Return of Organization Exempt From Income Tax

OMB No. 1545-0047

23

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

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A	For the	e 2023 calend	dar year, or tax year beginning 07/01/2023 and ending	06/30/20	024	_
в	Check i	f applicable:	C Name of organization BARK		D Empl	oyer identification number
	Address	s change	Doing business as			93-1263288
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telepł	hone number
	Initial re	eturn	PO BOX 12065			503-331-0374
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	ed return	PORTLAND, OR 97212		G Gross	receipts \$ 841,626
	Applicat	tion pending	F Name and address of principal officer: NICKI DARDINGER	H(a) Is this a grou	ıp return fo	or subordinates? 🗌 Yes 🗹 No
	-		PO BOX 12065, PORTLAND, OR 97212	H(b) Are all sub	oordinat	es included? 🗌 Yes 🗌 No
I	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	If "No," attach	a list. Se	ee instructions.
J		e: BARK-Ol		H(c) Group exe	emption	number
К		organization: 🗸	Corporation Trust Association Other L Year of form	nation: 1999	M State	of legal domicile: OR
P	art I	Summa	ſŷ			
	1	Briefly des	cribe the organization's mission or most significant activities: TO TF	RANSFORM MT. H		NATIONAL FOREST
Ce		INTO A PL	ACE WHERE NATURAL PROCESSES PREVAIL, WHERE WILDLIFE THR	IVES AND WHERI	E LOC	AL
Activities & Governance		COMMUNI	FIES HAVE A SOCIAL, CULTURAL, AND ECONOMIC INVESTMENT IN IT	S RESTORATION	AND F	PRESERVATION.
ver	2	Check this	box \square if the organization discontinued its operations or disposed	of more than 259	% of it	s net assets.
ŝ	3	Number of	voting members of the governing body (Part VI, line 1a)		3	10
<u>م</u>	4	Number of	independent voting members of the governing body (Part VI, line 1)	b)	4	10
tie	5	Total numb	per of individuals employed in calendar year 2023 (Part V, line 2a)		5	18
ť	6	Total numb	per of volunteers (estimate if necessary)		6	550
A	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0
				Prior Year		Current Year
ē	8	Contributio	ons and grants (Part VIII, line 1h)	77	75,175	840,129
enu	9	Program se	ervice revenue (Part VIII, line 2g)		0	250
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)		526	386
ш	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-57	861
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	77	75,644	841,626
	13	Grants and	I similar amounts paid (Part IX, column (A), lines 1–3)		0	950
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)		0	0
es	15		her compensation, employee benefits (Part IX, column (A), lines 5–10)	60	3,739	669,433
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)		0	0
ğ	b	Total fundr	aising expenses (Part IX, column (D), line 25) 131,208			
ш	17	Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)	20	7,354	194,570
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	81	1,093	864,953
	19	Revenue le	ss expenses. Subtract line 18 from line 12	-3	35,449	-23,327
Net Assets or Fund Balances				Beginning of Curre	nt Year	End of Year
sett	20		s (Part X, line 16)	64	4,029	598,232
at As	21		ties (Part X, line 26)	7	71,191	48,601
			or fund balances. Subtract line 21 from line 20	57	2,838	549,631
P	art II	Signatu	re Block			
			I declare that I have examined this return, including accompanying schedules and sta e. Declaration of preparer (other than officer) is based on all information of which prepa			my knowledge and belief, it is

		Schlyce	:	12/19/2024	Ł					
Sign	Signature of offic	cer	v		Date					
Here	SCHLYCE MA	RTINEZ, CO - PRESIDENT								
	Type or print nar	me and title								
Paid	Print/Type prepa	arer's name	Preparer's signature	Date	Date		PTIN			
Preparer	JEREMY COR	K	Jeremy Cork	12/20/2	024	self-employed	P01544850			
Use Only	Firm's name	EASY OFFICE DBA JITA	Firm's	s EIN	26-2176601					
	Firm's address	1120 S RACKHAM WAY	Phone	e no. 2	08-287-4777					
May the IRS	discuss this re	eturn with the preparer s	shown above? See instruct	tions			🗹 Yes 🗌 No			

