



The Norman Firehouse Art Center's

2023 Organization Annual Report

Fiscal Year: September 1, 2021 – August 31, 2022
City of Norman and Parks and Recreation Board

ANNUAL REPORT

01. Organization Mission Statement and Strategic Plan
02. Current Board of Directors, Staff, and Faculty
03. Narrative of Annual Activities
04. Financial Information and Budget
05. Other Sources of Income
06. How Past Funding was Used
07. Financial Statement and Tax Statements for the Past Year
08. Charges and Fees for Services Provided
09. Number of Participants

ATTACHMENTS

Two-year Profit and Loss
Breakdown of Revenues by Category
2021 Form 990
FY 21-22 Statement of Activity
FY 21-22 Statement of Financial Position
FY 22-23 Budget
Strategic Plan 2022
Board Contact List

1. Organization Mission Statement and Strategic Plan

Mission Statement

The Norman Firehouse Art Center enriches our community by offering the highest quality visual arts education, experiences, and exhibitions.

Strategic Plan

Please refer to the attachment “Strategic Plan outline-priorities 2022” to view our strategic Plan.

2. Current Board of Directors, Staff, and Faculty

BOARD MEMBERS

President: Fred Schmidt
Vice President: Anthony Cricchio
Secretary: Kendall Hurley
Treasurer: Jordan Stringer
 Richard McKown
 Tina Ikpa

STAFF

Executive Director/Curator: Andy Couch
Operations Coordinator: Briana Fewell
Programs Coordinator: Dr. Nikki Krumwiede
Artist Coordinator: Casey Gilman
Contract Accountant: Susan Barnes

The Executive Director/Curator, Board President, Board Treasurer can authorize expenditures. The Executive Director/Curator, and Operations Coordinator work with our Contract Accountant to maintain books and records.

Please refer to the attachment “2023 FAC Board List” to view our Board list.

FACULTY

Jewelry: Elyse Bogart
Glass: Chris Burnett
Drawing: Andrea Duran-Cason
Drawing/Painting: Pamela Bradford
Painting: Thomas Stotts
Embroidery: Darci Lenker
Printmaking: Jenna Bryan
Printmaking: Eric Piper
Ceramics: Casey Gilman
Ceramics: Tim Sullivan

Sculpture: Claire Holloway

Veterans Program: Christian Dixon

Mixed Media/Children's Instructor: Lacy Jo Burgess-Cady

Children's Instructor: Jane Lawson

Children's Instructor: Baylee Tasse

Children's Instructor: Jalyn Summers

Children's Instructor: Christopher Netty

3. Narrative of Annual Activities

Overview of Activities for FY 2021 – 2022

The Firehouse Art Center (Firehouse) is a non-profit 501(c)(3) corporation located at 444 South Flood Avenue, Norman, Oklahoma. Founded in 1970 as a community arts center, the Firehouse operates out of a city-owned building which previously served as a fire station. It currently houses professional visual arts studios and classrooms that provide children, youth, teen, and adult visual arts education programs, as well as a gallery space for exhibitions and a permanent gift shop. The Firehouse offers in-house visual arts classes and workshops to hundreds of children, youth, teens, and adults, as well as individuals with disabilities, through quarterly class semesters. These classes and workshops are offered in a variety of mediums and developed for a wide range of artistic aptitudes and skill levels. In addition to in-house programs, the Firehouse partners with area organizations to reach thousands of individuals in Norman and the OKC metro-area each year with art engagements and activities.

The Firehouse, along with granting partners the Oklahoma Arts Council, the Norman Arts Council, and Allied Arts, continues to build a cultural infrastructure to strengthen the arts in Norman and its surrounding communities. By offering equal access to educational, high-quality visual art opportunities for everyone, regardless of their socioeconomic background, the Firehouse is laying the groundwork for generations of individuals with the knowledge, appreciation, and personal investment in the arts to become advocates for the future of the arts in the state of Oklahoma.

Arts Education

The Firehouse offers in-house visual arts classes and workshops to hundreds of individuals each year. These classes are offered in a variety of mediums and developed for a wide range of artistic aptitudes and skill levels. The Firehouse's children's programming follows our *Creating with the Masters* curriculum and *Oklahoma Academic Standards for Fine Arts* guidelines. Children's classes are offered for ages 5-14 through our Art After School Program during the Winter, Spring, and Fall semesters and our Children's Summer Art Program during the Summer semester.



The Youth Program is designed to supplement the visual arts education available in Norman and area middle and high schools. These advanced classes and workshops focus on increasing technical study for ages 10 to 18 and encourage creativity and self-expression while setting high expectations for the development of technical visual arts skills.

Healing Studio, an open studio environment for adults with varying degrees of cognitive, physical, and learning disabilities, is held at the Firehouse in 32 weekly sessions. Participants are introduced to visual arts principles and materials, art history, and methods of expression in a supportive environment.



Community Outreach Programming

In an effort to reach more underserved populations and engage more people with the visual arts, the Firehouse developed partnerships with Norman and metro area community organizations to facilitate free art activities at events and festivals. These events include the City of Norman Parks and Recreation's Outdoor Movie Series, the National Weather Festival, The Science Museum's Tinkerfest, and more. These events attract children and adults from a wide geographic base, encompassing an even

broader area than that of participants in our in-house classes. The scope and range of programming implemented by the Firehouse is designed to ensure all individuals, regardless of age or socioeconomic status, are able to participate and engage with visual art.



The Firehouse Gallery and Gift Shop are free to the public, promote visual arts awareness and community involvement, and provide visual arts exhibitions and opportunities that support local artists. The Firehouse's gift shop is unique to Norman, as 90% of the artists represented are Oklahoma-based and all items in the gift shop are high quality, original fine arts and craft pieces. Built in 1983, the gallery offers free educational art exhibitions to the public and promotes artwork from emerging, established, local, and out-of-state artists.

4. Financial Information and Budget

Please refer to the attachment "FY 21-22 Statement of Financial Position" to view our financial information.

Please refer to the attachment "Revised Budget 1.14.23" to view our budget.

5. Breakdown of Revenues

Please refer to the attachment "05. Breakdown of Revenues by Category" to view our other sources of income.

6. How Past Funding was Used

Please refer to the attachment "2 Year PL" to view how past funding was used. Please request additional reports if more information is needed on how past funding was used.

7. Financial Statements and Tax Statements for the Past Year

Please refer to the attachment “FY 21-22 Statement Activity” to view our financial statements for the past year.

