

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

For calendar year 2020, or fiscal year beginning 2020, and ending 20

2020

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization or person subject to tax

RETRIEVING FREEDOM, INC.

Taxpayer identification number

45-3282513

Name and title of officer or person subject to tax

AL HOGEN
BOARD CHAIRMAN

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,237,210
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **WILSON TOELLNER CPA** to enter my PIN **82513** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax }

Date }

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

43550067465

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } **ALAINA GUMP, CPA** Date } **11/11/21**

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2020)

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2020

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

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

A For the 2020 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization RETRIEVING FREEDOM, INC.		D Employer identification number 45-3282513
	Doing business as		E Telephone number
	Number and street (or P.O. box if mail is not delivered to street address) 20360 TANGLE NOOK ROAD	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code SEDALIA MO 65301		G Gross receipts \$ 2,300,784
F Name and address of principal officer: AL HOGEN			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) () **t** (insert no.) 4947(a)(1) or 527

J Website: **u RETRIEVINGFREEDOM.ORG** **H(c)** Group exemption number **u**

K Form of organization: Corporation Trust Association Other **u** **L** Year of formation: **2011** **M** State of legal domicile: **MS**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: RETRIEVING FREEDOM EXISTS TO IMPROVE THE QUALITY OF LIFE FOR DISABLED VETERANS AND AUTISTIC CHILDREN THROUGH THE PLACEMENT OF SKILLED, TRAINED SERVICE AND THERAPY COMPANION DOGS.	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	7
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	17
	6 Total number of volunteers (estimate if necessary)	100
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 1,731,648 Current Year: 2,009,460
	9 Program service revenue (Part VIII, line 2g)	89,058 5,515
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-181,970 1,996
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	220,239
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,638,736 2,237,210
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	782,110 617,858
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0
	b Total fundraising expenses (Part IX, column (D), line 25) u	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	506,463 828,279
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,288,573 1,446,137	
19 Revenue less expenses. Subtract line 18 from line 12	350,163 791,073	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 4,634,383 End of Year: 5,533,030
	21 Total liabilities (Part X, line 26)	2,768,216 2,875,790
	22 Net assets or fund balances. Subtract line 21 from line 20	1,866,167 2,657,240

Part II Signature Block

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.

Sign Here	Signature of officer	Date
	AL HOGEN Type or print name and title	BOARD CHAIRMAN

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	ALAINA GUMP, CPA	ALAINA GUMP, CPA	11/15/21	<input checked="" type="checkbox"/>	P01015868
	Firm's name } WILSON TOELLNER CPA	Firm's EIN } 43-1909489			
Firm's address } 2729 BAGNELL DAM BLVD					
} LAKE OZARK, MO 65049		Phone no. 573-964-5739			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO CHANGE LIVES THROUGH THE TRAINING AND PLACEMENT OF SERVICE DOGS FOR VETERANS WITH DISABILITIES AND CHILDREN WITH AUTISM.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by 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 \$ **1,174,605** including grants of \$) (Revenue \$ **5,515**)

RETRIEVING FREEDOM'S PROGRAM FOCUSES ON TRAINING DOGS TO SERVE THE NEEDS OF DISABLED VETERANS AND CHILDREN WITH AUTISM. WE BREED AND TRAIN CHOSEN DOGS THAT EXHIBIT SPECIFIC TRAITS NECESSARY TO PERFORM TASKS TO HELP THESE INDIVIDUALS. EVEN DURING THE 2020 COVID PANDEMIC, RETRIEVING FREEDOM WAS ABLE TO PLACE 6 DOGS WITH FAMILIES WHO HAVE A CHILD WITH AUTISM AND 2 DOGS WITH VETERANS SUFFERING WITH PTSD, PHYSICAL OR MOBILITY ISSUES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **u 1,174,605**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	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>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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	17
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
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	X
b	If "Yes," enter the name of the foreign country u See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	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	
c	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	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
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:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
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:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
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	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
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? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
b	Enter the number of voting members included on line 1a, above, who are independent		
2	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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
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?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

HEATHER DAWSON
SEDALIA

P.O. BOX 2209

MO 65302

479-444-0555

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR. CLAY R. DAHLQUIST	2.00									
BOARD MEMBER	0.00	X		X			0	0	0	
(2) AL HOGEN	2.00									
BOARD CHAIRMAN	0.00	X		X			0	0	0	
(3) ROXIE NORRIS	2.00									
TREASURER	0.00	X		X			0	0	0	
(4) BOB BAIRD	2.00									
VICE CHAIRMAN	0.00	X					0	0	0	
(5) DAVE ROREM	2.00									
BOARD MEMBER	0.00	X					0	0	0	
(6) REGINA MASSEY	2.00									
BOARD MEMBER	0.00	X					0	0	0	
(7) BOBBY HAYDEN	2.00									
BOARD MEMBER	0.00	X					0	0	0	
(8) ROBERT RUSSELL	2.00									
BOARD MEMBER	0.00	X					0	0	0	
(9)										
(10)										
(11)										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	1,144,718			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	864,742			
	g Noncash contributions included in lines 1a-1f	1g	\$ 15,850			
	h Total. Add lines 1a-1f	u	2,009,460			
	Program Service Revenue	2a DOG PLACEMENT REVENUE	Business Code	5,515	5,515	
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f		u	5,515			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	1,408	1,408		
	4 Income from investment of tax-exempt bond proceeds	u				
	5 Royalties	u				
	6a Gross rents	(i) Real				
		(ii) Personal				
		6a				
	b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c				
	d Net rental income or (loss)	u				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other		20,486		
		7a				
	b Less: cost or other basis and sales exps.	7b		19,898		
	c Gain or (loss)	7c		588		
	d Net gain or (loss)	u	588	588		
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	239,542				
	b Less: direct expenses	8b	43,676			
c Net income or (loss) from fundraising events	u	195,866				
9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b				
c Net income or (loss) from gaming activities	u					
10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory	u					
Miscellaneous Revenue	11a MISCELLANEOUS	Business Code	24,373	24,373		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	u	24,373			
12 Total revenue. See instructions	u	2,237,210	31,884	0	0	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	484,380	315,719	168,661	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	44,932	29,303	15,629	
10 Payroll taxes	88,546	57,712	30,834	
11 Fees for services (nonemployees):				
a Management				
b Legal	3,473	2,431	1,042	
c Accounting	4,533	3,173	1,360	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	206,054	201,598	4,456	
12 Advertising and promotion	12,277		12,277	
13 Office expenses	29,241	23,986	5,255	
14 Information technology	22,195	16,002	6,193	
15 Royalties				
16 Occupancy	50,136	44,865	5,271	
17 Travel	21,383	16,871	4,512	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,716	2,583	1,133	
20 Interest	43,551	40,725	2,826	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	160,628	160,628		
23 Insurance	59,933	59,933		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DOG TRAINING AND PLACEMENT	66,667	66,667		
b BREEDING EXPENSES	28,455	28,455		
c REPAIRS AND MAINTENANCE	23,962	23,962		
d DUES & SUBSCRIPTIONS	17,569	11,836	5,733	
e All other expenses	74,506	68,156	6,350	
25 Total functional expenses. Add lines 1 through 24e	1,446,137	1,174,605	271,532	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	892,982	1	1,228,930
	2	Savings and temporary cash investments	132,002	2	131,143
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		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	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	47,920	8	357,680
	9	Prepaid expenses and deferred charges		9	5,518
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,081,484		
	b	Less: accumulated depreciation	10b 271,725	10c 3,552,429	3,809,759
	11	Investments—publicly traded securities	9,050	11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	4,634,383	16	5,533,030	
Liabilities	17	Accounts payable and accrued expenses	50,472	17	50,495
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other 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		22	
	23	Secured mortgages and notes payable to unrelated third parties	2,717,744	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	2,669,184
	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		25	156,111
	26	Total liabilities. Add lines 17 through 25	2,768,216	26	2,875,790
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	1,866,167	27	2,657,240
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	1,866,167	32	2,657,240
33	Total liabilities and net assets/fund balances	4,634,383	33	5,533,030	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,237,210
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,446,137
3	Revenue less expenses. Subtract line 2 from line 1	3	791,073
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,866,167
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,657,240

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

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.

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

RETRIEVING FREEDOM, INC.

Employer identification number

45-3282513

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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	360,339	611,205	1,062,475	1,731,648	2,009,460	5,775,127
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	360,339	611,205	1,062,475	1,731,648	2,009,460	5,775,127
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						5,775,127

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	360,339	611,205	1,062,475	1,731,648	2,009,460	5,775,127
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					1,408	1,408
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					263,915	263,915
11 Total support. Add lines 7 through 10						6,040,450

12 Gross receipts from related activities, etc. (see instructions) 12 778,459

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	95.61 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	100.00 %

16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, 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 Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations *(continued)*

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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.</i>		
1		
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? <i>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.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>		
2 Activities Test. <i>Answer lines 2a and 2b below.</i>		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "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.</i>	Yes	No
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "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.</i>		
2b		
3 Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections 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	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	
Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	
9 Distributable amount for 2020 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, 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 2020 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 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

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.)

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME \$ 24,373

FUNDRAISING \$ 239,542

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 B
 (Form 990, 990-EZ,
 or 990-PF)
 Department of the Treasury
 Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2020

u Attach to Form 990, Form 990-EZ, or Form 990-PF.
u Go to www.irs.gov/Form990 for the latest information.

