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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than $500,000 and total assets less than $1,250,000 at the end of the year may use this form

▶ *The organization may have to use a copy of this return to satisfy state reporting requirements.*

OMB No. 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning June 1, **2009, and ending** May 31, 2010

B Check if applicable.
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: The Barn Theatre

Number and street (or P.O. box, if mail is not delivered to street address): P.O. Box 108 | Room/suite

City or town, state or country, and ZIP + 4: Porterville CA 93258

D Employer identification number 94-2572725

E Telephone number (559) 359-5011

F Group Exemption Number ▶

• ***Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).***

G Accounting Method: ☐ Cash ☑ Accrual Other (specify) ▶

H Check ▶ ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ barntheater.porterville.com

J Tax-exempt status (check only one) — ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☑ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	1,409
	2	Program service revenue including government fees and contracts		2	Ø
	3	Membership dues and assessments		3	Ø
	4	Investment income		4	Ø
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	Ø
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from **gaming**, check here ▶ ☐			
	a	Gross revenue (not including $ 1,409 of contributions reported on line 1)	6a 23,805		
	b	Less: direct expenses other than fundraising expenses	6b 10,666		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		6c	13,139
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	Ø
	8	Other revenue (describe ▶)		8	Ø
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶		9	14,548
Expenses	10	Grants and similar amounts paid (attach schedule)		10	Ø
	11	Benefits paid to or for members		11	Ø
	12	Salaries, other compensation, and employee benefits		12	Ø
	13	Professional fees and other payments to independent contractors		13	5,835
	14	Occupancy, rent, utilities, and maintenance		14	13,014
	15	Printing, publications, postage, and shipping		15	525
	16	Other expenses (describe ▶ Attached Profit & Loss Statement)		16	7,300
	17	**Total expenses.** Add lines 10 through 16 ▶		17	26,674
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9) $ <-12,126>		18	Ø
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	159,009
	20	Other changes in net assets or fund balances (attach explanation) Theft Losses		20	<-2,833>
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	156,176

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	19,378	22	5,917
23	Land and buildings	135,590	23	146,110
24	Other assets (describe ▶ $5,126 Prepaid 2011 Expenses (minus) $1,577 Reserved Funds 2011 Held/Reserved For 2011 Transfer)	10,520	24	4,149
25	**Total assets**	165,488	25	156,176
26	**Total liabilities** (describe ▶)	<-6,479>	26	Ø
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	159,009	27	156,176

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

Cat. No. 10642I Form **990-EZ** (2009)

RECEIVED SEP 20 2010 OGDEN, UT IRS

SCANNED SEP 30 2010

Part III **Statement of Program Service Accomplishments** (See the instructions for Part III.)

What is the organization's primary exempt purpose? Non-Profit Cultural Arts Center Comunity Theatre

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)	
28 Provide Theatrical Education & Experience for Seniors, Students, Children, Adults. Provide up to 7 plays per Season Year with approx. 56 live stage performances of performing Arts for the Community. (Grants $ 0) If this amount includes foreign grants, check here ▶ ☑	28a	37,341
29 (Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30 (Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31 Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32 **Total program service expenses** (add lines 28a through 31a) ▶	32	37,341

Part IV **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
President Bob Merzoian 1080 Scenic Dr. Porterville, CA 93257	Varies 2	0	0	0
V. President Steve Ross 893 E. Cleveland, Porterville CA 93257	2-5	0	0	0
Treasurer - Dan Lublin 379 No. Hackett Porterville, CA 93257	2-5	0	0	0
Secretary - Leslie Woudstra 171 No Red Oak Dr. Porterville, CA 93257	2-5	0	0	0
Correspond Sectary - Wesley Cox 890 No Lime, Porterville CA 93257	2-5	0	0	0
Director - Joan Givan 522 No Murray, Porterville CA 93257	2-5	0	0	0
Director - Wendy Plaisted 1987 W. Morlache, Porterville CA 93257	2-5	0	0	0
Director - Robert Vanderhorst 1482 No Highland Dr. Porterville CA 93257	2-5	0	0	0
Director - Caroline Harris Po Box 667 Strathmore, CA 93267	2-5	0	0	0
Director - John Burkey 2306 No. Roby Porterville, CA 93257	2-5	0	0	0
Director - Judyann Hellrung 109 Birch Dr. Porterville, CA 93257	2-5	0	0	0
Director - Donna Schendel 570 W. Oakmont Porterville, CA 93257	2-5	0	0	0
Director Ralph Bourne 78 No. Corona Porterville CA 93257	2-5	0	0	0
Director Nicki Edwards 13096 Road 208 Porterville CA 93257	2-5	0	0	0
Director Richard Boyd 918 W. Mulberry Porterville CA 93257	2-5	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a Ø			
b	Did the organization file **Form 1120-POL** for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		✓
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		✓