Please refer to the attachment “2021 FORM 990 - Firehouse Art Center” to view our tax statements for the past year.

8. Charges and Fees for Services Provided

Children’s Classes

- **Art After School:**
\$105.00 for 8 weeks/10 hours of visual arts education
- **Children’s Summer Art Program:**
\$105.00 for 1 week/10 hours of visual arts education
OR
\$210.00 for 2 weeks/20 hours of visual arts education
- **Youth and Teen Program:**
\$176.00 for 8 weeks/16 hours of arts education

Adult Classes

- **Drawing:** \$176.00 for 8 weeks/16 hours of lessons
- **Painting:** \$176.00 for 8 weeks/16 hours of lessons
- **Jewelry:** \$228.00 for 8 week/24 hours of lessons
- **Glass:** \$176.00 for 8 week/16 hours of lessons

Classes may have additional material and/or technical fees.

Workshops

The Firehouse sometimes offers seasonal workshops on a quarterly basis; these workshops give new and returning students a taste of the mediums and techniques offered in the longer semesters. Prices for these workshops vary depending on their length and medium.

Adults with Disabilities

Healing Studio is free to participants through scholarships valued at \$30 per weekly, two-hour session. The Firehouse provides up to 12 scholarships a week to individuals with varying degrees of cognitive, physical, and learning disabilities through the Healing Studio program. The weekly sessions provide a supportive, low stress environment for students to experiment with their own creative process.

Scholarships

- 21 scholarships were awarded to children and teens for 10 hours of visual arts classes.
 - Executive Director determines eligibility of each applicant.
 - **Art Stars scholarships** are awarded based on artistic aptitude.
 - **Needs-based scholarships** are offered upon request to students with free and reduced lunch qualification.
- 118 weekly Healing Studio scholarships were awarded to adults for 2-hour sessions.

9. Number of Participants

Age of Participants

- Children's Classes: 5-14
- Teen Classes: 13-18
- Adult Classes: 17 and up

Summary of Participants for FY 21-22

PROGRAMS	ATTENDANCE
Gallery and Giftshop	507
Community Events	1,285
Community Arts Programming	1,792 total attendees
Children's Art Classes	282
Teen Classes	24
Adult Classes	325
Healing Studio	118
Arts Learning in the Community	749 total students
<hr/>	
2,541 TOTAL PARTICIPANTS	



Strategic Plan

Outline Summary

From
Board of Directors Meeting
November 6, 2022



Firehouse Vision

Enhancing our community through the visual arts

Firehouse Mission

The Norman Firehouse Art Center enriches our community by offering the highest quality visual arts education, experiences, and exhibitions.

Prioritized Objectives are in Bold

1. Goal 1: Annual Funding

Develop an approach to annual funding that creates income from every current and potential new funding source to exceed a balanced annual budget for Firehouse programs and operations.

a. Objective 1 Identify all the areas of established and potential income

- i. Strategy 1: Maintain relationships and excellence in grant writing quality with existing granting organization.
- ii. Strategy 2: Develop relationships with new foundations and explore additional local/regional grant opportunities.
- iii. Strategy 3: Create lucrative partnerships that serve the Firehouse mission and grow our audiences.

b. Objective 2 Increase memberships and upgrade membership levels

- i. Strategy 1: Establish a required membership recruitment goal for each board member to achieve.
- ii. Strategy 2: Research other non-profit membership levels and offerings to upgrade levels of membership.
- iii. Strategy 3: Write a dedicated plan with achievable outcomes and incentives to increase membership through marketing opportunities.

c. Objective 3 Increase the number of Corporate Sponsors/Donors

- i. Strategy 1: Assess our current impact and cost related to programs and offerings that need sponsorship to underwrite the cost.
- ii. Strategy 2: Identify creative sponsorship opportunities that will entice potential donors.

- iii. Strategy 3: Plan new offerings that will give corporate representation in building and marketing incentives through programming.
- d. Objective 4 Increase class enrollment to achieve profitable course offerings
 - i. Strategy 1: Recruit new faculty to develop relevant offerings that will attract broader audiences.
 - ii. Strategy 2: Expand our offerings beyond our current enrollment schedule and model.
 - iii. Strategy 3: Learn from other art organizations about future curriculum and offerings that are in high demand and are rising in popularity.
- e. Objective 5 Identify and Plan fundraising events to support programs
 - i. Strategy 1: Develop signature fundraising event that includes the following:
 - a. Art Auction
 - b. Annual Dinner
 - c. Award Ceremony
 - d. In-kind support from major partners
 - ii. Strategy 2: Create new partnerships with specific non-profits and develop joint fundraising events, and new programs. Become relevant to other non-profit audiences, become relevant to new donors.
 - iii. Strategy 3: Hold fundraising events that allow participants and students to be involved to facilitate participation with a current or an existing audience. i.e., Winter Chili Bowl with bowls made from Firehouse classes.
- f. Objective 6 Pursue new and grow existing endowments
 - i. Strategy 1: Established a Planned Giving procedure to gain funds from future estates and existing individual donor estates.
 - ii. Strategy 2: Provide opportunities for existing individual endowment donors to engage with the organization in order to maintain and grow relationships.
 - iii. Strategy 3: Development endowments to fund major annual expenses.
- g. Objective 8 Other revenues; Giftshop, City of Norman, Experiences
 - i. Strategy 1: Continue to develop relationship with the City of Norman

- ii. Strategy 2: Assess the revenue made in the gift shop. Make changes to consignment artists and wholesale offerings to increase revenue and make better use of space.
- iii. Strategy 3: Develop revenue generating experiences that utilize our unique network of relations. i.e. Travel Programs

2. Goal 2: Firehouse Board of Directors Recruitment/Learning/Engagement

Strengthen and increase board effectiveness through growing the size and diversity, educating members on Firehouse and non-profit operations and developing a culture of involvement.