Name of the organization RETRIEVING FREEDOM, INC.	Employer identification number 45-3282513
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Organization type (check one):

- Filers of:** **Section:**
- Form 990 or 990-EZ 501(c)(**3**) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33^{1/3}% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$

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

Name of organization

RETRIEVING FREEDOM, INC.

Employer identification number

45-3282513

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RUTH VANDEEST 1201 11TH ST GRUNDY CENTER IA 50638	\$ 43,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	HAYDEN FREEDOM FOUNDATION 1300 W HENRY ST SEDALIA MO 65301	\$ 289,255	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	JUDY RASMUSON 396 NE OATS AVE MADISON FL 32340	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	BARBARA HAYDEN 1300 W HENRY ST SEDALIA MO 65301	\$ 57,779	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	STARLINE BRASS 1300 W HENRY ST. SEDALIA MO 65301	\$ 134,622	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES 4301 JONES BRIDGE ROAD BETHESDA MD 20814-4799	\$ 989,818	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

RETRIEVING FREEDOM, INC.

Employer identification number

45-3282513

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two questions about donor advisement and grant fund usage.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, total number of easements, acreage restricted, number of easements on historic structures, and questions about monitoring, expenses, and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures and amounts required to be reported.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u**
- b** Permanent endowment **u**
- c** Term endowment **u**

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		147,000		147,000
b Buildings		3,525,827	175,449	3,350,378
c Leasehold improvements				
d Equipment		401,421	90,954	310,467
e Other		7,236	5,322	1,914
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)		u		3,809,759

Part VII Investments – Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	u	

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	u

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SBA EDIL LOAN	152,423
(3) CREDIT CARD PAYABLES	3,688
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	u 156,111

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

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

RETRIEVING FREEDOM, INC.

Employer identification number

45-3282513

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>GRAND OPENING -</u> (event type)	<u>INITIATIVES</u> (event type)	<u>3</u> (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	113,836	76,988	48,718	239,542
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	113,836	76,988	48,718	239,542
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	21,283	20,913	1,480	43,676
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Subtract line 10 from line 3, column (d)					195,866

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

u Attach to Form 990 or 990-EZ.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

RETRIEVING FREEDOM, INC.

Employer identification number

45-3282513

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
A COPY OF THE RETURN IS PROVIDED TO THE BOARD FOR THEIR REVIEW PRIOR TO
FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
BOARD MEMBERS ARE ASKED TO STATE ANY CONFLICTS OF INTEREST AT EVERY MONTHLY
BOARD MEETING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD DETERMINES THE SALARIES OF THE EXECUTIVE DIRECTOR. COMPARATIVE
DATA IS OBTAINED TO DETERMINE THE SALARIES, BASED UPON INDUSTRY STANDARDS,
JOB DUTIES PERFORMED, ETC.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE BOARD PROVIDED PARAMETERS FOR NEW HIRES IN EXECUTIVE POSITIONS.

FORM 990, PART VI, LINE 18 - NO PUBLIC DISCLOSURE EXPLANATION
FEDERAL FORM 990 ALSO PROVIDED THROUGH WWW.GUIDESTAR.ORG

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
NO DOCUMENTS AVAILABLE TO THE PUBLIC

FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES
DESCRIPTION

TOT/PROG SERVICE

MGT & GENERAL

FUNDRAISING

Name of the organization

Employer identification number

RETRIEVING FREEDOM, INC.

45-3282513

PROFESSIONAL FEES

\$ 10,498 \$ 4,456 \$ 0

VETERINARY SERVICES

\$ 191,100 \$ 0 \$ 0

TOTAL

\$ 201,598 \$ 4,456 \$ 0

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2020

Attachment Sequence No. **179**

Name(s) shown on return

RETRIEVING FREEDOM, INC.

Identifying number

45-3282513

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,040,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,590,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	149,492

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	11,136
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	160,628
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				24b If "Yes," is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							25	
26 Property used more than 50% in a qualified business use:								
2020	CHEVROLET	EQUINOX LT						
	02/01/20	100.00 %	31,940	31,940	5.0	S/L-	5,856	
2020	CHEVY	EQUINOX LT						
	02/01/20	100.00 %	28,800	28,800	5.0	S/L-	5,280	
27 Property used 50% or less in a qualified business use:								
		%				S/L-		
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	11,136
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		X
39 Do you treat all use of vehicles by employees as personal use?		X
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		X
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		X

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2020 tax year (see instructions):					
43 Amortization of costs that began before your 2020 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

45-3282513

Federal Asset Report

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
1	Video Equipment	6/01/14	2,600			2,600	5 MO S/L	2,600	0
2	Training Tables	6/01/14	340			340	5 MO S/L	340	0
3	McCrays Furniture	1/23/15	749			749	5 MO S/L	737	12
4	Pet Dot Com	1/23/15	1,779			1,779	5 MO S/L	1,749	30
5	Best Buy	4/20/15	96			96	5 MO S/L	90	6
6	Chad Shepard	4/20/15	777			777	5 MO S/L	725	52
7	Best Buy	5/11/15	2,787			2,787	5 MO S/L	2,601	186
8	Miller Fence	7/01/15	4,587			4,587	7 MO S/L	2,949	655
9	Daron's Cabin Furniture	6/01/15	1,296			1,296	5 MO S/L	1,188	108
10	North Building	6/27/15	518,844			518,844	40 MO S/L	58,370	12,971
11	Land - Waverly, Iowa	6/27/15	25,000			25,000	0 -- Land	0	0
12	Kennels - South	2/22/16	4,340			4,340	7 MO S/L	2,377	620
13	2016 Breeding Dogs	6/01/16	3,300			3,300	7 MO S/L	1,762	471
14	Amazon	2/11/16	596			596	7 MO S/L	333	85
15	Aces Furniture	8/10/16	1,118			1,118	7 MO S/L	546	160
16	Doug's Heating	12/12/16	1,164			1,164	7 MO S/L	513	166
17	North Building Improvements	2/22/16	3,569			3,569	40 MO S/L	342	89
18	North Kennel Additions	2/16/16	7,504			7,504	10 MO S/L	2,877	750
19	North Kennel Wall Project	3/31/17	17,065			17,065	15 MO S/L	3,129	1,138
20	2017 Breeding Dogs	6/01/17	1,736			1,736	7 MO S/L	641	248
21	Darons' Cabin Furniture	3/01/17	128			128	5 MO S/L	73	26
22	Flag Pole	10/11/17	749			749	15 MO S/L	112	50
23	South Kitchen & LR Tables	11/13/17	850			850	5 MO S/L	368	0
	Sold/Scrapped: 1/01/20								
24	Mason Company	3/01/17	1,101			1,101	5 MO S/L	624	220
25	Gander Mountain Table Chairs	7/17/17	145			145	5 MO S/L	70	29
26	South Building Kennels	12/06/17	4,347			4,347	15 MO S/L	604	290
27	Furniture & Fixtures	6/01/18	7,384			7,384	7 MO S/L	1,670	1,055
28	South Building Kennels	6/01/18	23,738			23,738	7 MO S/L	5,369	3,391
29	MO Land	11/05/18	122,000			122,000	0 -- Land	0	0
30	2018 Breeding Dogs	1/11/18	300			300	7 MO S/L	86	43
	Sold/Scrapped: 12/31/20								
31	Bailey Laptop	7/18/19	385			385	3 MO S/L	53	128
32	Chevy Equinox	4/30/19	26,309			26,309	5 MO S/L	3,508	3,946
	Casualty/Theft: 10/12/20								
33	Truck	5/06/19	37,038			37,038	5 MO S/L	4,938	7,408
34	Truck #2	5/10/19	34,600			34,600	5 MO S/L	4,613	6,920
35	3 Laptops	6/10/19	1,109			1,109	3 MO S/L	216	370
36	Billy's Laptop	1/06/19	1,604			1,604	3 MO S/L	535	535
37	Heather's Laptop	2/17/19	806			806	5 MO S/L	134	161
38	Ace's Computer Purchase	1/30/19	1,151			1,151	3 MO S/L	352	384
39	Truck #3	7/19/19	35,963			35,963	5 MO S/L	2,997	7,193
40	MO- Kennels	10/23/19	21,064			21,064	5 MO S/L	702	4,213
41	MO Building	12/01/19	2,646,555			2,646,555	39 MO S/L	5,655	67,860
42	Security Computer System	12/01/19	3,150			3,150	7 MO S/L	38	450
43	Furniture & Fixtures	12/01/19	60,651			60,651	7 MO S/L	722	8,664
44	Lowe's Appliance	12/01/19	8,793			8,793	7 MO S/L	105	1,256
45	MO Furniture Company	12/01/19	9,717			9,717	7 MO S/L	116	1,388
46	Sally's Laptop	9/19/19	692			692	3 MO S/L	58	231
47	Phone System	12/01/19	1,551			1,551	7 MO S/L	18	222
48	2019 Breeding Dogs	6/01/19	2,200			2,200	5 MO S/L	2,011	189
49	Premier Furniture	12/31/19	12,030			12,030	7 MO S/L	0	1,719
50	Ainley Kennels Down Payment for Trailer	9/03/19	5,735			5,735	0 -- Memo	0	0
51	2017 Breeding Dogs - Retired	6/01/17	800			800	7 MO S/L	295	115
	Sold/Scrapped: 12/31/20								
52	2019 Breeding Dogs - Retired	6/01/19	5,200			5,200	5 MO S/L	4,752	448
	Sold/Scrapped: 12/31/20								
53	MO Building - Change Orders	2/10/20	140,463			140,463	39 MO S/L	0	3,301
54	Interior Signage	12/09/20	2,388			2,388	39 MO S/L	0	5
56	Dishman Trail	12/21/20	81,604			81,604	15 MO S/L	0	0
57	Iowa Facility Improvements	12/31/20	47,187			47,187	0 -- Memo	0	0
58	Furniture for MO	1/01/20	9,054			9,054	7 MO S/L	0	1,293
59	Washer & Dryer	1/02/20	882			882	7 MO S/L	0	126
60	Desk/Chair Set	1/02/20	547			547	7 MO S/L	0	78
61	Additional Kennel Work	1/06/20	328			328	7 MO S/L	0	47
62	MO Facility	1/06/20	930			930	7 MO S/L	0	133
63	MO Facility	1/06/20	318			318	7 MO S/L	0	45
64	MO Facility	1/07/20	633			633	7 MO S/L	0	90

