) 2020 918,645.	(e) 2021	(f) Total 3865994.
	Amounts from line 4	501,201.	597,960.	848,706.	910,045.	999,422.	3865994.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain	4					
	or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						3865994.
	Gross receipts from related activities,	etc (see instruction	ine)			12	416,917.
	<b>First 5 years.</b> If the Form 990 is for th			fourth or fifth tax v	ear as a section 5		
	organization, check this box and stop					( )( )	
Sec	ction C. Computation of Publi						<u>,                                     </u>
	Public support percentage for 2021 (li			column (f))		14	52.78 %
	Public support percentage from 2020					15	50.30 %
	33 1/3% support test - 2021. If the o					ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				<b>▶</b> X
b	33 1/3% support test - 2020. If the o						
	and stop here. The organization quali	ifies as a publicly s	upported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		<b>&gt;</b>
b	10% -facts-and-circumstances test	- <b>2020.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, ched	ck this box and st	op here. Explain in	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	▶∐
18	Private foundation. If the organizatio	n did not check a	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	·

Schedule A (Form 990) 2021

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	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						_
J	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
7 6	3 received from disqualified persons						
ı	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
108	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,	4					
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,		,				
	whether or not the business is						
	regularly carried on						
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 for th	ne organization's fir	rst, second, third, t	ourth, or fifth tax y	ear as a section 5	01(c)(3) organizatio	on,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	ivided by line 13, c	olumn (f))		15	%
	Public support percentage from 2020					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	<b>)21</b> (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2021. If the						
-	more than 33 1/3%, check this box ar						ightharpoonup
ŀ	33 1/3% support tests - 2020. If the						nd
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						<b>&gt;</b>

# Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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.
- 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")? "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?
- 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).
- 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.)

	Yes	No
1		
•		
2		
0-		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b ile A (Forr	- 000	0004
ue a (Forr	11 990)	ZU27

Par	Tiv Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization?		
	A family member of a person described on line 11a above?		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
0	detail in Part VI.		
Sec	tion B. Type I Supporting Organizations		т —
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
Sec	supervised, or controlled the supporting organization. 2 tion C. Type II Supporting Organizations		
<u> </u>	tion 6. Type it supporting organizations		T
		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
Sec	the supported organization(s). 1 tion D. All Type III Supporting Organizations		
	tion 217th Type in Supporting Significations	Voc	I No
4	Did the examination provide to each of its supported examinations, by the leat day of the fifth month of the	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
2	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's supported organizations have a		
Ū	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		
Sec	tion 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).		
а	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.		
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction	ons)	
2	Activities Test. Answer lines 2a and 2b below.	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined		
	that these activities constituted substantially all of its activities.		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in		
	these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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Schedule A (Form 990) 2021

THE RED BARN

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	J		
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations must co		·			
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		*		
Sect	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):					
a	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
c	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
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				
Sect	ion C - Distributable Amount			Current Year		
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
_2	Enter 0.85 of line 1.	2				
_3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
_4	Enter greater of line 2 or line 3.	4				
_5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functionally	integra	ited Type III supporting orga	nization (see		

Schedule A (Form 990) 2021

instructions).

Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continued)	
Secti	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes	1	
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of supported		
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required -	provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Secti	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
	From 2017			
	From 2018			
	From 2019			
	From 2020			
	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
<u> </u>	Carryover from 2016 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
_	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.  Remaining underdistributions for years prior to 2021, if			
3				
	any. Subtract lines 3g and 4a from line 2. For result greate than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
Ü	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
•	and 4c.			
8				
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			

Schedule A (Form 990) 2021

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

THE RED BARN

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Organization type (check of	ne):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 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; line 1. Complete Parts I and II.
contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, anal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
year, contributions is checked, enter h purpose. Don't con	edescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., explete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively explored, etc., contributions totaling \$5,000 or more during the year \( \bigcirc \) \$
answer "No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 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 a requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page **2** 