- a. Objective 1 Board Member Recruitment/Retention; the board needs to grow in size and retain the members it has.
 - i. Strategy 1: Assess current board strengths, diversity and size
 - Tactic 1; have current board members identify their respective strengths and diversity
 - Action 1; utilize current matrix and have board members fill out Collect information for upcoming board meeting (TBD)
 - Action 2; summarize collective board strengths/diversity in a single matrix
 - Summarize information for upcoming board meeting (TBD)
 - Tactic 2; Identify desired board strengths, areas of diversity and size
 - Action 1; have the board collectively discuss and develop a consensus on strengths, diversity and size
 - Have discussions at upcoming board meeting (TBD)
 - ii. Strategy 2: Solicit Candidates; actively seek out candidates, make contact and explore their interest
 - Tactic 1; Create a board member position document for use in soliciting candidates (sim. to position open, taking applications for, emphasize strengths)
 - Tactic 2; identify sources of where to find candidates; community organizations, leadership programs, personal contact lists and networks
 - Tactic 3; from sources identified, identify potential candidates that can help achieve the desired list of strengths, diversity and size from a.i.T2.A1.
 - iii. Strategy 3: Active Solicitation
 - Tactic 1; Review protocol for new member solicitation
 - A1; Review at upcoming board meeting (TBD)
 - Tactic 2; Pair sponsor/mentors and candidates
 - Tactic 3; Approach potential candidates in informal setting
 - Tactic 4; Candidate interviews; Exec, Dir, Board Pres., Sponsor
 - Tactic 5; Board Approval



- iv. Strategy 4: Board Member Retention
 - Tactic 1; Mentoring Program
 - Tactic 2; Board communication
 - b. Objective 2 Knowledge Development; work towards an informed and knowledgeable board regarding understanding of non-profits and Firehouse operations
 - i. Strategy 1: Identify important areas of board knowledge
 - ii. Strategy 2: Develop a path for learning
 - iii. Strategy 3: Conduct educational learning lessons
 - iv. Strategy 4: Develop an understanding of board responsibilities
 - c. Objective 3 Board Engagement; create a culture of engagement and accountability
 - i. Strategy 1: Identify those areas of opportunity for engagement
 - ii. Strategy 2: Define the Firehouse culture
 - iii. Strategy 3: Expand requirements and commitments
- 3. Goal 3: Relevancy

Plan a unique series of community programs, and events that will provide an opportunity to reintroduce the Firehouse brand and legacy and set the stage for the future partnerships. By developing new community-based partnerships, the Firehouse will grow by providing relevant experiences for communities of interest and new audiences.

 - a. Objective 1 Define what is relevant and irrelevant in our community
 - i. Strategy 1: Survey current faculty, staff, students, and community to understand the overall opinion.
 - ii. Strategy 2: Assess attendance from current and previous programs, events, and classes.
 - iii. Strategy 3: Collect data from other community events and programs to determine what is relevant.
 - b. Objective 2 Identify Communities of Interests



- i. Strategy 1: Plan potential partnerships with cultural groups that share our commitment to education, DEI culture, and health and wellness.
 - ii. Strategy 2: Observing other arts organizations and their relevant partnerships.
 - iii. Strategy 3: Appealing to multiple new or previous audiences. i.e., potters, pet owners, park enthusiasts, etc.
- c. Objective 3 Establish Firehouse Values
 - i. Strategy 1: Determine values through focus groups comprised of faculty, staff, board, and community members.
 - ii. Strategy 2: Create opportunities to develop shared values with our current and future audiences.
 - iii. Strategy 3: Growing our future audiences through our values and new partnerships.



October 2022
FIREHOUSE ART CENTER
BOARD OF DIRECTORS AND STAFF
normanfirehouse.com

DIRECTORS

President: Fred Schmidt – (c) 405-990-5922 /(w) 405-842-9556 ext. 225 – 2304 Regis Court, Norman, OK 73071 – (w) fschmidt@fsb-ae.com (Principal, FSB Architects & Engineers) (1st Term Start: December 2017)

Vice President: Anthony Cricchio – (w) 405-325-2444 – (c) 817-881-6398 – 3840 Ives Way Norman, OK 73072 – (w) anthony.cricchio@ou.edu (Associate Professor of Architecture, University of Oklahoma) (1st Term Start: June 2020)

Secretary: Kendall Hurley – (c) 405-401-9987 - 4030 Carrington Lane, Norman, OK 73072 – kendall.stuhr@gmail.com (Nurse Anesthetist - Norman Anesthesia Providers) (1st Term Start: May 2020)

Treasurer: Jordan Stringer – (w) 405-515-7805 – (c) 405-308-1587 – 311 Glen Drive, Yukon, OK 73099 – (w) Jordan.stringer@firsunitedbank.com, (p) stringerjordan@hotmail.com – (Commercial Loan & Client Relationship Assistant – First United Bank) (1st Term Start: August 2022)

Tina Ikpa – (c) 405-250-1146 -Summit Crossing Parkway, Norman, OK 73071 – tina.ikpa@gmail.com- (Attorney – Public Institution) (1st Term Start: October 2020)

Richard McKown – (c) 405-637-8742 – 4409 Cannon Drive, Norman, OK 73072 – mckownrichard@mac.com – (Real Estate Developer – SSLM Development LLC) (1st Term Start: October 2022)

Norman Firehouse Art Center, Inc.

Statement of Activity September 2021 - August 2022

	TOTAL
Revenue	
4000 Contributions	
4002 Business/Corp./Fdns/Sponsors	49.50
4003 Individuals	2,949.96
4004 Other Contributions	262.00
Total 4000 Contributions	3,261.46
4100 Investment Income	
4110 Endowment Income	10,467.55
Total 4100 Investment Income	10,467.55
4200 Support	
4201 City	60,000.00
4202 State Oklahoma Arts Council	41,825.00
4204 Norman Arts Council	21,625.00
4206 Allied Arts-Allocation	17,872.04
4208 Allied Arts-Grants	14,000.00
4210 CARES Support	37,365.00
Total 4200 Support	192,687.04
4300 Memberships	
4302 General Public Members	8,150.00
4303 Board Members	1,950.00
Total 4300 Memberships	10,100.00
4400 Classes	
4401 Materials Income	8,764.49
4403 Tuition	96,109.00
4404 Cancellation Refunds	-6,963.50
Total 4400 Classes	97,909.99
4500 Sales	
4503 Gift Shop Sales	16,921.71
Total 4500 Sales	16,921.71
4800 Other Revenues	
4801 Interest Income	2,173.09
4809 Unrealized Gain/Loss on Invest	-22,437.19
Total 4800 Other Revenues	-20,264.10
4850 In-Kind Revenues	77,300.00
Total Revenue	\$388,383.65
GROSS PROFIT	\$388,383.65
Expenditures	
5000 Salary Wages	149,612.45

Norman Firehouse Art Center, Inc.