45-3282513

Federal Asset Report

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
65	Compuer	1/08/20	652			652	5 MO S/L	0	130
66	Training Room Furniture	1/13/20	675			675	7 MO S/L	0	97
67	Desk & Chair	1/13/20	574			574	7 MO S/L	0	82
68	Cabinet	1/16/20	280			280	7 MO S/L	0	37
69	Desk	1/17/20	541			541	7 MO S/L	0	71
70	Power Washer	1/17/20	346			346	7 MO S/L	0	45
71	Storage Cabinets Cleaning	1/21/20	421			421	7 MO S/L	0	55
72	File Cabinets - Office 1	1/23/20	259			259	7 MO S/L	0	34
73	Table	1/29/20	276			276	7 MO S/L	0	36
74	*Ashley Home Store*	1/31/20	402			402	7 MO S/L	0	53
75	Docking Station/ Monitor	2/01/20	690			690	5 MO S/L	0	126
76	Chair Cart with Storage	2/03/20	950			950	7 MO S/L	0	124
77	Shelving for IA	2/03/20	273			273	7 MO S/L	0	36
78	Furniture for MO Facility	2/03/20	284			284	7 MO S/L	0	37
79	Console Tables for Hallway	2/07/20	548			548	7 MO S/L	0	72
80	Dog Training Stands (4)	2/09/20	598			598	7 MO S/L	0	78
81	AFIB Machine	2/11/20	1,595			1,595	5 MO S/L	0	292
82	Cart Organizers for Rooms	2/12/20	420			420	7 MO S/L	0	55
83	Grooming Table	2/12/20	401			401	7 MO S/L	0	53
84	Security System Upgrade	2/19/20	3,070			3,070	5 MO S/L	0	512
85	Security System IA	2/19/20	1,503			1,503	5 MO S/L	0	251
86	Security System IA	2/19/20	548			548	5 MO S/L	0	91
87	Kennel Crate	2/21/20	315			315	7 MO S/L	0	38
88	Furniture for Autism Room	2/21/20	529			529	7 MO S/L	0	63
89	Generator for MO Facility	2/24/20	1,203			1,203	7 MO S/L	0	143
90	White Board	3/16/20	397			397	7 MO S/L	0	43
91	Additional Parts for the Wash Sink in Kenn	3/17/20	400			400	7 MO S/L	0	43
93	Sitting Chair for Office	4/24/20	316			316	7 MO S/L	0	30
94	Desk Stands for Computers	4/29/20	334			334	5 MO S/L	0	45
95	Grooming Table	5/04/20	534			534	7 MO S/L	0	51
96	Updated Training Stands	5/07/20	1,078			1,078	7 MO S/L	0	103
97	Manual Binder Machine	5/11/20	1,000			1,000	5 MO S/L	0	133
98	Training Stands	5/13/20	1,257			1,257	7 MO S/L	0	120
99	Printer	5/18/20	280			280	5 MO S/L	0	33
100	Computer for KB	6/01/20	769			769	5 MO S/L	0	90
101	*Payment on Trailer*	6/09/20	12,563			12,563	5 MO S/L	0	1,466
102	Filing Cabinet System	6/09/20	628			628	7 MO S/L	0	52
103	TV for Training Room	6/22/20	330			330	5 MO S/L	0	33
104	10 New Computers	6/29/20	6,277			6,277	5 MO S/L	0	628
105	10 New Computers	6/29/20	6,277			6,277	5 MO S/L	0	628
106	Updated Computer	6/29/20	1,963			1,963	5 MO S/L	0	196
107	Go Pro Equipment	7/03/20	586			586	5 MO S/L	0	59
108	Drone	7/17/20	448			448	5 MO S/L	0	37
109	Go Pro for Facility and Event Use	7/21/20	410			410	5 MO S/L	0	34
110	Drone & Equipment	7/22/20	2,646			2,646	5 MO S/L	0	221
111	Go Pro	7/23/20	377			377	5 MO S/L	0	31
112	2 Go Pros	7/24/20	752			752	5 MO S/L	0	63
113	3 Monitors - Computer	7/30/20	847			847	5 MO S/L	0	71
114	Fire Proof File Cabinets	8/24/20	947			947	7 MO S/L	0	45
115	Desk Set for Iowa	8/31/20	2,948			2,948	7 MO S/L	0	140
116	Desks for Kennel Area	9/14/20	1,705			1,705	7 MO S/L	0	81
117	Over the Counter Storage Apt. Rooms	9/14/20	940			940	7 MO S/L	0	45
118	Desk and Cabinet for Iowa	9/16/20	1,725			1,725	7 MO S/L	0	62
119	Fire Proof File Cabinet for IA Facility	10/05/20	790			790	7 MO S/L	0	28
120	*Best Buy*	10/07/20	400			400	5 MO S/L	0	20
121	Camera for RD Events	10/07/20	2,315			2,315	5 MO S/L	0	116
122	Desk Console for IA	10/19/20	664			664	7 MO S/L	0	16
123	Chairs for Sitting Area	10/19/20	406			406	7 MO S/L	0	10
124	Additional Monitor	10/19/20	525			525	5 MO S/L	0	18
125	Additional Monitor for Security	10/23/20	376			376	5 MO S/L	0	13
126	Accent Furniture for Entryway	10/29/20	278			278	7 MO S/L	0	7
127	Grills for Facilities	11/04/20	1,091			1,091	5 MO S/L	0	36
128	Grills for Facilities	11/04/20	1,091			1,091	5 MO S/L	0	36
129	Powerchairs for Facilities	11/17/20	2,774			2,774	7 MO S/L	0	33
130	Updated Video Equipment	11/17/20	1,670			1,670	5 MO S/L	0	28
131	Power Chairs	11/18/20	1,909			1,909	7 MO S/L	0	23
132	*Portion of Camera Installs at IA*	11/25/20	1,132			1,132	5 MO S/L	0	19
133	Updated RD Computer	11/25/20	1,600			1,600	5 MO S/L	0	27
134	Computer for Keegan	11/25/20	1,011			1,011	5 MO S/L	0	17
135	Monitors for IA	11/30/20	846			846	5 MO S/L	0	14
136	Security Camera Installation	12/02/20	2,307			2,307	5 MO S/L	0	38