41 List the states with which a copy of this return is filed. ▶ _____

42a The organization's books are in care of ▶ Secretary Leslie Woudstra Telephone no. ▶ (559) 359-5011

Located at ▶ 42 So. Plano St., Porterville, CA ZIP + 4 ▶ 93257

			Yes	No
b	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)?	42b		✓
	If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____	42c		✓

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43

			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		✓

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

			Yes	No
46	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	46		✓
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		✓
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over $100,000 . . . . ▶ 0

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 . . ▶ 0

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

▶ Leslie Woudstra — Signature of officer — Date 19-01-09

▶ Leslie Woudstra, Secretary — Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's identifying number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶		EIN ▶	
		Phone no. ▶	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)

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. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization The Barn Theatre

Employer identification number 94:2572725

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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: ----------

5 ☐ 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).**

7 ☐ 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.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☑ An organization that normally receives: (1) more than 33⅓ % 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 33⅓ % 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.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		✓
(ii) A family member of a person described in (i) above?	11g(ii)		✓
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		✓

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col (i) organized in the U.S.? Yes	No	(vii) Amount of support
The Barn Theatre	94-2572725	501(3)(c) Non-Profit Organization Community theatre	✓		✓		✓		
Total									

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					1,409	1,409
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					Ø	Ø
3 The value of services or facilities furnished by a governmental unit to the organization without charge					Ø	Ø
4 **Total.** Add lines 1 through 3					1,409	1,409
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.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4					1,409	1,409
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					Ø	Ø
9 Net income from unrelated business activities, whether or not the business is regularly carried on					Ø	Ø
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)					Ø	Ø
11 **Total support.** Add lines 7 through 10						1,409

12 Gross receipts from related activities, etc. (see instructions) 12 23,805

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . 14 100 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . 15 100 %

16a **33⅓ % support test—2009.** If the organization did not check the box on line 13, and line 14 is 33⅓ % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33⅓ % support test—2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓ % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . ▶ ☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					1,409	1,409
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					23,805	23,805
3 Gross receipts from activities that are not an unrelated trade or business under section 513					0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge					0	0
6 **Total.** Add lines 1 through 5					25,214	25,214
7a Amounts included on lines 1, 2, and 3 received from disqualified persons					0	0
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					0	0
c Add lines 7a and 7b					0	0
8 **Public support** (Subtract line 7c from line 6.)						25,214

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6					25,214	25,214
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					0	0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					0	0
c Add lines 10a and 10b					0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					0	0
13 **Total support.** (Add lines 9, 10c, 11, and 12.)					25,214	25,214

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	100 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	100 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	0 %
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	0 %

19a **33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Informational Request...

We are a small Community Theatre which provides educational, experience in the Live Performing Arts in Acting, Directing, Set Construction and Design, Lights and Sound, Music.

Are there any Grants available that you could please apply for us. We have no persons at present who can write grants. We are in need of grant if we qualify.

We realize financial burdons on goverment, so Any assistance you could give us would be greatly appreciated for our town.

Respectfully,
The Barn Theatre
of Porterville, CA
An All American Town

Contact Info for Grant Request
email to: pacredgold@yahoo.com
Theatre Board of Director J. Ream