Statement of Activity September 2021 - August 2022

	TOTAL
5100 Payroll Expenses	
5101 Benefits and Vacation	8,893.83
5102 Taxes	11,686.03
Total 5100 Payroll Expenses	20,579.86
5300 Professional Services	
5301 Accounting	25,051.05
5303 Design	2,703.01
5305 Artist Commission	10,402.24
5306 Instructor Fees	32,025.00
5308 Other Professional Fees	2,579.55
5309 Programming Assistants	3,560.00
5310 Misc. Services	931.78
Total 5300 Professional Services	77,252.63
5350 Travel	
5351 Business Meals	96.27
5352 Room & Board	468.22
5353 Transportation	6,576.75
5354 Conferences	129.00
Total 5350 Travel	7,270.24
5400 Supplies	
5401 Art Materials	5,592.98
5404 Office Supplies	1,034.00
5416 Health & Safety	153.09
Total 5400 Supplies	6,780.07
5450 Postage	631.88
5500 Occupancy Expenses	
5501 Janitorial	5,751.23
5502 Copier	394.03
5503 Repairs and Maintenance	2,913.18
5505 Telephone/Internet	3,909.28
5506 Security System	802.60
5507 Rent	1,402.31
5508 OG&E	2,131.18
5509 ONG	754.88
5510 Utilities	1,175.69
Total 5500 Occupancy Expenses	19,234.38
5600 Membership Discounts-Tuition	1,719.99
5601 Member Discount-Gift/Gallery	266.78
5630 Other Discounts	10.52
5900 Printing	51.53
6000 Advertising	2,889.23

Norman Firehouse Art Center, Inc.

Statement of Activity

September 2021 - August 2022

	TOTAL
6001 Marketing	2,437.64
6010 Awards and Gifts	93.86
6015 Entertainment/Recruiting	740.95
6017 Entertainment/Food	1,312.89
6021 Credit Card Fees	4,439.51
6030 Insurance	
6032 Liability	9,578.74
6033 Workers' Compensation	1,382.65
Total 6030 Insurance	10,961.39
6200 Special Events Expense	100.00
6210 Dues and Subscriptions	699.00
6220 Equipment Acquisition	736.92
6230 Technology	
6231 Computer Equipment	655.71
6232 Website & Software Expenses	4,680.76
6233 Digital Cameras & Misc Equip	1,142.68
Total 6230 Technology	6,479.15
6500 Depreciation	5,697.18
6660 In-Kind Expenses	77,300.00
Total Expenditures	\$397,298.05
NET OPERATING REVENUE	\$ -8,914.40
NET REVENUE	\$ -8,914.40

05. Breakdown of Revenues by Category

Grants & Contributions

Indiv/Corp Donations

Investment Income

Other Revenues

Grants/Government Support

In-Kind Donations

Total Grants & Contributions

Charged Services Funding

Membership Dues

Class Tuition & Material Fees

Gallery & Gift Shop Sales

Total Charged Services Funding

Total Income End of Fiscal Year

FY 21/22	% of Revenue
3,262.00	0.84%
10,468.00	2.70%
(20,265.00)	-5.22%
192,688.00	49.61%
77,300.00	19.90%
263,453.00	67.83%
10,100.00	2.60%
97,910.00	25.21%
16,922.00	4.36%
124,932.00	32.17%
388,385.00	100.00%

Norman Firehouse Art Center, Inc.

Profit and Loss

September 2020 - August 2022

	SEP 2020 - AUG 2021	SEP 2021 - AUG 2022	TOTAL
Revenue			
4000 Contributions			\$0.00
4002 Business/Corp./Fdns/Sponsors	8,056.39	49.50	\$8,105.89
4003 Individuals	4,293.80	2,949.96	\$7,243.76
4004 Other Contributions	8.97	262.00	\$270.97
Total 4000 Contributions	12,359.16	3,261.46	\$15,620.62
4100 Investment Income			\$0.00
4110 Endowment Income	10,025.52	10,467.55	\$20,493.07
Total 4100 Investment Income	10,025.52	10,467.55	\$20,493.07
4200 Support			\$0.00
4201 City	60,000.00	60,000.00	\$120,000.00
4202 State Oklahoma Arts Council	37,954.90	41,825.00	\$79,779.90
4203 National	3,585.00		\$3,585.00
4204 Norman Arts Council	26,733.00	21,625.00	\$48,358.00
4206 Allied Arts-Allocation	17,190.00	17,872.04	\$35,062.04
4208 Allied Arts-Grants	8,000.00	14,000.00	\$22,000.00
4209 Other Support	12,500.00		\$12,500.00
4210 CARES Support	95,553.70	37,365.00	\$132,918.70
Total 4200 Support	261,516.60	192,687.04	\$454,203.64
4300 Memberships			\$0.00
4302 General Public Members	11,350.00	8,150.00	\$19,500.00
4303 Board Members	250.00	1,950.00	\$2,200.00
Total 4300 Memberships	11,600.00	10,100.00	\$21,700.00
4400 Classes			\$0.00
4401 Materials Income	5,247.50	8,764.49	\$14,011.99
4403 Tuition	57,901.04	96,109.00	\$154,010.04
4404 Cancellation Refunds	-6,255.00	-6,963.50	\$ -13,218.50
Total 4400 Classes	56,893.54	97,909.99	\$154,803.53
4500 Sales			\$0.00
4503 Gift Shop Sales	16,024.91	16,921.71	\$32,946.62
Total 4500 Sales	16,024.91	16,921.71	\$32,946.62
4800 Other Revenues			\$0.00
4801 Interest Income	2,046.88	2,173.09	\$4,219.97
4804 Loss or Gain on Sale of Assets	-30,593.00		\$ -30,593.00
4809 Unrealized Gain/Loss on Invest	21,695.68	-22,437.19	\$ -741.51
Total 4800 Other Revenues	-6,850.44	-20,264.10	\$ -27,114.54
4850 In-Kind Revenues	77,300.00	77,300.00	\$154,600.00
Total Revenue	\$438,869.29	\$388,383.65	\$827,252.94
GROSS PROFIT	\$438,869.29	\$388,383.65	\$827,252.94

Norman Firehouse Art Center, Inc.