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	0 (2023) Page
Part	
	Check if Schedule O contains a response or note to any line in this Part III
2 [2 [3] 3 [4] 4 [4] 4 [4] 4] 4 [4] 4] 4] 4] 4] 4] 4] 4]	Briefly describe the organization's mission:
	TO TRANSFORM MT. HOOD NATIONAL FOREST INTO A PLACE WHERE NATURAL PROCESSES PREVAIL, WHERE WILDLIFE THRIVES AND WHERE LOCAL COMMUNITIES HAVE A SOCIAL, CULTURAL, AND ECONOMIC INVESTMENT IN
	ITS RESTORATION AND PRESERVATION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured b expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 289,173 including grants of \$ 950) (Revenue \$ 200)
	PUBLIC EDUCATION AND ADVOCACY - PROVIDING FREE, EDUCATIONAL RESOURCE MATERIALS, GUIDED LEARNING
	EXPERIENCES, AND FACILITATED CIVIC ENGAGEMENT ACTIVITIES TO INFORM AND SUPPORT PUBLIC PARTICIPATION
	IN PUBLIC LANDS LAW AND POLICY BY INCREASING PUBLIC UNDERSTANDING OF FOREST ECOLOGY, RESTORATION
	SCIENCE, AND ENVIRONMENTAL JUSTICE THROUGH IN-PERSON AND VIRTUAL SPACES (GUIDED HIKES, WETLAND
	RESTORATION, AND ECOLOGICAL SURVEY ACTIVITIES, VIRTUAL AND IN-PERSON GATHERINGS, WEB-BASED
	LEARNING MATERIALS AND RECORDED AND IN-PERSON TRAINING AND WORKSHOPS).
4b	(Code:) (Expenses \$ 136,229 including grants of \$ 0) (Revenue \$ 0) RESTORATION - TRAINED AND GUIDED 115 VOLUNTEERS IN SEASONAL BEAVER HABITAT SURVEYS RESTORATION PLANTINGS, AND WETLAND HYDROLOGICAL CAPACITY MONITORING IN MT. HOOD NATIONAL FOREST.
4c	(Code:) (Expenses \$ 121,072 including grants of \$0) (Revenue \$0)
	FOREST WATCH - TRAINED AND GUIDED 54 VOLUNTEERS IN CONDUCTING ON-SITE ECOLOGICAL SURVEYS AND
	MONITORING PROPOSED TIMBER LOGGING AND ROAD-BUILDING PROJECTS ON THE PUBLIC LANDS OF MT. HOOD
	NATIONAL FOREST, INCORPORATES COMMUNITY-DRIVEN SCIENCE DATA INTO PUBLIC COMMENTS SUBMITTED
	ORGANIZATIONALLY AND BY THOUSANDS OF MEMBERS OF THE PUBLIC, THROUGH THE NATIONAL ENVIRONMENTAL POLICY ACT AND NATIONAL FOREST MANAGEMENT ACT.
4 -1	
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 1
4e	(Expenses \$ 22,299 including grants of \$ 0) (Revenue \$ 0) Total program service expenses 568,773
70	Total program service expenses 568,773

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Part	V Checklist of Required Schedules			
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	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	2	<i>v</i>	~
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		~
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? <i>If "Yes," complete Schedule C, Part III</i>	5		~
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? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
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		~
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e 11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14a		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b		
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.	15 16		、 、
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

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Part	V Checklist of Required Schedules (continued)			
~~		-	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		~
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? <i>If "Yes," complete Schedule J</i> .	23		~
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	 24a		-
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		~
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
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? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		~
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		~ ~
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		~ ~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		v v
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		~
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		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		 ✓
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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	35b		
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	36 37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	37	~	
Part		<u></u>	_ •	·
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 2 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 1	1c	Yes V	No

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Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	V	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
		4a		~
b	If "Yes," enter the name of the foreign country			
50	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 50		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
•••	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		~
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		~
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 o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
8	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.	0		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13 2	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	158		
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		~
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		~
	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		~
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			Í
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form	990	(2023)
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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

Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a)		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . 1b 10	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		V
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		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6		~
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		~
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		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	-	ode)	V
0000		100 0	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		V
b	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	~	
b	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? <i>If "No," go to line 13</i>	12a	V	
b c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	~	
Ŭ	describe on Schedule O how this was done.	12c	~	
13	Did the organization have a written whistleblower policy?	13	~	
14	Did the organization have a written document retention and destruction policy?	14		~
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	~	
b	Other officers or key employees of the organization	15b		~
40	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?	10		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		~
	participation 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		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OR			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990	-T (sec	tion 5	501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
10	Own website Another's website Upon request Other (explain on Schedule O)	of late	·	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict and financial statements available to the public during the tax year.	Ji intel	est p	oncy,

20 State the name, address, and telephone number of the person who possesses the organization's books and records. BARK, (503)331-0374

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

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

				(C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title						e than c		Reportable	Reportable	Estimated amount
	Average hours				s person is both an a director/trustee)			compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
JULIE FALK	40.00									
INTERIM EXECUTIVE DIRECTOR (APRIL - NOVEM	I			~				84,850	0	0
RICH WALCZAK	40.00									
EXECUTIVE DIRECTOR AS OF NOVEMBER 2023		1		~				13,462	0	0
NICKI DARDINGER	4.00									
PRESIDENT		~		~				0	0	0
ABIGAIL SINGER	1.00									
TREASURER		~		~				0	0	0
CALEB MAMMEN	1.00									
SECRETARY		~		~				0	0	0
ANDREW FLETCHER	1.00									
BOARD MEMBER		~						0	0	0
JAYMEE JACOBY	1.00]								
BOARD MEMBER		~						0	0	0
MIA PISANO	1.00]								
BOARD MEMBER		~						0	0	0
REBECCA BOWE	1.00									
BOARD MEMBER		~						0	0	0
RYNN THOMPSON	1.00	-								
BOARD MEMBER		~						0	0	0
SCHLYCE MARTINEZ	1.00	1								
BOARD MEMBER		~						0	0	0
SUMMER NOLLER	1.00	1								
BOARD MEMBER		~						0	0	0
		-								
		-								
	ļ		<u> </u>		<u> </u>		L			 000 (2020)

Part	VI Section A. Officers, Directors, 1	rustees,	Key I	Emp	olo	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (continued	<u>)</u>
					(0	C)							
	(A)	(B)				ition			(D)	(E))	(F)	
Name and title			(do not check more that box, unless person is b						Reportable	Reportable		Estimated amount	
		hours					or/trust		compensation	compen		of other	
		per week (list any	or Inc	Ins	ç	Кe	en Hig	Fo	from the organization (W-2/	from re organizatio		compensation from the	
		hours for	Individual t or director	stitu	Officer	y er	ghes	Former	1099-MISC/	1099-N		organization and	
		related organizations	lual	tion)	nplo	yee	Ť	1099-NEC)	1099-1	NEC)	related organizations	i
		below	Individual trustee or director	al tri		Key employee	mp						
		dotted line)	tee	Institutional trustee			Highest compensated employee						
				e			Ited						
													-
			1										
													-
			1										
													-
			1										
													_
													_
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			ł										
	<u> </u>												_
1b	Subtotal		• •	·	·	• •	•	•	98,312		0	()
C	Total from continuation sheets to Part		n A	•	·	• •	•	•					_
d 2	Total (add lines 1b and 1c)	 but not	· ·					tod	98,312		0 moro t) .f
2	reportable compensation from the organi		mme	uι	01	nos	e lisi	leu	,	ceived	nore t	nan \$100,000 C	Л
		zation							0			Yes No	_
3	Did the organization list any former of	officer dire	octor	tru	etor	م لا		mnl	lovee or highes	t compo	neated		T.
U	employee on line 1a? If "Yes," complete s							mpi	loyee, or highes	t compe	isateu	3 🗸	1
4	For any individual listed on line 1a, is the							 	nd other compe	 Neation fr		-	T.
-	organization and related organizations												
	individual											4 🗸	1
5	Did any person listed on line 1a receive o	or accrue co	omne	nsat	tion	froi	n anv	/ 11n	related organizat	ion or ind	lividual		T.
·	for services rendered to the organization											5 🖌	1
Secti	on B. Independent Contractors	,							1 1			5	-
1	Complete this table for your five high	nest comp	ensat	ed	inde	eper	ndent	со	ontractors that r	eceived	more 1	than \$100.000 c	of
	compensation from the organization. Rep												
	(A)	•							(B)			(C)	-
	(A) Name and business add	ress							(D) Description of serv	rices		Compensation	
None													-
													-
													-
													-