45-3282513

Federal Asset Report

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
137	Fridge	12/03/20	646			646	5 MO S/L	0	11
138	Fridge for the Kennels	12/07/20	616			616	5 MO S/L	0	10
139	File Cabinet	12/09/20	479			479	7 MO S/L	0	6
140	Crates	12/11/20	248			248	7 MO S/L	0	3
143	Kennel Crate Additions to Facility	12/18/20	678			678	7 MO S/L	0	0
144	Patio Set	12/29/20	700			700	7 MO S/L	0	0
145	AFIB Device	12/30/20	2,135			2,135	5 MO S/L	0	0
	Total Other Depreciation		<u>4,054,200</u>			<u>4,054,200</u>		<u>124,663</u>	<u>149,492</u>
	Total ACRS and Other Depreciation		<u>4,054,200</u>			<u>4,054,200</u>		<u>124,663</u>	<u>149,492</u>
Listed Property:									
146	2020 Chevrolet Equinox LT	2/01/20	31,940			31,940	5 MO S/L	0	5,856
147	2020 Chevy Equinox LT	2/01/20	28,800			28,800	5 MO S/L	0	5,280
			<u>60,740</u>			<u>60,740</u>		<u>0</u>	<u>11,136</u>
	Grand Totals		4,114,940			4,114,940		124,663	160,628
	Less: Dispositions and Transfers		33,459			33,459		9,009	4,552
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>4,081,481</u>			<u>4,081,481</u>		<u>115,654</u>	<u>156,076</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
1	Video Equipment	6/01/14	2,600	0	0
2	Training Tables	6/01/14	340	0	0
3	McCrays Furniture	1/23/15	749	0	0
4	Pet Dot Com	1/23/15	1,779	0	0
5	Best Buy	4/20/15	96	0	0
6	Chad Shepard	4/20/15	777	0	0
7	Best Buy	5/11/15	2,787	0	0
8	Miller Fence	7/01/15	4,587	656	0
9	Daron's Cabin Furniture	6/01/15	1,296	0	0
10	North Building	6/27/15	518,844	12,971	0
11	Land - Waverly, Iowa	6/27/15	25,000	0	0
12	Kennels - South	2/22/16	4,340	620	0
13	2016 Breeding Dogs	6/01/16	3,300	472	0
14	Amazon	2/11/16	596	85	0
15	Aces Furniture	8/10/16	1,118	159	0
16	Doug's Heating	12/12/16	1,164	167	0
17	North Building Improvements	2/22/16	3,569	89	0
18	North Kennel Additions	2/16/16	7,504	751	0
19	North Kennel Wall Project	3/31/17	17,065	1,137	0
20	2017 Breeding Dogs	6/01/17	1,736	248	0
21	Darons' Cabin Furniture	3/01/17	128	25	0
22	Flag Pole	10/11/17	749	50	0
24	Mason Company	3/01/17	1,101	220	0
25	Gander Mountain Table Chairs	7/17/17	145	29	0
26	South Building Kennels	12/06/17	4,347	290	0
27	Furniture & Fixtures	6/01/18	7,384	1,055	0
28	South Building Kennels	6/01/18	23,738	3,391	0
29	MO Land	11/05/18	122,000	0	0
31	Bailey Laptop	7/18/19	385	129	0
33	Truck	5/06/19	37,038	7,407	0
34	Truck #2	5/10/19	34,600	6,920	0
35	3 Laptops	6/10/19	1,109	369	0
36	Billy's Laptop	1/06/19	1,604	534	0
37	Heather's Laptop	2/17/19	806	161	0
38	Ace's Computer Purchase	1/30/19	1,151	383	0
39	Truck #3	7/19/19	35,963	7,192	0
40	MO- Kennels	10/23/19	21,064	4,213	0
41	MO Building	12/01/19	2,646,555	67,861	0
42	Security Computer System	12/01/19	3,150	450	0
43	Furniture & Fixtures	12/01/19	60,651	8,665	0
44	Lowe's Appliance	12/01/19	8,793	1,256	0
45	MO Furniture Company	12/01/19	9,717	1,388	0
46	Sally's Laptop	9/19/19	692	230	0
47	Phone System	12/01/19	1,551	221	0
48	2019 Breeding Dogs	6/01/19	2,200	0	0
49	Premier Furniture	12/31/19	12,030	1,718	0
50	Ainley Kennels Down Payment for Trailer	9/03/19	5,735	0	0
53	MO Building - Change Orders	2/10/20	140,463	3,602	0
54	Interior Signage	12/09/20	2,388	61	0
56	Dishman Trail	12/21/20	81,604	5,440	0
57	Iowa Facility Improvements	12/31/20	47,187	0	0
58	Furniture for MO	1/01/20	9,054	1,294	0
59	Washer & Dryer	1/02/20	882	126	0
60	Desk/Chair Set	1/02/20	547	78	0
61	Additional Kennel Work	1/06/20	328	47	0
62	MO Facility	1/06/20	930	133	0
63	MO Facility	1/06/20	318	46	0
64	MO Facility	1/07/20	633	91	0
65	Comupter	1/08/20	652	131	0
66	Training Room Furniture	1/13/20	675	96	0
67	Desk & Chair	1/13/20	574	82	0
68	Cabinet	1/16/20	280	40	0
69	Desk	1/17/20	541	77	0
70	Power Washer	1/17/20	346	50	0
71	Storage Cabinets Cleaning	1/21/20	421	60	0
72	File Cabinets - Office 1	1/23/20	259	37	0
73	Table	1/29/20	276	39	0

45-3282513

Future Depreciation Report**FYE: 12/31/21**

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
74	*Ashley Home Store*	1/31/20	402	57	0
75	Docking Station/ Monitor	2/01/20	690	138	0
76	Chair Cart with Storage	2/03/20	950	136	0
77	Shelving for IA	2/03/20	273	39	0
78	Furniture for MO Facility	2/03/20	284	41	0
79	Console Tables for Hallway	2/07/20	548	78	0
80	Dog Training Stands (4)	2/09/20	598	86	0
81	AFIB Machine	2/11/20	1,595	319	0
82	Cart Organizers for Rooms	2/12/20	420	60	0
83	Grooming Table	2/12/20	401	57	0
84	Security System Upgrade	2/19/20	3,070	614	0
85	Security System IA	2/19/20	1,503	300	0
86	Security System IA	2/19/20	548	110	0
87	Kennel Crate	2/21/20	315	45	0
88	Furniture for Autism Room	2/21/20	529	75	0
89	Generator for MO Facility	2/24/20	1,203	172	0
90	White Board	3/16/20	397	56	0
91	Additional Parts for the Wash Sink in Kennel	3/17/20	400	57	0
93	Sitting Chair for Office	4/24/20	316	45	0
94	Desk Stands for Computers	4/29/20	334	66	0
95	Grooming Table	5/04/20	534	76	0
96	Updated Training Stands	5/07/20	1,078	154	0
97	Manual Binder Machine	5/11/20	1,000	200	0
98	Training Stands	5/13/20	1,257	179	0
99	Printer	5/18/20	280	56	0
100	Computer for KB	6/01/20	769	154	0
101	*Payment on Trailer*	6/09/20	12,563	2,512	0
102	Filing Cabinet System	6/09/20	628	90	0
103	TV for Training Room	6/22/20	330	66	0
104	10 New Computers	6/29/20	6,277	1,255	0
105	10 New Computers	6/29/20	6,277	1,255	0
106	Updated Computer	6/29/20	1,963	393	0
107	Go Pro Equipment	7/03/20	586	117	0
108	Drone	7/17/20	448	90	0
109	Go Pro for Facility and Event Use	7/21/20	410	82	0
110	Drone & Equipment	7/22/20	2,646	529	0
111	Go Pro	7/23/20	377	76	0
112	2 Go Pros	7/24/20	752	150	0
113	3 Monitors - Computer	7/30/20	847	169	0
114	Fire Proof File Cabinets	8/24/20	947	135	0
115	Desk Set for Iowa	8/31/20	2,948	422	0
116	Desks for Kennel Area	9/14/20	1,705	244	0
117	Over the Counter Storage Apt. Rooms	9/14/20	940	134	0
118	Desk and Cabinet for Iowa	9/16/20	1,725	246	0
119	Fire Proof File Cabinet for IA Facility	10/05/20	790	113	0
120	*Best Buy*	10/07/20	400	80	0
121	Camera for RD Events	10/07/20	2,315	463	0
122	Desk Console for IA	10/19/20	664	95	0
123	Chairs for Sitting Area	10/19/20	406	58	0
124	Additional Monitor	10/19/20	525	105	0
125	Additional Monitor for Security	10/23/20	376	75	0
126	Accent Furniture for Entryway	10/29/20	278	39	0
127	Grills for Facilities	11/04/20	1,091	219	0
128	Grills for Facilities	11/04/20	1,091	219	0
129	Powerchairs for Facilities	11/17/20	2,774	396	0
130	Updated Video Equipment	11/17/20	1,670	334	0
131	Power Chairs	11/18/20	1,909	272	0
132	*Portion of Camera Installs at IA*	11/25/20	1,132	226	0
133	Updated RD Computer	11/25/20	1,600	320	0
134	Computer for Keegan	11/25/20	1,011	202	0
135	Monitors for IA	11/30/20	846	169	0
136	Security Camera Installation	12/02/20	2,307	462	0
137	Fridge	12/03/20	646	129	0
138	Fridge for the Kennels	12/07/20	616	124	0
139	File Cabinet	12/09/20	479	68	0
140	Crates	12/11/20	248	35	0
143	Kennel Crate Additions to Facility	12/18/20	678	97	0
144	Patio Set	12/29/20	700	100	0
145	AFIB Device	12/30/20	2,135	427	0

Future Depreciation Report**FYE: 12/31/21****Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
	Total Other Depreciation		<u>4,020,741</u>	<u>159,204</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>4,020,741</u>	<u>159,204</u>	<u>0</u>
Listed Property:					
146	2020 Chevrolet Equinox LT	2/01/20	31,940	6,388	0
147	2020 Chevy Equinox LT	2/01/20	28,800	5,760	0
			<u>60,740</u>	<u>12,148</u>	<u>0</u>
	Grand Totals		<u>4,081,481</u>	<u>171,352</u>	<u>0</u>