Profit and Loss

September 2020 - August 2022

	SEP 2020 - AUG 2021	SEP 2021 - AUG 2022	TOTAL
Expenditures			
5000 Salary Wages	141,506.79	149,612.45	\$291,119.24
5100 Payroll Expenses			\$0.00
5101 Benefits and Vacation	6,339.24	8,893.83	\$15,233.07
5102 Taxes	11,047.14	11,686.03	\$22,733.17
Total 5100 Payroll Expenses	17,386.38	20,579.86	\$37,966.24
5300 Professional Services			\$0.00
5301 Accounting	22,181.00	25,051.05	\$47,232.05
5303 Design	4,720.00	2,703.01	\$7,423.01
5305 Artist Commission	10,145.38	10,402.24	\$20,547.62
5306 Instructor Fees	20,180.00	32,025.00	\$52,205.00
5308 Other Professional Fees	4,540.76	2,579.55	\$7,120.31
5309 Programming Assistants	6,075.07	3,560.00	\$9,635.07
5310 Misc. Services	834.50	931.78	\$1,766.28
Total 5300 Professional Services	68,676.71	77,252.63	\$145,929.34
5350 Travel			\$0.00
5351 Business Meals		96.27	\$96.27
5352 Room & Board		468.22	\$468.22
5353 Transportation		6,576.75	\$6,576.75
5354 Conferences		129.00	\$129.00
Total 5350 Travel		7,270.24	\$7,270.24
5400 Supplies			\$0.00
5401 Art Materials	5,498.35	5,592.98	\$11,091.33
5404 Office Supplies	1,418.66	1,034.00	\$2,452.66
5416 Health & Safety	411.89	153.09	\$564.98
Total 5400 Supplies	7,328.90	6,780.07	\$14,108.97
5450 Postage	346.29	631.88	\$978.17
5500 Occupancy Expenses			\$0.00
5501 Janitorial	5,612.39	5,751.23	\$11,363.62
5502 Copier	438.97	394.03	\$833.00
5503 Repairs and Maintenance	7,413.19	2,913.18	\$10,326.37
5505 Telephone/Internet	3,759.00	3,909.28	\$7,668.28
5506 Security System	802.60	802.60	\$1,605.20
5507 Rent	1,655.18	1,402.31	\$3,057.49
5508 OG&E	1,365.15	2,131.18	\$3,496.33
5509 ONG	601.43	754.88	\$1,356.31
5510 Utilities	411.14	1,175.69	\$1,586.83
Total 5500 Occupancy Expenses	22,059.05	19,234.38	\$41,293.43
5600 Membership Discounts-Tuition	1,088.00	1,719.99	\$2,807.99
5601 Member Discount-Gift/Gallery	572.72	266.78	\$839.50
5630 Other Discounts	1.05	10.52	\$11.57

Norman Firehouse Art Center, Inc.

Profit and Loss

September 2020 - August 2022

	SEP 2020 - AUG 2021	SEP 2021 - AUG 2022	TOTAL
5900 Printing	2,778.95	51.53	\$2,830.48
6000 Advertising	7,313.79	2,889.23	\$10,203.02
6001 Marketing	3,394.84	2,437.64	\$5,832.48
6010 Awards and Gifts	86.04	93.86	\$179.90
6015 Entertainment/Recruiting	583.85	740.95	\$1,324.80
6017 Entertainment/Food	3,202.24	1,312.89	\$4,515.13
6021 Credit Card Fees	2,873.05	4,439.51	\$7,312.56
6030 Insurance			\$0.00
6032 Liability	10,973.76	9,578.74	\$20,552.50
6033 Workers' Compensation	1,689.73	1,382.65	\$3,072.38
Total 6030 Insurance	12,663.49	10,961.39	\$23,624.88
6150 City/Chamber Events	150.00	0.00	\$150.00
6200 Special Events Expense	280.00	100.00	\$380.00
6210 Dues and Subscriptions	352.60	699.00	\$1,051.60
6220 Equipment Acquisition		736.92	\$736.92
6230 Technology			\$0.00
6231 Computer Equipment	368.33	655.71	\$1,024.04
6232 Website & Software Expenses	5,921.26	4,680.76	\$10,602.02
6233 Digital Cameras & Misc Equip	545.58	1,142.68	\$1,688.26
Total 6230 Technology	6,835.17	6,479.15	\$13,314.32
6500 Depreciation	8,370.73	5,697.18	\$14,067.91
6660 In-Kind Expenses	77,300.00	77,300.00	\$154,600.00
6700 Miscellaneous Expense	44.84		\$44.84
Total Expenditures	\$385,195.48	\$397,298.05	\$782,493.53
NET OPERATING REVENUE	\$53,673.81	\$ -8,914.40	\$44,759.41
NET REVENUE	\$53,673.81	\$ -8,914.40	\$44,759.41

Norman Firehouse Art Center, Inc.

Statement of Financial Position

As of August 31, 2022

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
1000 Armstrong Bank	323,340.71
1001 Arvest Bank Money Market Acct.	20,480.42
1003 PayPal	252.25
1005 First United Acct	106,277.25
1010 Valliance Money Market Acct	20,240.50
1250 Petty Cash Fund	150.00
Total Bank Accounts	\$470,741.13
Accounts Receivable	
1200 Accounts Receivable	8,195.00
Total Accounts Receivable	\$8,195.00
Other Current Assets	
1225 Prepaid Insurance & Other Items	2,465.59
Total Other Current Assets	\$2,465.59
Total Current Assets	\$481,401.72
Fixed Assets	
1305 Other Property and Equipment	38,319.98
1310 Leasehold Improvements	14,201.63
1315 Memorial Gardens	19,150.21
1350 Accumulated Depreciation	-45,884.48
Total Fixed Assets	\$25,787.34
Other Assets	
1400 Investments	0.00
1410 FAC Liability # 323	121,386.68
1445 Madole Arts Education Liability Fund #1231	10,278.36
Total 1400 Investments	131,665.04
Total Other Assets	\$131,665.04
TOTAL ASSETS	\$638,854.10

Norman Firehouse Art Center, Inc.