Name of organization Employer identification number

THE RED BARN \*\*-\*\*\*3191

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	TUM TUM TREE FOUNDATION  P.O. BOX 43651  BIRMINGHAM, AL 35243	\$ 220,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	EMMET AND JOY O'NEAL  2500 MOUNTAIN BROOK PARKWAY  BIRMINGHAM, AL 35223	\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4  SUZANNE AND MIKE GRAHAM  9 WEST MONTCREST DRIVE  BIRMINGHAM, AL 35213	Total contributions  \$ 31,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	COLLEEN AND SHAY SAMPLES  2606 CALDWELL MILL LANE  BIRMINGHAM, AL 35243	\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	HILLCREST FOUNDATION  P.O. BOX 530507  BIRMINGHAM, AL 35253	\$50,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 6	PELICAN FOUNDATION	Total contributions	Person X Payroll
	TWO METROPLEX DRIVE SUITE 400	\$ 25,000.	Noncash (Complete Part II for
	BIRMINGHAM, AL 35209		(Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

# THE RED BARN

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Part II	Noncash Property (see instructions). Use duplicate copies of Part II if ac	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
$ \Big[$		\$	
53 11-11-	-21		Schedule B (Form 990) (20

Schedule B (Form 990) (2021) Page **4** 

Name of organization **Employer identification number** \*\*-\*\*\*3191 THE RED BARN Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

123454 11-11-21 Schedule B (Form 990) (2021)