2:03 PM
08/03/10
Accrual Basis

The Barn
Profit & Loss
June 2009 through May 2010

	Jun '09 - May 10
Income	
Donations	
Curtain	0 00
General	1,409.00
Kitchen	0.00
Memorials	0.00
Total Donations	1,409.00
Interest Income	13.85
Kitchen Production Income	
Brunches	3,083 00
Dinners	1,964.00
Intermissions	197.40
Total Kitchen Production Income	5,244 40
Other Event Income	
Buzzard Fest	1,170.00
Miss Brown's Tea Party	800.00
Yard Sales	0.00
Total Other Event Income	1,970.00
Program Ad Sales	1,855.00
Season Ticket Sales	1,889 00
Theatrical Production Income	
2008-09 Secret Garden	2,072.00
2009-10 Alibis	1,845.00
2009-10 Bad Year for Tomatoes	2,818.00
2009-10 Bullshot Drummond	2,037.00
2009-10 Calliope	893.00
2009-10 Drunkard	3,168 00
Total Theatrical Production Income	12,833.00
Total Income	25,214.25
Expense	
Administration	
Bank Fees	-32.50
Box Office	14.18
Check Printing	85.54
Election	85.97
Filing Fees	125.00
Mailing	17.50
Officers	50.00
Other	129.50
Post Office Box Rental	96.00
Safe Deposit Box Rental	60.00
Stationery & Supplies	402.70
Total Administration	1,033.89
Advertising & Publicity	293.15
Building Maintenance & Repairs	
Maintenance & Repairs	5,834.47
Materials & Supplies	176.23
Pest Control	300.00
Rentals	260.00
Security	134.63
Total Building Maintenance & Repairs	6,705.33
Dues & Subscriptions	446.50
Insurance	3,976.84
Kitchen Operations	
Kitchen Licenses & Permits	260.00
Total Kitchen Operations	260.00
Kitchen Production Expense	
Brunches	702.32
Dinners	776.88
Total Kitchen Production Expense	1,479.20

2:03 PM
08/03/10
Accrual Basis

The Barn
Profit & Loss
June 2009 through May 2010

		Jun '09 - May 10
Lighting & Sound		657 90
Other Event Expense		
2009-2010 Hoscars	750.00	
Beyond Reality	200.00	
Buzzard Fest Expense	389.61	
Miss Brown's Tea Party Expense	266 19	
Total Other Event Expense		1,605.80
Printing		231.43
Telephone		1,324.11
Theatrical Production Expense		
2008-09 Secret Garden	100.23	
2009-10 Alibis	1,015.67	
2009-10 Bad Year for Tomatoes	801.37	
2009-10 Bullshot Drummond	841.39	
2009-10 Calliope	747.83	
2009-10 The Drunkard	1,535.87	
Total Theatrical Production Expense		5,042.36
Theatrical Royalties & Scripts		
2008-09 Seussical	-529.18	
2009-10 Alibis	623.90	
2009-10 Bad Year for Tomatoes	761.59	
2009-10 Bullshot Drummond	638.88	
2009-10 Calliope	250.00	
2009-10 The Drunkard	793.65	
Total Theatrical Royalties & Scripts		2,538.84
Theft Loss		1,583.26
Utilities		10,161.93
Total Expense		37,340 54
Net Income		-12,126.29

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Accrual Basis

The Barn
Balance Sheet
As of May 31, 2010

	May 31, 10
ASSETS	
Current Assets	
Checking/Savings	
General Checking	-578.71
Savings	5,000.00
Trust	1,495.98
Total Checking/Savings	5,917 27
Other Current Assets	
Accrued 2010-11 Income	
Season Tickets	-625.00
Total Accrued 2010-11 Income	-625.00
Box Office Cash	200.00
Postal Fund	258.64
Prepaid 2010-11 Expense	
4th of July Booth	500.00
Fantastics Royalties & Scripts	1,903.75
Let Her Rip Royalties & Scripts	264.87
Our Town Royalties & Scripts	862.50
Same Time Royalties & Scripts	697.50
State Fair Royalties & Scripts	1,663.50
Total Prepaid 2010-11 Expense	5,892.12
Total Other Current Assets	5,725.76
Total Current Assets	11,643.03
Fixed Assets	
Theatre Building	135,590.00
Theatre Properties	10,520.00
Total Fixed Assets	146,110.00
Other Assets	
Reserved Funds	
Curtain Donations	-1,302.00
Kitchen Donations	-50.00
Memorial Donations	-225.00
Total Reserved Funds	-1,577.00
Total Other Assets	-1,577.00
TOTAL ASSETS	**156,176.03**
LIABILITIES & EQUITY	
Equity	
Opening Bal Equity	168,302.32
Net Income	-12,126 29
Total Equity	156,176.03
TOTAL LIABILITIES & EQUITY	**156,176.03**