

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2022**Open to Public Inspection****A For the 2022 calendar year, or tax year beginning , and ending****B Check if applicable:**☐ Address change☐ Name change☐ Initial return☐ Final return/terminated☐ Amended return☐ Application pending**C Name of organization****RED & BLACK PUBLISHING COMPANY, INC****Doing business as****Number and street (or P.O. box if mail is not delivered to street address)
540 BAXTER STREET****Room/suite****City or town, state or province, country, and ZIP or foreign postal code****ATHENS GA 30605****F Name and address of principal officer:****CHARLOTTE VARNUM
540 BAXTER STREET
ATHENS GA 30605****D Employer identification number****58-1410389****E Telephone number****706-433-3009****G Gross receipts \$ 820,233****H(a) Is this a group return for subordinates?** ☐ Yes ☒ No**H(b) Are all subordinates included?** ☐ Yes ☐ No

If "No," attach a list. See instructions.

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website: REDANDBLACK.COM****H(c) Group exemption number****K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other**L Year of formation: 1980****M State of legal domicile: GA****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box ☐ 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)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	103
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 32,384	Current Year 123,776
	9 Program service revenue (Part VIII, line 2g)	199,219	398,986
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		53,721
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	37,706	243,750
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	269,309	820,233
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,500	9,000
Expenses	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)	282,730	591,796
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	260,014	512,299
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	551,244	1,113,095
	19 Revenue less expenses. Subtract line 18 from line 12	-281,935	-292,862
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 4,584,563	End of Year 3,639,181
	21 Total liabilities (Part X, line 26)	109,721	92,433
	22 Net assets or fund balances. Subtract line 21 from line 20	4,474,842	3,546,748

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 CHARLOTTE VARNUM Type or print name and title		Date EXECUTIVE DIRECTOR	
	Print/Type preparer's name [REDACTED]		Preparer's signature [REDACTED]	Date [REDACTED]
Paid Preparer Use Only	Check ☐ if self-employed		PTIN [REDACTED]	
	Firm's name [REDACTED]		Firm's EIN [REDACTED]	
	Firm's address [REDACTED] GA [REDACTED]		Phone no. [REDACTED]	

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2022)