2	Total number of independent contractors (including but not limited to those listed above) who								
	received more than \$100,000 of compensation from the organization								

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to an	y line in this Pa	rt VIII...	 [

				,			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ູ່ ທີ່ ເ	1a	Federated campaigns 1a	0				
ant	b	Membership dues	0				
Contributions, Gifts, Grants, and Other Similar Amounts	с	Fundraising events	0				
	d	Related organizations 1d	0				
	e	Government grants (contributions) 1e	20,000				
	f	All other contributions, gifts, grants,	20,000				
no S	•						
he			820,129				
e 5	g	Noncash contributions included in					
L D		lines 1a-1f 1g					
δα	h	Total. Add lines 1a-1f		840,129			
			Business Code				
e	2a	PROGRAM SERVICE FEES	900099	250	250	0	0
ωŚ	b						
Se Di	с						
ĒŠ	d						
Program Service Revenue	e						
Š	_	All other program convice revenue					
ā	f	All other program service revenue		0	0	0	0
	g	Total. Add lines 2a–2f		250			
	3	Investment income (including dividend					
		other similar amounts)		386	0	0	386
	4	Income from investment of tax-exempt be	ond proceeds	0	0	0	0
	5	Royalties <u></u>		0	0	0	0
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c 0	0				
	d						
			(ii) Other				
	7a						
е		sales of assets					
	_	other than inventory 7a					
	b	Less: cost or other basis					
en		and sales expenses . 7b					
Revenue	С	Gain or (loss) 7c 0	0				
L L	d	Net gain or (loss)					
Othe	8a	Gross income from fundraising					
ð		events (not including \$ 0					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
		Net income or (loss) from fundraising eve					
	C Oc	. ,	ents				
	9a	Gross income from gaming activities. See Part IV, line 19 . ga					
	_	, vu					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activiti	es				
	10a						
		returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	с	Net income or (loss) from sales of invento	ory				
s			Business Code				
n or	11a	REFUNDS/REIMBURSEMENTS	900099	861	861	0	0
ju.	b					•	
ver			-				
scellaneo Revenue	C L		-		-	-	
Miscellaneous Revenue	d			0	0	0	0
-	e	Total. Add lines 11a–11d		861			
	12	Total revenue. See instructions		841,626	1,111	0	386
							Form 990 (2023)

Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complet Check if Schedule O contains a response		other organizations i	must complete colum	(
		oniei organizations l	THIS COULD BE COULT	n(A)
	or note to any line			
t include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C)	(D)
	Total expenses	Program service expenses	Management and	Fundraising
Grants and other assistance to domestic organizations			<u> </u>	
-				
	950	950		
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	98 312	68 539	12 338	17,435
Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	70,312	00,037	12,330	17,433
Other salaries and wages	444,416	309,828	55,773	78,815
	5,389	3,750	673	966
				9,929
	56,339	39,546	6,622	10,171
	5,172		5,172	
Accounting	38,657		38,657	
Lobbying				
Other. (If line 11g amount exceeds 10% of line 25, column	42 249	25 110	11 088	6,051
				0,031
Office expenses	13,772	8,377	3,296	2,099
Information technology	20,840	17,189	2,231	1,420
Royalties				
			3,267	2,080
Payments of travel or entertainment expenses for any federal, state, or local public officials	8,444	8,026		418
Conferences, conventions, and meetings .	178	178		
Interest	15		15	
Payments to affiliates				
	8,343	5,370	2,515	458
above. (List miscellaneous expenses not covered line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
BANK AND MERCHANT FEES	24,904	9,089	14,449	1,366
GIFTS AND HONORARIUMS	825	825	0	0
	0/4.050	E (0 330	4/4.070	404.000
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if	864,953	568,773	164,972	131,208
	b, and 10b of Part VIII. 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(c)(3)(B)	p. and 10b of Part VIII. Total expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 950 Grants and other assistance to domestic individuals. See Part IV, line 22 950 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 98,312 Benefits paid to or for members 98,312 Compensation not included above to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 98,312 Other salaries and wages 444,416 Payroll taxes 98,312 Other employee benefits 64,977 Payroll taxes 5,389 Other employee benefits 64,977 Payroll taxes 5,172 Accounting 38,657 Lobbying 91,172 Investment fees 0141,111 Ofter expenses 13,772 Information technology 20,404 Royatities 92,710 Travel 8,444 Payments of travel or entertainment expenses for any federal, state, or local public officials 92,710 Ortravel	p. and 10b of Part VIII. Product Separates Projections Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 5 5 Grants and other assistance to domestic individuals. See Part IV, line 22. 5 5 Grants and other assistance to foreign organizations, foreign governments, and doreign individuals. See Part IV, lines 15 and 16 5 5 Benefits paid to or for members Compensation of current officers, directors, fustees, and key employees 98,312 68,539 Pension plan accruals and contributions (include section 401(k) and 403(k) employer contributions 5,389 3,750 Other employee benefits Lobbying Naccounting Numerities Accounting <t< td=""><td>and 10b of Part VIII. Program activity assistance to domestic organizations and domestic governments. See Part IV, line 21 Program activity assistance to domestic individuals. See Part IV, line 21 Grants and other assistance to foreign organizations and conselic governments. See Part IV, line 22</td></t<>	and 10b of Part VIII. Program activity assistance to domestic organizations and domestic governments. See Part IV, line 21 Program activity assistance to domestic individuals. See Part IV, line 21 Grants and other assistance to foreign organizations and conselic governments. See Part IV, line 22

Form 990 (2023)

	n 990 (20	•			Page 11
Pa	art X		4 V		
		Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year		
	1	Cash-non-interest-bearing	603,724	1	590,746
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	683	4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	•	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
its	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9 10a	Prepaid expenses and deferred charges	9,846	9	5,973
	h	Less: accumulated depreciation 10b	0	10c	
	ь 11			11	1 510
	12	Investments—publicly traded securities	1,086	12	1,513
	13	Investments—program-related. See Part IV, line 11		13	
	13			14	
	15	Other assets. See Part IV, line 11	28,690	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	644,029		598,232
	17	Accounts payable and accrued expenses	37,920	17	48,601
	18	Grants payable	51,720	18	40,001
	19			19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	33,271	25	
	26	Total liabilities. Add lines 17 through 25	71,191	26	48,601
Fund Balances		Organizations that follow FASB ASC 958, check here \checkmark and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	572,838	27	549,631
Ä	28	Net assets with donor restrictions	0	28	0
, Func		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
JO (29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds .		31	
Net Assets or	32	Total net assets or fund balances	572,838	32	549,631
Ź	33	Total liabilities and net assets/fund balances	644,029	33	598,232

Form **990** (2023)

Page			90 (2023)	
-				Part
841,6				1
864,9	1			
-23,3		-	•	3
572,8				4
		-		
			Investment expenses	7
		8		8
		9		9
549,6		10		
				Part
			Check if Schedule O contains a response or note to any line in this Part XII	
Yes N				
	_			1
	ו ו	explain		
			Schedule O.	
v				2a
	r	mpiled	· · · · · · · · · · · · · · · · · · ·	
			reviewed on a separate basis, consolidated basis, or both.	
			Separate basis Consolidated basis Both consolidated and separate basis	
~	2b		Were the organization's financial statements audited by an independent accountant?	b
	1	lited or	 Total expenses (must equal Part IX, column (Å), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (Å)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Cother changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," expl Schedule O. 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 comp reviewed on a separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements and they an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited separate basis Deter the organization's financial statements and ted by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited separate basis. Consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis C If "Yes," to line 2 or 2b, does the organization have a committee that assumes responsibility for overs the audit, review, or compilation of its financial stat	
			separate basis, consolidated basis, or both.	Check if Schedule O contains Total revenue (must equal Part VIII, of Total expenses (must equal Part IX, of Revenue less expenses. Subtract line Net assets or fund balances at begin Net unrealized gains (losses) on invection of the context expenses in the second of the context expenses is the second of the context expenses in the second of the context expenses is t
		1 2 3 Part X, line 32, column (A)) 4 5 6 7 8 edule O) through 9 (must equal Part X, line 10 In pline in this Part XII Accrual Other Accrual Other a prior year or checked "Other," explain on ewed by an independent accountant? cial statements for the year were compiled or dated and separate basis lependent accountant? cial statements for the year were audited on a dated and separate basis tee that assumes responsibility for oversight of d selection of an independent accountant? etate that assumes responsibility for oversight of d selection of an independent accountant? etate that assumes responsibility for oversight of d selection process during the tax year, explain on to undergo an audit or audits as set forth in the	Separate basis Consolidated basis Both consolidated and separate basis	
	f	/ersight	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	С
	2c	tant?	the audit, review, or compilation of its financial statements and selection of an independent account	
	1 I	explain	If the organization changed either its oversight process or selection process during the tax year,	
			Schedule O.	
	•	orth in	As a result of a federal award, was the organization required to undergo an audit or audits as set f	3a
) (dergo	In res, did the organization undergo the required addit of addits? If the organization did not un	D