Tax Asset Detail 1/01/20 - 12/31/20

FYE: 12/31/2020

Asset	d t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group:												
23	d	South Kitchen & LR Tables	11/13/17	850.00	0.00	0.00	368.00	0.00	368.00	482.00	S/L	5.00
50		Ainley Kennels Down Payment for T	9/03/19	5,735.00	0.00	0.00	0.00	0.00	0.00	5,735.00	Memo	0.00
				No Group	6,585.00	0.00c	0.00	368.00	0.00	368.00	6,217.00	
				*Less: Dispositions and Transfers	850.00	0.00	0.00	368.00	0.00	368.00	482.00	
				Net No Group	<u>5,735.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>5,735.00</u>		
Group: 1201 Furniture & Equip												
1		Video Equipment	6/01/14	2,600.00	0.00	0.00	2,600.00	0.00	2,600.00	0.00	S/L	5.00
2		Training Tables	6/01/14	340.00	0.00	0.00	340.00	0.00	340.00	0.00	S/L	5.00
3		McCrarys Furniture	1/23/15	749.00	0.00	0.00	737.00	12.00	749.00	0.00	S/L	5.00
4		Pet Dot Com	1/23/15	1,779.00	0.00	0.00	1,749.00	30.00	1,779.00	0.00	S/L	5.00
5		Best Buy	4/20/15	96.00	0.00	0.00	90.00	6.00	96.00	0.00	S/L	5.00
6		Chad Shepard	4/20/15	777.00	0.00	0.00	725.00	52.00	777.00	0.00	S/L	5.00
7		Best Buy	5/11/15	2,787.00	0.00	0.00	2,601.00	186.00	2,787.00	0.00	S/L	5.00
8		Miller Fence	7/01/15	4,587.00	0.00	0.00	2,949.00	655.29	3,604.29	982.71	S/L	7.00
14		Amazon	2/11/16	596.00	0.00	0.00	333.00	85.14	418.14	177.86	S/L	7.00
15		Aces Furniture	8/10/16	1,118.00	0.00	0.00	546.00	159.71	705.71	412.29	S/L	7.00
16		Doug's Heating	12/12/16	1,164.00	0.00	0.00	513.00	166.29	679.29	484.71	S/L	7.00
22		Flag Pole	10/11/17	749.00	0.00	0.00	112.00	49.93	161.93	587.07	S/L	15.00
24		Mason Company	3/01/17	1,101.00	0.00	0.00	624.00	220.20	844.20	256.80	S/L	5.00
25		Gander Mountain Table Chairs	7/17/17	145.00	0.00	0.00	70.00	29.00	99.00	46.00	S/L	5.00
27		Furniture & Fixtures	6/01/18	7,384.00	0.00	0.00	1,670.00	1,054.86	2,724.86	4,659.14	S/L	7.00
31		Bailey Laptop	7/18/19	385.00	0.00	0.00	53.00	128.33	181.33	203.67	S/L	3.00
35		3 Laptops	6/10/19	1,109.00	0.00	0.00	216.00	369.67	585.67	523.33	S/L	3.00
36		Billy's Laptop	1/06/19	1,604.00	0.00	0.00	535.00	534.67	1,069.67	534.33	S/L	3.00
37		Heather's Laptop	2/17/19	806.00	0.00	0.00	134.00	161.20	295.20	510.80	S/L	5.00
38		Ace's Computer Purchase	1/30/19	1,151.00	0.00	0.00	352.00	383.67	735.67	415.33	S/L	3.00
42		Security Computer System	12/01/19	3,150.00	0.00	0.00	38.00	450.00	488.00	2,662.00	S/L	7.00
43		Furniture & Fixtures	12/01/19	60,651.00	0.00	0.00	722.00	8,664.43	9,386.43	51,264.57	S/L	7.00
44		Lowe's Appliance	12/01/19	8,793.00	0.00	0.00	105.00	1,256.14	1,361.14	7,431.86	S/L	7.00
45		MO Furniture Company	12/01/19	9,717.00	0.00	0.00	116.00	1,388.14	1,504.14	8,212.86	S/L	7.00
46		Sally's Laptop	9/19/19	692.00	0.00	0.00	58.00	230.67	288.67	403.33	S/L	3.00
47		Phone System	12/01/19	1,551.00	0.00	0.00	18.00	221.57	239.57	1,311.43	S/L	7.00
49		Premier Furniture	12/31/19	12,030.00	0.00	0.00	0.00	1,718.57	1,718.57	10,311.43	S/L	7.00
58		Furniture for MO	1/01/20	9,054.20	0.00c	0.00	0.00	1,293.46	1,293.46	7,760.74	S/L	7.00
59		Washer & Dryer	1/02/20	881.69	0.00c	0.00	0.00	125.96	125.96	755.73	S/L	7.00
60		Desk/Chair Set	1/02/20	547.17	0.00c	0.00	0.00	78.17	78.17	469.00	S/L	7.00
61		Additional Kennel Work	1/06/20	327.83	0.00c	0.00	0.00	46.83	46.83	281.00	S/L	7.00
62		MO Facility	1/06/20	930.34	0.00c	0.00	0.00	132.91	132.91	797.43	S/L	7.00
63		MO Facility	1/06/20	317.99	0.00c	0.00	0.00	45.43	45.43	272.56	S/L	7.00
64		MO Facility	1/07/20	632.84	0.00c	0.00	0.00	90.41	90.41	542.43	S/L	7.00
65		Computer	1/08/20	651.58	0.00c	0.00	0.00	130.32	130.32	521.26	S/L	5.00
66		Training Room Furniture	1/13/20	675.48	0.00c	0.00	0.00	96.50	96.50	578.98	S/L	7.00
67		Desk & Chair	1/13/20	573.55	0.00c	0.00	0.00	81.94	81.94	491.61	S/L	7.00
68		Cabinet	1/16/20	279.95	0.00c	0.00	0.00	36.66	36.66	243.29	S/L	7.00
69		Desk	1/17/20	540.67	0.00c	0.00	0.00	70.80	70.80	469.87	S/L	7.00

Tax Asset Detail 1/01/20 - 12/31/20

FYE: 12/31/2020

Asset	d t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: 1201 Furniture & Equip (continued)												
70		Power Washer	1/17/20	345.72	0.00c	0.00	0.00	45.27	45.27	300.45	S/L	7.00
71		Storage Cabinets Cleaning	1/21/20	420.85	0.00c	0.00	0.00	55.11	55.11	365.74	S/L	7.00
72		File Cabinets - Office 1	1/23/20	259.39	0.00c	0.00	0.00	33.97	33.97	225.42	S/L	7.00
73		Table	1/29/20	275.64	0.00c	0.00	0.00	36.10	36.10	239.54	S/L	7.00
74		*Ashley Home Store*	1/31/20	402.47	0.00c	0.00	0.00	52.70	52.70	349.77	S/L	7.00
75		Docking Station/ Monitor	2/01/20	689.65	0.00c	0.00	0.00	126.44	126.44	563.21	S/L	5.00
76		Chair Cart with Storage	2/03/20	950.33	0.00c	0.00	0.00	124.45	124.45	825.88	S/L	7.00
77		Shelving for IA	2/03/20	272.65	0.00c	0.00	0.00	35.70	35.70	236.95	S/L	7.00
78		Furniture for MO Facility	2/03/20	284.10	0.00c	0.00	0.00	37.20	37.20	246.90	S/L	7.00
79		Console Tables for Hallway	2/07/20	548.03	0.00c	0.00	0.00	71.77	71.77	476.26	S/L	7.00
80		Dog Training Stands (4)	2/09/20	598.00	0.00c	0.00	0.00	78.31	78.31	519.69	S/L	7.00
81		AFIB Machine	2/11/20	1,595.00	0.00c	0.00	0.00	292.42	292.42	1,302.58	S/L	5.00
82		Cart Organizers for Rooms	2/12/20	419.97	0.00c	0.00	0.00	55.00	55.00	364.97	S/L	7.00
83		Grooming Table	2/12/20	401.44	0.00c	0.00	0.00	52.57	52.57	348.87	S/L	7.00
84		Security System Upgrade	2/19/20	3,070.45	0.00c	0.00	0.00	511.74	511.74	2,558.71	S/L	5.00
85		Security System IA	2/19/20	1,503.43	0.00c	0.00	0.00	250.57	250.57	1,252.86	S/L	5.00
86		Security System IA	2/19/20	548.00	0.00c	0.00	0.00	91.33	91.33	456.67	S/L	5.00
87		Kennel Crate	2/21/20	315.22	0.00c	0.00	0.00	37.53	37.53	277.69	S/L	7.00
88		Furniture for Autism Room	2/21/20	528.53	0.00c	0.00	0.00	62.92	62.92	465.61	S/L	7.00
89		Generator for MO Facility	2/24/20	1,203.30	0.00c	0.00	0.00	143.25	143.25	1,060.05	S/L	7.00
90		White Board	3/16/20	397.11	0.00c	0.00	0.00	42.55	42.55	354.56	S/L	7.00
91		Additional Parts for the Wash Sink in	3/17/20	400.00	0.00c	0.00	0.00	42.86	42.86	357.14	S/L	7.00
93		Sitting Chair for Office	4/24/20	316.42	0.00c	0.00	0.00	30.14	30.14	286.28	S/L	7.00
94		Desk Stands for Computers	4/29/20	334.46	0.00c	0.00	0.00	44.59	44.59	289.87	S/L	5.00
95		Grooming Table	5/04/20	533.55	0.00c	0.00	0.00	50.81	50.81	482.74	S/L	7.00
96		Updated Training Stands	5/07/20	1,077.50	0.00c	0.00	0.00	102.62	102.62	974.88	S/L	7.00
97		Manual Binder Machine	5/11/20	1,000.00	0.00c	0.00	0.00	133.33	133.33	866.67	S/L	5.00
98		Training Stands	5/13/20	1,256.89	0.00c	0.00	0.00	119.70	119.70	1,137.19	S/L	7.00
99		Printer	5/18/20	279.83	0.00c	0.00	0.00	32.65	32.65	247.18	S/L	5.00
100		Computer for KB	6/01/20	769.36	0.00c	0.00	0.00	89.76	89.76	679.60	S/L	5.00
101		*Payment on Trailer*	6/09/20	12,563.10	0.00c	0.00	0.00	1,465.70	1,465.70	11,097.40	S/L	5.00
102		Filing Cabinet System	6/09/20	628.19	0.00c	0.00	0.00	52.35	52.35	575.84	S/L	7.00
103		TV for Training Room	6/22/20	330.09	0.00c	0.00	0.00	33.01	33.01	297.08	S/L	5.00
104		10 New Computers	6/29/20	6,277.05	0.00c	0.00	0.00	627.71	627.71	5,649.34	S/L	5.00
105		10 New Computers	6/29/20	6,277.05	0.00c	0.00	0.00	627.71	627.71	5,649.34	S/L	5.00
106		Updated Computer	6/29/20	1,963.16	0.00c	0.00	0.00	196.32	196.32	1,766.84	S/L	5.00
107		Go Pro Equipment	7/03/20	585.61	0.00c	0.00	0.00	58.56	58.56	527.05	S/L	5.00
108		Drone	7/17/20	448.26	0.00c	0.00	0.00	37.36	37.36	410.90	S/L	5.00
109		Go Pro for Facility and Event Use	7/21/20	409.99	0.00c	0.00	0.00	34.17	34.17	375.82	S/L	5.00
110		Drone & Equipment	7/22/20	2,646.40	0.00c	0.00	0.00	220.53	220.53	2,425.87	S/L	5.00
111		Go Pro	7/23/20	376.75	0.00c	0.00	0.00	31.40	31.40	345.35	S/L	5.00
112		2 Go Pros	7/24/20	751.92	0.00c	0.00	0.00	62.66	62.66	689.26	S/L	5.00
113		3 Monitors - Computer	7/30/20	846.76	0.00c	0.00	0.00	70.56	70.56	776.20	S/L	5.00
114		Fire Proof File Cabinets	8/24/20	946.80	0.00c	0.00	0.00	45.09	45.09	901.71	S/L	7.00
115		Desk Set for Iowa	8/31/20	2,948.00	0.00c	0.00	0.00	140.38	140.38	2,807.62	S/L	7.00
116		Desks for Kennel Area	9/14/20	1,705.09	0.00c	0.00	0.00	81.19	81.19	1,623.90	S/L	7.00
117		Over the Counter Storage Apt. Room	9/14/20	939.53	0.00c	0.00	0.00	44.74	44.74	894.79	S/L	7.00
118		Desk and Cabinet for Iowa	9/16/20	1,724.60	0.00c	0.00	0.00	61.59	61.59	1,663.01	S/L	7.00
119		Fire Proof File Cabinet for IA Facility	10/05/20	789.89	0.00c	0.00	0.00	28.21	28.21	761.68	S/L	7.00