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

THE RED BARN

**Employer identification number** \*\*-\*\*\*3191

organization answered "Yes" on Form 990, Part IV. line 6.  1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of organization in form all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? 5 Dot the organization in sproperty, subject to the organization is exclusive legal control? 6 Did the organization in sproperty, subject to the organization is writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose contenting impermissible private benefit? 7 Part III Conservation Easements. Complete if the organization answered "Yes" on Form (990, Part IV, line 7.  1 Purpose(9) or conservation casements held by the organization (hock at that apply). 1 Perservation of land for public use (for example, recreation or education). 2 Preservation of a storocally important land area Preservation of organization answered. "Yes" on Form (990, Part IV, line 7.  1 Purpose(9) or conservation easements held by the organization chock at that apply. 2 Preservation of organization and the preservation of a conservation of a conservation easement in the last of the tax year. 3 Total number of conservation easements and a qualified conservation contribution in the form of a conservation easement in the last of the Tax Year. 3 Total number of conservation easements included in (c) acquired after 725(9), and not on a historic structure listed in the National Register 5 Does the organization have a written policy regarding the endod monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.  2 Namber of conservation easement included in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.  3 Purpose(9) (1988)  4 Number of conservation easement report	Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	Accounts. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of and for year 4 Aggregate value of and of year 5 Dot the organization informal all conors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? 6 Dot the organization informal grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose contenting impormisable private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 1980, Plat IV, lips 7.  1 Purpose(s) of conservation easements held by the organization (check all that appy).  Preservation of James assembly assembl		organization answered "Yes" on Form 990, Part IV, line	6.	·
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A Aggregate value at end of year  5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatsle purposes and not for the benefit of the donor or donor advisor, or any other purpose conferring impermissable private benefit?  Part II Conservation Teasements. Complete if the organization answered "Yes" on Form 190, Part IV, lipe 7.  1 Purpose(s) of conservation easements held by the organization or education) Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of open space  2 Complete lines 2a through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  3 Total number of conservation easements  4 Total number of conservation easements are seminated in (a) acquired after 725/05, and not on a historic structure listed in the National Register  5 Number of conservation easements modified, transferred, released, extinguished or terminated by the organization during the tax year with the National Register  7 Number of conservation easements modified, transferred, released, extinguished or terminated by the organization during the tax year purpose the organization have a written policy regarding the period monitoring, inspecting, handling of violations, and enforcing conservation easements during the year violations, and enforcement of the conservation easements it locks?  5 Does the organization have a written policy regarding the period monitoring, inspecting, handling of violations, and enforcing conservation easements during the year purpose of the organization easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(	2			
5 Did the organization informal idenors and donor advisors in writing that the assets held in donor advised funds are the organization is reportly, subject to the organizations (successed and the organization) for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors, or for any other purpose conferring impermissible purvate benefit of the donor or donor advisors, or for any other purpose conferring memory of the purpose (or any the purpose) of the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose) of the purpose conferring the purpose (or any the purpose conferring the purpose of the purpose conferring the purpose (or any the purpose conferring the purpose of the purpose conferring the purpose of the purpose conferring the purpose (or any the purpose conferring the purpose of the purpose conferring the purpose (or any the purpose conferring the purpose of the purpose o	3	Aggregate value of grants from (during year)		
are the organization's property, subject to the organization's exclusive legal control?	4	Aggregate value at end of year		
6 Did the organization inform all grantees, denors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confering impermissable private benefit?    Purposely of conservation easements held by the organization answered "Yes" on Form 900 Part IV, line 7.    Preservation of land for public use (for example, recreation or education)	5	Did the organization inform all donors and donor advisors in wi	iting that the assets held in donor advised fu	unds
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purposes confering impermissible private benefit?    Part II   Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, lips 7.    Purpose(§) of conservation easements held by the organization (check all that apply).				
Part II   Conservation Easements. Complete if the organization answered "Yes" on Form '990, Part IV, lipe 7.    Purpose(s) of conservation easements held by the organization (check all that apply).   Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Precedence of natural habitat   Preservation of open space   Preservation easement on the last day of the tax year.   Preservation easement on the last day of the tax year.   Preservation easement on the last day of the tax year   Preservation easement on a certified historic structure included in (a)   Preservation easement on a certified historic structure included in (a)   Preservation easement on a certified historic structure included in (a)   Preservation easement included in (c) acquired after 7/25/6b, and not on a historic structure   Preservation easement included in (c) acquired after 7/25/6b, and not on a historic structure   Preservation easement included in (c) acquired after 7/25/6b, and not on a historic structure   Preservation easement   Preservation easement   Preservation easement   Preservation easement   Preservation	6	Did the organization inform all grantees, donors, and donor adv	visors in writing that grant funds can be used	donly
Part II Conservation Easements . Complete if the organization answered "Ves" on Form 990, Part IV, line 7.  1 Purpose(6) of conservation easements held by the organization (check all that apply).  □ Preservation of an instorically important land area □ Protection of natural habitat □ Protection of on fautural habitat □ Protection of open space  2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  3 Total number of conservation easements □ Total acreage restricted by conservation easements □ Total acreage restricted by conservation easements □ Total acreage restricted by conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished or terminated by the organization during the tax year ▶ □ Total acreage restricted by experiments of the conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it hocks?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ■ S  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(fb)(i) and section 170(h)(4)(fb)(ii)    Yes		for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose conf	erring
Preservation or land for public use (for example, recreation or education)	Da	· ,		
Preservation of land for public use (for example, recreation or education)	Pai	<u> </u>		IV, line 7.
Proservation of a certified historic structure  Preservation of open space  2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure includes in (a)  c Number of conservation easements on a certified historic structure includes in (a)  d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  ▶	1			
Preservation of open space				,
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b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year \[ \] 4 Number of states where property subject to conservation easement is located \[ \] 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  \[ \] 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  \[ \] 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for p				
c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li) and section 170(h)(4)(B)(li))?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items:  art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the	_			
d Number of conservation easements included in (c) acquired after 7/25/08, and not on a historic structure listed in the National Register		• • • • • • • • • • • • • • • • • • • •		
listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  ▶ \$  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  ▶ \$  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)  and section 170(h)(4)(B)(iii)?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organization Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue inclu	_			20
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  No lone each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part XII, line 1  (ii) Assets included in Form 990, Part XIII, line 1  Assets includ	a			24
A Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  S  B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part XI, line 1  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to	2			
Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(B) and section 170(h)(4)(B)(B)(B) and se	3		ased, extinguished, or terminated by the orga	anization during the tax
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  **Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements of violations, and enforcing conservation easements during the year  **No **No **No **No **No **No **No **N	4		ment is located	
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  ▶				
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  S  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	·			Yes No
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    \$	6			
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part X		<b>&gt;</b>	,	3
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part X	7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conservation	easements during the year
and section 170(h)(4)(B)(ii)?				
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X	8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)	(B)(i)
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X		and section 170(h)(4)(B)(ii)?		Yes No
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<ul> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> </ul>				
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the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  \$ \$	_	, , , , , , , , , , , , , , , , , , , ,		
a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  ► \$  ■ \$	2	- · · · · · · · · · · · · · · · · · · ·		n, provide
<b>b</b> Assets included in Form 990, Part X	_		_	<b>•</b> •
				Schedule D (Form 990) 2021

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other

(c) Accumulated (d) Book value basis (investment) basis (other) depreciation Leasehold improvements 80,000. 80,000. d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B). line 10c.)