Statement of Financial Position

As of August 31, 2022

	TOTAL
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
2005 VISA Corporate Card	692.39
Total Credit Cards	\$692.39
Other Current Liabilities	
2110 Accrued Artists Commissions	97.18
2120 Deferred Tuition & Other	16,671.00
2195 Certificates-Gift	750.00
2200 Sales Tax Payable	0.00
OTC Payable	13.79
Total 2200 Sales Tax Payable	13.79
Total Other Current Liabilities	\$17,531.97
Total Current Liabilities	\$18,224.36
Total Liabilities	\$18,224.36
Equity	
3900 Net Assets Without Donor Restriction	604,544.14
3901 Net Assets with Donor Restriction	25,000.00
Net Revenue	-8,914.40
Total Equity	\$620,629.74
TOTAL LIABILITIES AND EQUITY	\$638,854.10



Gray, Blodgett & Company, PLLC

CERTIFIED PUBLIC ACCOUNTANTS
BUSINESS ADVISORS

629 24TH AVE SW
NORMAN, OKLAHOMA 73069
(405) 360-5533 FAX (405) 364-3771

TED BLODGETT, CPA/ABV, CVA, JD
C. JANESE SHEPARD, CPA
ROSS H. ROYE, CPA
SAM BLODGETT, CPA
CYNTHIA K. BYARS, CPA
JERRY D. KING, CPA
BLAKE T. MCGUCKIN, CPA
BREE MONTOYA, CPA/ABV, CVA
RHONDA E. RAY, CPA
BRIAN C. WILKINS, CPA
TIM WILSON, CPA
JASON D. WINTERS, CPA

January 27, 2023

Andy Taylor Couch
Firehouse Art Center, Inc.
444 S. Flood
Norman, OK 73069

Dear Andy:

Enclosed are the original and one copy of your income tax returns for the period ended August 31, 2022 for Firehouse Art Center, Inc. as follows:

2021 8879-EO – IRS E-File Signature Authorization
2021 990 - Return of Organization Exempt from Income Tax
2021 512-E - Oklahoma Return of Organization Exempt from Income Tax

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Filing instructions:

Form 8879-EO – IRS E-File Signature Authorization Form

The original form should be signed (use full name) and dated by an authorized officer of the organization. Return the signed Form 8879-EO to Gray, Blodgett and Company, PLLC as soon as possible. No payment of tax is required.

This form serves as a replacement for your signature that would be affixed to Form 990 if you paper filed your return; **please do not separately file Form 990 with the Internal Revenue Service.** Doing so will delay the processing of your return.

We must receive your signed form before we can electronically transmit your return, which is due on July 17, 2023. We would appreciate your returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of the return.



Gray, Blodgett & Company, PLLC

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Firehouse Art Center, Inc.

January 27, 2023

Page Two

Form 512-E – Oklahoma Return of Organization Exempt from Income Tax

The original return should be signed (using full name and title) and dated on page one by an authorized officer of the organization. No payment of tax is required.

The signed return should be mailed on or before July 17, 2023 to:

Oklahoma Tax Commission
P.O. Box 26800
Oklahoma City, OK 73126-0800

We recommend that you obtain and preserve proof of timely filing by use of Certified Mail with postmarked receipts. As you know, the returns were prepared from information made available without audit or verification; accordingly, we suggest that you carefully review the returns and we will be pleased to answer any questions you may have concerning the preparation.

GRAY, BLODGETT & COMPANY, PLLC
Certified Public Accountants

Form **8879-TE****IRS e-file Signature Authorization
for a Tax Exempt Entity**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of filerFor calendar year 2021, or fiscal year beginning 9/01, 2021, and ending 8/31, 20 22.▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879TE for the latest information.****2021****NORMAN FIREHOUSE ART CENTER, INC.**

EIN or SSN

23-7112097Name and title of officer or person subject to tax **ANDY TAYLOR COUCH**
EXECUTIVE DIRECTOR**Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a** 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, 7b, 8b, 9b, or 10b**, 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	333,521
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	
8a Form 5227 check here	▶ <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	▶ <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	▶ <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

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 entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 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 **GRAY, BLODGETT & COMPANY, PLLC** to enter my PIN **13925** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2021 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 entity, I will enter my PIN as my signature on the tax year 2021 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.

73783573069

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 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 ▶ **C JANESE SHEPARD**

Date ▶

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

For Privacy Act and Paperwork Reduction Act Notice, see back of form.
DAA

Form **8879-TE** (2021)

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

2021
Open to Public Inspection**A For the 2021 calendar year, or tax year beginning 09/01/21, and ending 08/31/22****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization**NORMAN FIREHOUSE ART CENTER, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

444 SOUTH FLOOD

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

NORMAN**OK 73069****D** Employer identification number**23-7112097****E** Telephone number**405-329-4523****G** Gross receipts\$**333,521****F** Name and address of principal officer:**ANDY TAYLOR COUCH****444 SOUTH FLOOD****NORMAN****OK 73069****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: ▶ **WWW.NORMANFIREHOUSE.COM****H(c)** Group exemption number ▶**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1971****M** State of legal domicile: **OK****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities:	SEE SCHEDULE O	
	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)	3	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	11
	6 Total number of volunteers (estimate if necessary)	6	18
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b 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	Current Year
	9 Program service revenue (Part VIII, line 2g)	273,926	195,948
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	84,469	124,932
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-18,520	12,641
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	339,875	333,521
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)	158,894	170,193
	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)	149,004	149,806
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	307,898	319,999
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	31,977	13,522
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	686,373	638,853
	22 Net assets or fund balances. Subtract line 21 from line 20	56,830	18,225
		629,543	620,628

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			
	ANDY TAYLOR COUCH	EXECUTIVE DIRECTOR			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	C JANESE SHEPARD	C JANESE SHEPARD			P00162034
	Firm's name ▶	GRAY, BLODGETT & COMPANY, PLLC		Firm's EIN ▶	73-1352810
	Firm's address ▶	NORMAN, OK 73069-3912		Phone no.	405-360-5533

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** (2021)

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:**SEE SCHEDULE O****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 \$ **71,221** including grants of\$) (Revenue \$ **39,975**)

THE FIREHOUSE PROVIDES VISUAL ARTS EDUCATION TO 306 CHILDREN IN-HOUSE THROUGH ITS ART AFTER SCHOOL AND CHILDREN'S SUMMER ART PROGRAMS. THESE CLASSES OPERATE UNDER THE FIREHOUSE'S "CREATING WITH THE MASTERS" CURRICULUM, WHICH INTRODUCES CHILDREN TO THE WORKS OF MASTER AND MODERN ARTISTS AND TEACHES STUDENTS ABOUT THE HISTORY OF ART, MUSEUMS, AND ART TECHNIQUES WHILE FULFILLING THE OKLAHOMA STANDARDS FOR FINE ARTS: VISUAL ARTS GUIDELINES. THE FIREHOUSE IS ALSO THE NUMBER ONE PROVIDER OF VISUAL ARTS EDUCATION IN NORMAN'S PUBLIC ELEMENTARY SCHOOLS.