Tax Asset Detail 1/01/20 - 12/31/20

Asset	d t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: 1201 Furniture & Equip (continued)												
120		*Best Buy*	10/07/20	399.99	0.00c	0.00	0.00	20.00	20.00	379.99	S/L	5.00
121		Camera for RD Events	10/07/20	2,314.94	0.00c	0.00	0.00	115.75	115.75	2,199.19	S/L	5.00
122		Desk Console for IA	10/19/20	664.48	0.00c	0.00	0.00	15.82	15.82	648.66	S/L	7.00
123		Chairs for Sitting Area	10/19/20	405.96	0.00c	0.00	0.00	9.67	9.67	396.29	S/L	7.00
124		Additional Monitor	10/19/20	524.98	0.00c	0.00	0.00	17.50	17.50	507.48	S/L	5.00
125		Additional Monitor for Security	10/23/20	376.41	0.00c	0.00	0.00	12.55	12.55	363.86	S/L	5.00
126		Accent Furniture for Entryway	10/29/20	278.39	0.00c	0.00	0.00	6.63	6.63	271.76	S/L	7.00
127		Grills for Facilities	11/04/20	1,091.42	0.00c	0.00	0.00	36.38	36.38	1,055.04	S/L	5.00
128		Grills for Facilities	11/04/20	1,091.42	0.00c	0.00	0.00	36.38	36.38	1,055.04	S/L	5.00
129		Powerchairs for Facilities	11/17/20	2,774.00	0.00c	0.00	0.00	33.02	33.02	2,740.98	S/L	7.00
130		Updated Video Equipment	11/17/20	1,669.66	0.00c	0.00	0.00	27.83	27.83	1,641.83	S/L	5.00
131		Power Chairs	11/18/20	1,908.82	0.00c	0.00	0.00	22.72	22.72	1,886.10	S/L	7.00
132		*Portion of Camera Installs at IA*	11/25/20	1,132.49	0.00c	0.00	0.00	18.87	18.87	1,113.62	S/L	5.00
133		Updated RD Computer	11/25/20	1,599.99	0.00c	0.00	0.00	26.67	26.67	1,573.32	S/L	5.00
134		Computer for Keegan	11/25/20	1,010.80	0.00c	0.00	0.00	16.85	16.85	993.95	S/L	5.00
135		Monitors for IA	11/30/20	846.22	0.00c	0.00	0.00	14.10	14.10	832.12	S/L	5.00
136		Security Camera Installation	12/02/20	2,307.00	0.00c	0.00	0.00	38.45	38.45	2,268.55	S/L	5.00
137		Fridge	12/03/20	646.26	0.00c	0.00	0.00	10.77	10.77	635.49	S/L	5.00
138		Fridge for the Kennels	12/07/20	616.38	0.00c	0.00	0.00	10.27	10.27	606.11	S/L	5.00
139		File Cabinet	12/09/20	479.00	0.00c	0.00	0.00	5.70	5.70	473.30	S/L	7.00
140		Crates	12/11/20	248.27	0.00c	0.00	0.00	2.96	2.96	245.31	S/L	7.00
143		Kennel Crate Additions to Facility	12/18/20	678.23	0.00c	0.00	0.00	0.00	0.00	678.23	S/L	7.00
144		Patio Set	12/29/20	700.22	0.00c	0.00	0.00	0.00	0.00	700.22	S/L	7.00
145		AFIB Device	12/30/20	2,134.65	0.00c	0.00	0.00	0.00	0.00	2,134.65	S/L	5.00
1201 Furniture & Equip				233,079.80	0.00c	0.00	18,006.00	27,744.36	45,750.36	187,329.44		
Group: 1204 Breeding Dogs												
13		2016 Breeding Dogs	6/01/16	3,300.00	0.00	0.00	1,762.00	471.43	2,233.43	1,066.57	S/L	7.00
20		2017 Breeding Dogs	6/01/17	1,736.00	0.00	0.00	640.73	248.00	888.73	847.27	S/L	7.00
30	d	2018 Breeding Dogs	1/11/18	300.00	0.00	0.00	86.00	42.86	128.86	171.14	S/L	7.00
48		2019 Breeding Dogs	6/01/19	2,200.00	0.00	0.00	2,010.62	189.38	2,200.00	0.00	S/L	5.00
51	d	2017 Breeding Dogs - Retired	6/01/17	800.00	0.00	0.00	295.27	114.29	409.56	390.44	S/L	7.00
52	d	2019 Breeding Dogs - Retired	6/01/19	5,200.00	0.00	0.00	4,752.38	447.62	5,200.00	0.00	S/L	5.00
1204 Breeding Dogs				13,536.00	0.00c	0.00	9,547.00	1,513.58	11,060.58	2,475.42		
*Less: Dispositions and Transfers				6,300.00	0.00	0.00	5,133.65	0.00	5,738.42	561.58		
Net 1204 Breeding Dogs				7,236.00	0.00c	0.00	4,413.35	1,513.58	5,322.16	1,913.84		
Group: 1205 Daron's Cabin												
9		Daron's Cabin Furniture	6/01/15	1,296.00	0.00	0.00	1,188.00	108.00	1,296.00	0.00	S/L	5.00
21		Darons' Cabin Furniture	3/01/17	128.00	0.00	0.00	73.00	25.60	98.60	29.40	S/L	5.00
1205 Daron's Cabin				1,424.00	0.00c	0.00	1,261.00	133.60	1,394.60	29.40		