Schedule D (Form 990) 2021

Land, Buildings, and Equipment.

Scriedule D (Form 990) 2021 THE KED DAIN	<b>'</b>		JIJI Page
Part VII Investments - Other Securities.	on Farma 000 Dart IV line of	dh Cas Farra 000 Bart V lina 10	
Complete if the organization answered "Yes" o		(c) Method of valuation: Cost or end	of year market value
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Valuation. Cost of end	-or-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, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	on Form 990. Part IV. line 1	1c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)	(-)	(-)	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	7		
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)	<b>&gt;</b>	
Part X Other Liabilities.	,,	<u> </u>	
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) NOTE PAYABLE - EIDL LOAN			150,000.
(3)			•
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Column /h) must equal Form 000 Port V and (P) line	0F \		150.000.

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 ... X

Schedule D (Form 990) 2021

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

Par	art XI Reconciliation of Revenue per A	udited Financial Statements	With Revenue per Re	turn.	
	Complete if the organization answered "Ye	s" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audite	ed financial statements		1	
2	Amounts included on line 1 but not on Form 990,	Part VIII, line 12:			
а	a Net unrealized gains (losses) on investments	<u></u>	2a		
b	<b>b</b> Donated services and use of facilities	<u></u>	2b		
С			2c		
d	d Other (Describe in Part XIII.)		2d		
е	e Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12,	but not on line 1:			
а	a Investment expenses not included on Form 990, F	Part VIII, line 7b	4a		
b	b Other (Describe in Part XIII.)		4b		
С	c Add lines 4a and 4b			4c	<del>)</del>
5	Total revenue. Add lines 3 and 4c. (This must equ	al Form 990, Part I, line 12.)		5	
Pai	art XII Reconciliation of Expenses per A	Audited Financial Statements	With Expenses per R	leturi	າ.
	Complete if the organization answered "Ye	s" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial st	atements		1	
2	Amounts included on line 1 but not on Form 990,	Part IX, line 25:			
а	a Donated services and use of facilities		2a		
b	b Prior year adjustments		2b		
С	c Other losses		2c		
d	d Other (Describe in Part XIII.)		2d		
е				2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	
4	Amounts included on Form 990, Part IX, line 25, b	ut not on line 1:	1		
а	a Investment expenses not included on Form 990, F	Part VIII, line 7b	4a		
b	b Other (Describe in Part XIII.)	<u>2</u>	4b		
С	c Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total expenses. Add lines 3 and 4c. (This must ea	rual Form 990. Part I. line 18.)		5	

Part XIII Supplemental Information.

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

#### PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS

OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). IN ACCORDANCE

WITH THE IRC REGULATIONS, THE ORGANIZATION IS TAXED ON UNRELATED BUSINESS

INCOME, WHICH CONSISTS OF EARNINGS FROM ACTIVITIES NOT RELATED TO ITS TAX

EXEMPT PURPOSE. THE ORGANIZATION ACCOUNTS FOR TAX UNCERTAINTIES BASED ON A

MORE LIKELY THAN NOT RECOGNITION THRESHOLD WHEREBY TAX BENEFITS ARE ONLY

RECOGNIZED WHEN THE ORGANIZATION BELIEVES THAT THEY HAVE A GREATER THAN

50% LIKELIHOOD OF BEING SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES.

THE ORGANIZATION HAS EVALUATED ALL OF ITS TAX POSITIONS AND DETERMINED

THAT IT HAD NO UNCERTAIN INCOME TAX POSITIONS AS OF DECEMBER 31, 2021.