Form **990** (2023)

SCHEDULE A (Form 990)

(D)

(E)

Total

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Name	of the organization					Employer identification	number
BAR	K					93-12	63288
Par	t I Reason for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	part.) See instruction	ons.
The c	rganization is not a private founda	ation because it i	s: (For lines 1 through	12, cheo	ck only or	ne box.)	
1	A church, convention of churc	hes, or associati	on of churches descri	ibed in se	ection 17	0(b)(1)(A)(i).	
2	A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990)	.)		
3	A hospital or a cooperative ho						
4	A medical research organization	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and stat						
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
6	A federal, state, or local gover						
7	An organization that normally			port from	a gover	nmental unit or from	1 the general public
	described in section 170(b)(1)						
8	A community trust described i	n section 170(b))(1)(A)(vi). (Complete	Part II.)			
9	An agricultural research organ or university or a non-land-gra university:						
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	t income and uni	related business taxal	ble incom	ne (less se	ection 511 tax) from	fees, and gross 33 ¹ /3% of its businesses
11	An organization organized and		•		•	,	
12	An organization organized and	operated exclusi	vely for the benefit of,	to perfor	m the fun	ctions of, or to carry	out the purposes of
	one or more publicly supported the box on lines 12a through 12	d organizations d	escribed in section 5	09(a)(1) o	r section	509(a)(2). See secti	ion 509(a)(3). Check
а	Type I. A supporting organ the supported organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	jority of t		
b	Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same			
С	Type III functionally integ its supported organization						ally integrated with,
d	Type III non-functionally that is not functionally inter requirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribu	ution requirement an	
е	Check this box if the organ functionally integrated, or	nization received Type III non-func	a written determination	on from th oporting o	ne IRS the organizat	at it is a Type I, Type ion.	∋ II, Type III
f	Enter the number of supported of	organizations .					
g	Provide the following information	n about the supp	ported organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No	-	
(A)							
(B)							
							 [
(C)							

Part IISupport 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.)

Secti	on A. Public Support			×1		,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	826,702	854,895	367,005	775,175	840,129	3,663,906
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0		0
4	Total. Add lines 1 through 3	826,702	854,895	367,005	775,175	840,129	3,663,906
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						273,840 3,390,066
	on B. Total Support						3,370,000
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	826,702	854,895	367,005	775,175	840,129	3,663,906
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	527	774	208	526	386	2,421
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0		0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4	495	97,321	0	861	98,681
11	Total support. Add lines 7 through 10						3,765,008
12	Gross receipts from related activities, etc					12	250
13 Secti	First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re		, third, fourth,	-	ear as a sectio	
14	Public support percentage for 2023 (line (-		11, column (f))		14	90.04 %
15	Public support percentage from 2022 Scl		•			15	92.12 %
16a	331/3% support test-2023. If the organ						
b	box and stop here . The organization qua 33 ¹ / ₃ % support test - 2022. If the organi this box and stop here . The organization	zation did not	check a box o	n line 13 or 16	a, and line 15	is 331/3% or m	ore, check
17a	10%-facts-and-circumstances test — 20 10% or more, and if the organization metator VI how the organization meets the organization	023. If the orga eets the facts- facts-and-circu	anization did n and-circumsta umstances tes	ot check a box ances test, che st. The organiz	x on line 13, 1 eck this box a ation qualifies	6a, or 16b, and ind stop here . as a publicly	d line 14 is Explain in supported
b	10%-facts-and-circumstances test — 2 15 is 10% or more, and if the organization in Part VI how the organization meets the organization	on meets the fa	cts-and-circur cumstances te	mstances test, est. The organi	check this bo zation qualifie	x and stop he s as a publicly	re. Explain supported
18	Private foundation. If the organization instructions	did not check	a box on line	13, 16a, 16b	, 17a, or 17b,	check this bo	x and see
						Schedule A	A (Form 990) 2023