Tax Asset Detail 1/01/20 - 12/31/20

Asset	d t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: 1207 Kennel Additions- MO												
40		MO- Kennels	10/23/19	21,064.00	0.00	0.00	702.00	4,212.80	4,914.80	16,149.20	S/L	5.00
		1207 Kennel Additions- MO		<u>21,064.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>702.00</u>	<u>4,212.80</u>	<u>4,914.80</u>	<u>16,149.20</u>		
Group: 1208 Land												
11		Land - Waverly, Iowa	6/27/15	25,000.00	0.00	0.00	0.00	0.00	0.00	25,000.00	Land	0.00
		1208 Land		<u>25,000.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>25,000.00</u>		
Group: 1209 MO Building												
41		MO Building	12/01/19	2,646,555.00	0.00	0.00	5,655.00	67,860.38	73,515.38	2,573,039.62	S/L	39.00
53		MO Building - Change Orders	2/10/20	140,462.65	0.00c	0.00	0.00	3,301.47	3,301.47	137,161.18	S/L	39.00
54		Interior Signage	12/09/20	2,387.98	0.00c	0.00	0.00	5.10	5.10	2,382.88	S/L	39.00
		1209 MO Building		<u>2,789,405.63</u>	<u>0.00c</u>	<u>0.00</u>	<u>5,655.00</u>	<u>71,166.95</u>	<u>76,821.95</u>	<u>2,712,583.68</u>		
Group: 1210 MO Land												
29		MO Land	11/05/18	122,000.00	0.00	0.00	0.00	0.00	0.00	122,000.00	Land	0.00
		1210 MO Land		<u>122,000.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>122,000.00</u>		
Group: 1211 North Building												
10		North Building	6/27/15	518,844.00	0.00	0.00	58,370.00	12,971.10	71,341.10	447,502.90	S/L	40.00
17		North Building Improvements	2/22/16	3,569.00	0.00	0.00	342.00	89.23	431.23	3,137.77	S/L	40.00
		1211 North Building		<u>522,413.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>58,712.00</u>	<u>13,060.33</u>	<u>71,772.33</u>	<u>450,640.67</u>		
Group: 1213 North Kennel Additio												
18		North Kennel Additions	2/16/16	7,504.00	0.00	0.00	2,877.00	750.40	3,627.40	3,876.60	S/L	10.00
19		North Kennel Wall Project	3/31/17	17,065.00	0.00	0.00	3,129.00	1,137.67	4,266.67	12,798.33	S/L	15.00
		1213 North Kennel Additio		<u>24,569.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>6,006.00</u>	<u>1,888.07</u>	<u>7,894.07</u>	<u>16,674.93</u>		
Group: 1215 South Building Kenne												
26		South Building Kennels	12/06/17	4,347.00	0.00	0.00	604.00	289.80	893.80	3,453.20	S/L	15.00
28		South Building Kennels	6/01/18	23,738.00	0.00	0.00	5,369.00	3,391.14	8,760.14	14,977.86	S/L	7.00
		1215 South Building Kenne		<u>28,085.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>5,973.00</u>	<u>3,680.94</u>	<u>9,653.94</u>	<u>18,431.06</u>		
Group: 1216 South Kennel Add												
12		Kennels - South	2/22/16	4,340.00	0.00	0.00	2,377.00	620.00	2,997.00	1,343.00	S/L	7.00
		1216 South Kennel Add		<u>4,340.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>2,377.00</u>	<u>620.00</u>	<u>2,997.00</u>	<u>1,343.00</u>		

Tax Asset Detail 1/01/20 - 12/31/20

Asset	d t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: 1217 Vehicles												
32	d	Chevy Equinox	4/30/19	26,309.00	0.00	0.00	3,508.00	3,946.35	7,454.35	18,854.65	S/L	5.00
33		Truck	5/06/19	37,038.00	0.00	0.00	4,938.00	7,407.60	12,345.60	24,692.40	S/L	5.00
34		Truck #2	5/10/19	34,600.00	0.00	0.00	4,613.00	6,920.00	11,533.00	23,067.00	S/L	5.00
39		Truck #3	7/19/19	35,963.00	0.00	0.00	2,997.00	7,192.60	10,189.60	25,773.40	S/L	5.00
146		2020 Chevrolet Equinox LT	2/01/20	31,940.42	0.00c	0.00	0.00	5,855.74	5,855.74	26,084.68	S/L	5.00
147		2020 Chevy Equinox LT	2/01/20	28,799.50	0.00c	0.00	0.00	5,279.91	5,279.91	23,519.59	S/L	5.00
		1217 Vehicles		194,649.92	0.00c	0.00	16,056.00	36,602.20	52,658.20	141,991.72		
		*Less: Dispositions and Transfers		26,309.00	0.00	0.00	3,508.00	0.00	7,454.35	18,854.65		
		Net 1217 Vehicles		168,340.92	0.00c	0.00	12,548.00	36,602.20	45,203.85	123,137.07		
Group: 1230 Dishman Trail												
56		Dishman Trail	12/21/20	81,603.55	0.00c	0.00	0.00	0.00	0.00	81,603.55	S/L	15.00
		1230 Dishman Trail		81,603.55	0.00c	0.00	0.00	0.00	0.00	81,603.55		
Group: 1235 IA Facility												
57		Iowa Facility Improvements	12/31/20	47,187.10	0.00c	0.00	0.00	0.00	0.00	47,187.10	Memo	0.00
		1235 IA Facility		47,187.10	0.00c	0.00	0.00	0.00	0.00	47,187.10		
		Grand Total		4,114,942.00	0.00c	0.00	124,663.00	160,622.83	285,285.83	3,829,656.17		
		Less: Dispositions and Transfers		33,459.00	0.00	0.00	9,009.65	0.00	13,560.77	19,898.23		
		Net Grand Total		4,081,483.00	0.00c	0.00	115,653.35	160,622.83	271,725.06	3,809,757.94		

Tax Yearly Comparative Depr

FYE: 12/31/2020

Asset	Property Description	12/31/20	12/31/21	12/31/22	12/31/23	12/31/24	12/31/25	12/31/26
Group: 1201 Furniture & Equip (continued)								
123	Chairs for Sitting Area	9.67	57.99	57.99	57.99	57.99	57.99	57.99
124	Additional Monitor	17.50	105.00	105.00	105.00	105.00	87.48	0.00
125	Additional Monitor for Security	12.55	75.28	75.28	75.28	75.28	62.74	0.00
126	Accent Furniture for Entryway	6.63	39.77	39.77	39.77	39.77	39.77	39.77
127	Grills for Facilities	36.38	218.28	218.28	218.28	218.28	181.92	0.00
128	Grills for Facilities	36.38	218.28	218.28	218.28	218.28	181.92	0.00
129	Powerchairs for Facilities	33.02	396.29	396.29	396.29	396.29	396.29	396.29
130	Updated Video Equipment	27.83	333.93	333.93	333.93	333.93	306.11	0.00
131	Power Chairs	22.72	272.69	272.69	272.69	272.69	272.69	272.69
132	*Portion of Camera Installs at IA*	18.87	226.50	226.50	226.50	226.50	207.62	0.00
133	Updated RD Computer	26.67	320.00	320.00	320.00	320.00	293.32	0.00
134	Computer for Keegan	16.85	202.16	202.16	202.16	202.16	185.31	0.00
135	Monitors for IA	14.10	169.24	169.24	169.24	169.24	155.16	0.00
136	Security Camera Installation	38.45	461.40	461.40	461.40	461.40	422.95	0.00
137	Fridge	10.77	129.25	129.25	129.25	129.25	118.49	0.00
138	Fridge for the Kennels	10.27	123.28	123.28	123.28	123.28	112.99	0.00
139	File Cabinet	5.70	68.43	68.43	68.43	68.43	68.43	68.43
140	Crates	2.96	35.47	35.47	35.47	35.47	35.47	35.47
143	Kennel Crate Additions to Facility	0.00	96.89	96.89	96.89	96.89	96.89	96.89
144	Patio Set	0.00	100.03	100.03	100.03	100.03	100.03	100.03
145	AFIB Device	0.00	426.93	426.93	426.93	426.93	426.93	0.00
	1201 Furniture & Equip	27,744.36	36,518.75	34,781.93	33,809.03	33,422.43	27,208.91	19,005.16
Group: 1204 Breeding Dogs								
13	2016 Breeding Dogs	471.43	471.43	471.43	123.71	0.00	0.00	0.00
20	2017 Breeding Dogs	248.00	248.00	248.00	248.00	103.27	0.00	0.00
30	2018 Breeding Dogs	42.86	0.00	0.00	0.00	0.00	0.00	0.00
48	2019 Breeding Dogs	189.38	0.00	0.00	0.00	0.00	0.00	0.00
51	2017 Breeding Dogs - Retired	114.29	0.00	0.00	0.00	0.00	0.00	0.00
52	2019 Breeding Dogs - Retired	447.62	0.00	0.00	0.00	0.00	0.00	0.00
	1204 Breeding Dogs	1,513.58	719.43	719.43	371.71	103.27	0.00	0.00
Group: 1205 Daron's Cabin								
9	Daron's Cabin Furniture	108.00	0.00	0.00	0.00	0.00	0.00	0.00
21	Darons' Cabin Furniture	25.60	25.60	3.80	0.00	0.00	0.00	0.00
	1205 Daron's Cabin	133.60	25.60	3.80	0.00	0.00	0.00	0.00
Group: 1207 Kennel Additions- MO								
40	MO- Kennels	4,212.80	4,212.80	4,212.80	4,212.80	3,510.80	0.00	0.00
	1207 Kennel Additions- MO	4,212.80	4,212.80	4,212.80	4,212.80	3,510.80	0.00	0.00