Schedule D (Form 990) 2021

### **SCHEDULE G** (Form 990)

Department of the Treasury Internal Revenue Service

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Name of the organization Employer identification number \*\*-\*\*\*3191 THE RED BARN Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations g X Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) THE BETTER FUNDRAISING Yes No COMPANY - PO BOX 1563 FUNDRAISING CONSULTING Х 39,450 0. 39 450 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

HA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-F7.	Schedule G (Fo

SEE PART IV FOR CONTINUATIONS

orm 990) 2021

Pa	ırt I	<b>Fundraising Events.</b> Complete if the of fundraising event contributions and ground fundraising event contributions and ground fundraising events.					
Revenue		<u> </u>	(a) Event #1 LUNCHEON	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))	
			(event type)	(event type)	(total number)	Coi. (C)	
	1	Gross receipts	24,000.			24,000.	
	2	Less: Contributions					
	3	Gross income (line 1 minus line 2)	24,000.			24,000.	
	4	Cash prizes					
	5	Noncash prizes					
sesues	6	Rent/facility costs	0.				
Direct Expenses	7	Food and beverages	0.				
	8	Entertainment					
	9	Other direct expenses	2,532.			2,532. 2,532.	
	10	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	( )		_	21,468.	
Pa	rt I					,	
		\$15,000 on Form 990-EZ, line 6a.			T		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
	1	Gross revenue					
es	2	Cash prizes					
xbens	3	Noncash prizes					
Direct Expenses	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor	Yes % No	Yes % No	Yes % No		
	7	7 Direct expense summary. Add lines 2 through 5 in column (d)					
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>		
а	ls t	ter the state(s) in which the organization conducted organization licensed to conduct gaming action," explain:	ctivities in each of these s			Yes No	
		ere any of the organization's gaming licenses re Yes," explain:	· · · · · · · · · · · · · · · · · · ·		•	Yes No	
1000		L21.21			Soho	dule G (Form 990) 2021	

Schedule G (Form 990) 2021 THE RED BARN	**-***3191 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity for	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a   %
<b>b</b> An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and	•
Name ▶	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and s	the amount
of gaming revenue retained by the third party  \$\bigs\\$	
c If "Yes," enter name and address of the third party:	
Name ▶	
Address ▶	
16 Gaming manager information:	
Name ▶	
Ivalific P	
Gaming manager compensation ▶ \$	
Culturing manager compensation • • • • • • • • • • • • • • • • • • •	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or	spent in the
organization's own exempt activities during the tax year > \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii)	and (v); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUN	DRAISERS:
(I) NAME OF FUNDRAISER: THE BETTER FUNDRAISING COMPANY	
(-)	
(I) ADDRESS OF FUNDRAISER: PO BOX 1563, EDMONDS, WA 9802	.0
PART I, LINE 2B, COLUMN (V):	
TN MAY 2010 MUD DECEMBED DEPENDENT COMPANY 122 CONTRACTOR	AGGIGE MITS DED
IN MAY 2019, THE BETTER FUNDRAISING COMPANY, WAS HIRED TO	ASSIST THE RED
DADN EMDIOVEEG DIDECMODG AND MOTINGEED ON PROMITERIO EN	EM WIND ON COINC
BARN EMPLOYEES, DIRECTORS, AND VOLUNTEERS BY PROVIDING TH PROFESSIONAL FUNDRAISING CONSULTING SERVICES. THESE SERVI	
LUCLEDDIONAL LONDVAIDING CONDOLLING DEKATCED. LUEDE DEKAT	CES PROVIDED

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Schedule G (Form 990) 2021

### **SCHEDULE O** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Inspection

OMB No. 1545-0047

Name of the organization

THE RED BARN

**Employer identification number** \*\*-\*\*\*3191

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DISABILITIES OR SPECIAL CIRCUMSTANCES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PROGRAM FEES.
FORM 990, PART VI, SECTION A, LINE 2:
JOY O'NEAL AND EMMET O'NEAL ARE MARRIED TO ONE ANOTHER. ALEXIS BRASWELL IS
A DAUGHTER OF JOY O'NEAL.
FORM 990, PART VI, SECTION B, LINE 11B:
REFER TO LINE 12C
FORM 990, PART VI, SECTION B, LINE 12C:
GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS
ARE AVAILABLE UPON REQUEST.
FORM 990, PART VI, SECTION B, LINE 15:
WAGES FOR EMPLOYEES ARE DETERMINED BY INDUSTRIAL STANDARDS OF THE TWO
ACCREDITING AGENCIES - PROFESSIONAL ASSOCIATIONS OF THERAPEUTIC
HORSEMANSHIP (PATH) AND THE CERTIFIED HORSEMANSHIP ASSOCIATION (CHA).
FORM 990, PART VI, SECTION C, LINE 19:
REFER TO LINE 12C

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

Schedule O (Form 990) 2021