4b (Code:) (Expenses \$ **87,918** including grants of\$) (Revenue \$ **68,035**)**SEE SCHEDULE O****4c** (Code:) (Expenses \$ **42,289** including grants of\$) (Revenue \$ **16,922**)**SEE SCHEDULE O****4d** Other program services (Describe on Schedule O.)

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

4e Total program service expenses ► **201,428**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	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	6	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	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	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	9	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	10 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	11a 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	11b	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	11c	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	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	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	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	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	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	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	16	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	17	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	18	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	19	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d 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
25b 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 the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
28a 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
28b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		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
35b 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 on 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 ComplianceCheck 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		
1b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
1c 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 11		
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 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		X
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		X
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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	1a 7		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent	1b 7		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		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?	7a		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?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	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.	9		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 on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	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 on 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		X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		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 ► **OK**

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 ►

THE ORGANIZATION**444 SOUTH FLOOD****NORMAN****OK 73069****405-329-4523**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) FRED SCHMIDT										
PRESIDENT	6.00 0.00	X		X				0	0	0
(2) ANTHONY CRICCHIO										
VICE PRESIDENT	4.00 0.00	X		X				0	0	0
(3) KENDALL HURLEY										
SECRETARY	4.00 0.00	X		X				0	0	0
(4) JORDAN STRINGER										
TREASURER	4.00 0.00	X		X				0	0	0
(5) TINA IKPA										
TRUSTEE	2.00 0.00	X						0	0	0
(6) CHELSEA HALCOMB										
TRUSTEE	2.00 0.00	X						0	0	0
(7) RICHARD MCKOWN										
TRUSTEE	2.00 0.00	X						0	0	0
(8) DOUGLAS SHAW ELDER										
EXECUTIVE DIRECTOR	50.00 0.00			X				75,869	0	7,523
(9) ANDY TAYLOR COUCH										
EXECUTIVE DIRECTOR	0.00 0.00			X				0	0	0
(10)										
(11)										

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>
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[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

		Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of RevenueCheck 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	139,190					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	56,758					
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f			195,948				
Program Service Revenue	2a CLASSES	Business Code 611600		97,910	97,910			
	b GIFT SHOP	Business Code 611600		16,922	16,922			
	c MEMBERSHIP	Business Code 611600		10,100	10,100			
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			124,932				
	3 Investment income (including dividends, interest, and other similar amounts)			12,641			12,641	
4 Income from investment of tax-exempt bond proceeds								
5 Royalties								
Other Revenue	6a Gross rents	(i) Real (ii) Personal						
	6b Less: rental expenses							
	c Rental inc. or (loss)							
	d Net rental income or (loss)							
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other						
	b Less: cost or other basis and sales exps.							
	c Gain or (loss)							
	d Net gain or (loss)							
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18							
	b Less: direct expenses							
	c Net income or (loss) from fundraising events							
	9a Gross income from gaming activities. See Part IV, line 19							
	b Less: direct expenses							
	c Net income or (loss) from gaming activities							
	10a Gross sales of inventory, less returns and allowances							
	b Less: cost of goods sold							
	c Net income or (loss) from sales of inventory							
	Miscellaneous Revenue	11a	Business Code					
		b						
		c						
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See instructions				333,521	124,932	0	12,641	

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	83,392	42,581	40,811	
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	73,744	38,741	35,003	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	1,371	496	875	
10 Payroll taxes	11,686	6,167	5,519	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	25,052	14,340	10,712	
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.)	52,202	50,574	1,628	
12 Advertising and promotion	5,325	3,533	1,792	
13 Office expenses	1,718	811	907	
14 Information technology	6,480	2,879	3,601	
15 Royalties				
16 Occupancy	19,235	15,899	3,336	
17 Travel	7,270	61	7,209	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	5,697	4,060	1,637	
23 Insurance	10,961	7,697	3,264	
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 ART MATERIALS	5,594	5,594		
b CREDIT CARD FEES	4,439	4,287	152	
c MEMBERSHIP DISCOUNTS	1,997	1,997		
d ENTERTAINMENT/FOOD	1,312	692	620	
e All other expenses	2,524	1,019	1,505	
25 Total functional expenses. Add lines 1 through 24e	319,999	201,428	118,571	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	61,550	1	20,798
	2 Savings and temporary cash investments	404,623	2	449,943
	3 Pledges and grants receivable, net	4,065	3	8,195
	4 Accounts receivable, net	40,055	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		8	
	9 Prepaid expenses and deferred charges	1,883	9	2,465
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 71,672		
	b Less: accumulated depreciation	10b 45,885	20,095	10c 25,787
	11 Investments—publicly traded securities		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	154,102	15	131,665
16 Total assets. Add lines 1 through 15 (must equal line 33)	686,373	16	638,853	
Liabilities	17 Accounts payable and accrued expenses	4,674	17	804
	18 Grants payable		18	
	19 Deferred revenue	14,791	19	17,421
	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		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	37,365	25	
	26 Total liabilities. Add lines 17 through 25	56,830	26	18,225
	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		604,543	27	595,628
28 Net assets with donor restrictions		25,000	28	25,000
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		629,543	32	620,628
33 Total liabilities and net assets/fund balances		686,373	33	638,853

Part XI Reconciliation of Net AssetsCheck 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	333,521
2	Total expenses (must equal Part IX, column (A), line 25)	2	319,999
3	Revenue less expenses. Subtract line 2 from line 1	3	13,522
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	629,543
5	Net unrealized gains (losses) on investments	5	-22,437
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	620,628

Part XII Financial Statements and ReportingCheck 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 on 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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c 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? _____		X
b 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)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

NORMAN FIREHOUSE ART CENTER, INC.