Tax Yearly Comparative Depr

Asset	Property Description	12/31/20	12/31/21	12/31/22	12/31/23	12/31/24	12/31/25	12/31/26
Group: 1208 Land								
11	Land - Waverly, Iowa	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	1208 Land	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Group: 1209 MO Building								
41	MO Building	67,860.38	67,860.38	67,860.38	67,860.38	67,860.38	67,860.38	67,860.38
53	MO Building - Change Orders	3,301.47	3,601.61	3,601.61	3,601.61	3,601.61	3,601.61	3,601.61
54	Interior Signage	5.10	61.23	61.23	61.23	61.23	61.23	61.23
	1209 MO Building	<u>71,166.95</u>	<u>71,523.22</u>	<u>71,523.22</u>	<u>71,523.22</u>	<u>71,523.22</u>	<u>71,523.22</u>	<u>71,523.22</u>
Group: 1210 MO Land								
29	MO Land	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	1210 MO Land	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Group: 1211 North Building								
10	North Building	12,971.10	12,971.10	12,971.10	12,971.10	12,971.10	12,971.10	12,971.10
17	North Building Improvements	89.23	89.23	89.23	89.23	89.23	89.23	89.23
	1211 North Building	<u>13,060.33</u>	<u>13,060.33</u>	<u>13,060.33</u>	<u>13,060.33</u>	<u>13,060.33</u>	<u>13,060.33</u>	<u>13,060.33</u>
Group: 1213 North Kennel Additio								
18	North Kennel Additions	750.40	750.40	750.40	750.40	750.40	750.40	124.60
19	North Kennel Wall Project	1,137.67	1,137.67	1,137.67	1,137.67	1,137.67	1,137.67	1,137.67
	1213 North Kennel Additio	<u>1,888.07</u>	<u>1,888.07</u>	<u>1,888.07</u>	<u>1,888.07</u>	<u>1,888.07</u>	<u>1,888.07</u>	<u>1,262.27</u>
Group: 1215 South Building Kenne								
26	South Building Kennels	289.80	289.80	289.80	289.80	289.80	289.80	289.80
28	South Building Kennels	3,391.14	3,391.14	3,391.14	3,391.14	3,391.14	1,413.30	0.00
	1215 South Building Kenne	<u>3,680.94</u>	<u>3,680.94</u>	<u>3,680.94</u>	<u>3,680.94</u>	<u>3,680.94</u>	<u>1,703.10</u>	<u>289.80</u>
Group: 1216 South Kennel Add								
12	Kennels - South	620.00	620.00	620.00	103.00	0.00	0.00	0.00
	1216 South Kennel Add	<u>620.00</u>	<u>620.00</u>	<u>620.00</u>	<u>103.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Group: 1217 Vehicles								
32	Chevy Equinox	3,946.35	0.00	0.00	0.00	0.00	0.00	0.00
33	Truck	7,407.60	7,407.60	7,407.60	7,407.60	2,469.60	0.00	0.00
34	Truck #2	6,920.00	6,920.00	6,920.00	6,920.00	2,307.00	0.00	0.00
39	Truck #3	7,192.60	7,192.60	7,192.60	7,192.60	4,195.60	0.00	0.00

Tax Yearly Comparative Depr

Asset	Property Description	12/31/20	12/31/21	12/31/22	12/31/23	12/31/24	12/31/25	12/31/26
Group: 1217 Vehicles (continued)								
146	2020 Chevrolet Equinox LT	5,855.74	6,388.08	6,388.08	6,388.08	6,388.08	532.36	0.00
147	2020 Chevy Equinox LT	5,279.91	5,759.90	5,759.90	5,759.90	5,759.90	479.99	0.00
	1217 Vehicles	<u>36,602.20</u>	<u>33,668.18</u>	<u>33,668.18</u>	<u>33,668.18</u>	<u>21,120.18</u>	<u>1,012.35</u>	<u>0.00</u>
Group: 1230 Dishman Trail								
56	Dishman Trail	0.00	5,440.24	5,440.24	5,440.24	5,440.24	5,440.24	5,440.24
	1230 Dishman Trail	<u>0.00</u>	<u>5,440.24</u>	<u>5,440.24</u>	<u>5,440.24</u>	<u>5,440.24</u>	<u>5,440.24</u>	<u>5,440.24</u>
Group: 1235 IA Facility								
57	Iowa Facility Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	1235 IA Facility	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
	Grand Total	<u>160,622.83</u>	<u>171,357.56</u>	<u>169,598.94</u>	<u>167,757.52</u>	<u>153,749.48</u>	<u>121,836.22</u>	<u>110,581.02</u>

**SCHEDULE G
(Form 990 or
990-EZ)****Fundraising Other Events****2020**

For calendar year 2020, or tax year beginning , and ending

Name

Employer Identification Number

RETRIEVING FREEDOM, INC.**45-3282513**

		(a) Other event	(b) Other event	(c) Other event	(d) Total other events (add col. (a) through col. (c))
		<u>VARIOUS</u> (event type)	_____ (event type)	_____ (event type)	
Revenue	1 Gross receipts	48,718			48,718
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	48,718			48,718
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages				
	8 Entertainment				
	9 Other expenses	1,480			1,480

Form 990	Two Year Comparison Report	2019 & 2020
For calendar year 2020, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

RETRIEVING FREEDOM, INC.**45-3282513**

		2019	2020	Differences	
R e v e n u e	1. Contributions, gifts, grants	1,107,300	864,742	-242,558	
	2. Membership dues and assessments				
	3. Government contributions and grants	624,348	1,144,718	520,370	
	4. Program service revenue	89,058	5,515	-83,543	
	5. Investment income	7,524	1,408	-6,116	
	6. Proceeds from tax exempt bonds				
	7. Net gain or (loss) from sale of assets other than inventory	-189,494	588	190,082	
	8. Net income or (loss) from fundraising events		195,866	195,866	
	9. Net income or (loss) from gaming				
	10. Net gain or (loss) on sales of inventory				
	11. Other revenue		24,373	24,373	
	12. Total revenue. Add lines 1 through 11		1,638,736	2,237,210	598,474
E x p e n s e s	13. Grants and similar amounts paid				
	14. Benefits paid to or for members				
	15. Compensation of officers, directors, trustees, etc.				
	16. Salaries, other compensation, and employee benefits	782,110	617,858	-164,252	
	17. Professional fundraising fees				
	18. Other professional fees	37,836	214,060	176,224	
	19. Occupancy, rent, utilities, and maintenance	46,082	50,136	4,054	
	20. Depreciation and Depletion	57,220	160,628	103,408	
	21. Other expenses	365,325	403,455	38,130	
	22. Total expenses. Add lines 13 through 21		1,288,573	1,446,137	157,564
	23. Excess or (Deficit). Subtract line 22 from line 12		350,163	791,073	440,910
O t h e r I n f o r m a t i o n	24. Total exempt revenue	1,638,736	2,237,210	598,474	
	25. Total unrelated revenue				
	26. Total excludable revenue	-92,912	31,884	124,796	
	27. Total assets	4,634,383	5,533,030	898,647	
	28. Total liabilities	2,768,216	2,875,790	107,574	
	29. Retained earnings	1,866,167	2,657,240	791,073	
	30. Number of voting members of governing body	5	7		
	31. Number of independent voting members of governing body	5	7		
	32. Number of employees	13	17		
	33. Number of volunteers	100	100		

Form 990	Tax Return History	2020
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Name RETRIEVING FREEDOM, INC.	Employer Identification Number 45-3282513
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	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants				1,731,648	2,009,460	
Membership dues						
Program service revenue				89,058	5,515	
Capital gain or loss				-189,494	588	
Investment income				7,524	1,408	
Fundraising revenue (income/loss)					195,866	
Gaming revenue (income/loss)						
Other revenue					24,373	
Total revenue				1,638,736	2,237,210	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation				782,110	617,858	
Professional fees				37,836	214,060	
Occupancy costs				46,082	50,136	
Depreciation and depletion				57,220	160,628	
Other expenses				365,325	403,455	
Total expenses				1,288,573	1,446,137	
Excess or (Deficit)				350,163	791,073	
Total exempt revenue				1,638,736	2,237,210	
Total unrelated revenue						
Total excludable revenue				-92,912	31,884	
Total Assets				4,634,383	5,533,030	
Total Liabilities				2,768,216	2,875,790	
Net Fund Balances				1,866,167	2,657,240	

45-3282513

Federal Statements

FYE: 12/31/2020

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
PROFESSIONAL FEES	\$ 14,954	\$ 10,498	\$ 4,456	\$
VETERINARY SERVICES	191,100	191,100		
TOTAL	\$ 206,054	\$ 201,598	\$ 4,456	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
MILEAGE/FUEL	\$ 16,015	\$ 13,113	\$ 2,902	\$
SUPPLIES - CUSTODIAL	13,997	13,997		
KENNEL LEASE & SUPPLIES	12,064	12,064		
MEALS	10,812	8,898	1,914	
SUPPLIES - BUILDING	7,681	7,681		
INSPECTIONS & SAFETY SUPP	4,367	4,367		
MISCELLANEOUS EXPENSE	2,654	1,805	849	
FOSTER EXPENSES	2,398	2,398		
PRISON PROGRAM	1,464	1,464		
GIFT & CONTRIBUTIONS	1,334	934	400	
BANK FEES	950	665	285	
STORAGE RENTAL FEES	585	585		
GROOMING	185	185		
TOTAL	\$ 74,506	\$ 68,156	\$ 6,350	\$ 0

Federal Statements**Schedule A, Part II, Line 1(e)**

Description	Amount
DEPARTMENT OF DEFENCE	\$ 989,818
EIDL GRANT	10,000
PPP LOAN PROCEEDS	144,900
GENERAL DONATIONS	135,732
CAPITAL DONATIONS	50,000
SPONSORSHIPS & GIFT INCOME	600,614
GRANT INCOME	62,546
IN-KIND DONATIONS/SERVICES	15,850
TOTAL	<u>\$ 2,009,460</u>

Schedule A, Part II, Line 12 - Current year

Description	Amount
DOG PLACEMENT REVENUE	\$ 5,515
TAXABLE INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS	1,408
MISCELLANEOUS	24,373
GRAND OPENING - SEDALIA	113,836
INITIATIVES	76,988
VARIOUS	48,718
TOTAL	<u>\$ 270,838</u>