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support			-			
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	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						
10	(Explain in Part VI.)						_
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	and 12.)	organization	 	third fourth	or fifth toy yo	or 00 0 000	1
14	organization, check this box and stop he	-			•		
Socti	on C. Computation of Public Suppor						· · · · _
15	Public support percentage for 2023 (line 8	-		12 column (f))		15	%
16	Public support percentage for 2023 (inter Public support percentage from 2022 Sch					16	%
	on D. Computation of Investment In						70
17	Investment income percentage for 2023 (-	ov line 13 colu	imn (f))	17	%
18	Investment income percentage from 2022			-		18	%
19a	33 ¹ / ₃ % support tests – 2023. If the organ						
194	17 is not more than $33^{1/3}$ %, check this box						
b	33 ¹ / ₃ % support tests – 2022. If the organiz	-	-	-		-	
~	line 18 is not more than 33 ¹ / ₃ %, check this						
20	Private foundation. If the organization di	-	-	-			
	· ····ato roundation: in the organization di	a not oneon a		, 100, 01 100,			

Schedule A (Form 990) 2023

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 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, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions A through E.
Section A-Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
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-function	allv i	ntegrated Type III suppo	rting organization

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization 7 (see instructions).

Schedule A (Form 990) 2023

Schedu	le A (Form 990) 2023			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	
Sect	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	•	<i>VI</i>) 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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10)
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

Schedule A (Form 990) 2023

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A, Part II, Line 10 - OTHER REVENUE ------

SCHEDULE	0
(Form 990)	

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.



Internal Revenue Service Name of the organization

BARK

Department of the Treasury

Employer identification number

93-1263288

Form 990, Part VI, Section B, Line 11b - DRAFT 990 IS DISTRIBUTED TO BOARD, INCLUDING TREASURER, AT LEAST TWO WEEKS	
PRIOR TO FILING REQUESTING REVIEW AND SOLICITING FEEDBACK.	

Form 990, Part VI, Section B, Line 12c - THE ORGANIZATION'S WRITTEN CONFLICT OF INTEREST POLICY IS LOCATED IN ARTICLE 2 OF ITS BYLAWS. ANY PERCEIVED OR POTENTIAL CONFLICT OF INTEREST IS STATED VERBALLY AT MEETINGS OF THE BOARD OF DIRECTORS PRIOR TO TAKING ACTION ON THE RELEVANT ITEM. THIS IS RECORDED IN THE MEETING MINUTES.

Form 990, Part VI, Section B, Line 15 - INDEPENDENT INDIVIDUALS PLAY A ROLE IN DETERMINING THE EXECUTIVE DIRECTOR'S	
SALARY.	

Form 990, Part VI, Section C, Line 19 - AVAILABLE UPON WRITTEN REQUEST AND TO VISITORS AT THE OFFICE LOCATION. 990
FORMS CAN BE FOUND ON IRS.GOV AND GUIDESTAR.ORG WEBSITES.

Schedule	O, Statement 1	BA		
Form: Form 990 (2023) Page: 2			EIN: 93-1263288	
			Pa	t III, Line 4d
	Other Program Services Accomplishments			
Activity	Description	Expense	Grants	Revenue
Code				
	OTHER PROGRAMS INCLUDE LOBBYING AND EDI.	22,299	0	0
Total:		22,299	0	0