Employer identification number

23-7112097**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).)
- 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 on 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						

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

Schedule A (Form 990) 2021

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	194,617	203,785	187,227	273,926	195,948	1,055,503
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	194,617	203,785	187,227	273,926	195,948	1,055,503
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.						1,055,503

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	194,617	203,785	187,227	273,926	195,948	1,055,503
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	13,069	14,938	12,882	12,073	12,641	65,603
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.)						
11 Total support. Add lines 7 through 10						1,121,106
12 Gross receipts from related activities, etc. (see instructions)					12	692,863
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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	94.15 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	93.99 %
16a 33 1/3% support test—2021. 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 ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test—2020. 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 ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2021. 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 ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2020. 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 ▶ <input type="checkbox"/>		
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 ▶ <input type="checkbox"/>		

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) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services 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) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for 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 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2021. 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 <input type="checkbox"/>		
b 33 1/3% support tests—2020. 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 <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

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 box 12a or 12b in Part I, answer lines 4b and 4c 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).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 on lines 11b and 11c below, the governing body of a supported organization? | | |
| b A family member of a person described on line 11a above? | | |
| c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. | | |
| | | |

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? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | | |

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- | | Yes | No |
|--|-----|----|
| 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. Complete line 2 below. | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). | | |
| 2 Activities Test. Answer lines 2a and 2b below. | | |
| 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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | | |
| b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | | |
| 3 Parent of Supported Organizations. Answer lines 3a and 3b below. | | |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. | | |
| b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | | |

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—provide details in Part VI)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2021 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-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

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)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ **Attach to Form 990 or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

Name of the organization

Employer identification number

NORMAN FIREHOUSE ART CENTER, INC.**23-7112097****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 foundationCheck 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), 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), 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).

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

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

NORMAN FIREHOUSE ART CENTER, INC.**23-7112097****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	OKLAHOMA ARTS COUNCIL PO BOX 52001-2001 OKLAHOMA CITY OK 73152-2001	\$ 41,825	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	CITY OF NORMAN 201 W GRAY NORMAN OK 73069	\$ 60,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	NORMAN ARTS COUNCIL 210 E MAIN, STE 223 NORMAN OK 73069	\$ 21,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	ALLIED ARTS FOUNDATION 1015 N BROADWAY, SUITE 200 OKLAHOMA CITY OK 73102	\$ 31,872	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	SBA - PPP LOAN FORGIVENESS 409 3RD ST SW WASHINGTON DC 20416	\$ 37,365	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input 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**▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

Employer identification number

NORMAN FIREHOUSE ART CENTER, INC.**23-7112097****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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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	95,696	82,137	79,958	83,025	81,100
b Contributions					
c Net investment earnings, gains, and losses	-9,037	18,271	6,895	1,648	6,510
d Grants or scholarships					
e Other expenditures for facilities and programs	4,010	3,841	3,942	3,935	3,778
f Administrative expenses	887	871	774	780	807
g End of year balance	81,762	95,696	82,137	79,958	83,025

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

a Board designated or quasi-endowment ▶ %

b Permanent endowment ▶ **100.00** %

c Term endowment ▶ %

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)	X	
3a(ii)		X
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				
b Buildings				
c Leasehold improvements	14,202		8,883	5,319
d Equipment	38,320		17,852	20,468
e Other	19,150		19,150	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				25,787

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.) ▶		

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.) ▶		

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) NCF CUSTODIAL ACCOUNT	131,665
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	131,665

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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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. ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information.

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

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE INTENDED USE OF THE ENDOWMENT FUNDS IS TO PROVIDE ADDITIONAL FUNDING FOR THE ORGANIZATION'S PROGRAMS AND ACTIVITIES AS NEEDED.

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

NORMAN FIREHOUSE ART CENTER, INC.

Employer identification number

23-7112097**FORM 990 - ORGANIZATION'S MISSION**

THE FIREHOUSE HOUSES HIGHLY PROFESSIONAL WORKING VISUAL ARTS STUDIOS, WHICH ACCOMMODATE BOTH ADULT AND YOUTH ART EDUCATION PROGRAMMING, A PERMANENT GIFT SHOP, AND A DEDICATED EXHIBITION GALLERY SPACE. OFF-SITE, THE FAC PROVIDES IN-SCHOOL ART EDUCATION OPPORTUNITIES FOR NORMAN'S PUBLIC ELEMENTARY SCHOOLS AND SERVES AS HOST AND PARTNER TO SEVERAL COMMUNITY EVENTS AND VISUAL ARTS PROGRAMS IN NORMAN.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

THE FIREHOUSE PROVIDED ADULT VISUAL ARTS CLASSES IN A FULL RANGE OF ARTISTIC MEDIUMS TO APPROXIMATELY 443 INDIVIDUALS DURING THE CURRENT YEAR. THIS INCLUDES PROGRAMMING FOR US ARMED FORCES VETERANS AT THE NORMAN VETERANS CENTER AND ADULTS WITH VARYING DEGREES OF COGNITIVE AND PHYSICAL DISABILITIES IN THE FIREHOUSE'S HEALING STUDIO. HEALING STUDIO IS OFFERED FREE OF CHARGE TO ITS PARTICIPANTS THROUGH 12 SCHOLARSHIPS AVAILABLE WEEKLY, FOR APPROXIMATELY 32 WEEKS EACH YEAR. THE FIREHOUSE IS ALSO A PARTNER TO MANY COMMUNITY EVENTS, PROVIDING APPROXIMATELY 1,285 INDIVIDUALS WITH FREE ARTS EXPERIENCES DURING THE YEAR.

THIS PAST YEAR WE WERE NOT ABLE TO SERVE US ARMED FORCES VETERANS AT THE NORMAN VETERANS CENTER DUE TO COVID RESTRICTIONS. HOWEVER, WE PLAN TO SERVE A LARGER NUMBER OF VETERANS IN OUR COMMUNITY THAT ARE ABLE MEET IN-PERSON.

FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT

THE FIREHOUSE GIFT SHOP IS UNIQUE TO NORMAN, REPRESENTING ORIGINAL HIGH-

Name of the organization	Employer identification number
NORMAN FIREHOUSE ART CENTER, INC.	23-7112097

QUALITY FINE ART PIECES AT MULTIPLE PRICE POINTS. NINETY PERCENT OF THE ARTISTS ARE FROM OKLAHOMA AND MAKE THEIR LIVING FROM ARTWORK SALES. OVER ONE HUNDRED ARTISTS ARE REPRESENTED IN THE GIFT SHOP DISPLAYING: JEWELRY, FUSED GLASS, CERAMICS, PAINTING, DRAWING, SCULPTURE, AND HOLIDAY CARDS. THE FIREHOUSE GALLERY AND GIFT SHOP ARE FREE AND OPEN TO THE PUBLIC SIX DAYS A WEEK. THE GALLERY HAS SEVEN EXHIBITIONS A YEAR, FOUR WITH PROFESSIONAL ARTISTS AND THREE HIGHLIGHTING THE FIREHOUSE ART CENTER'S GRANT AND DONATION FUNDED PROGRAMS, INCLUDING THE HEALING STUDIO, CHILDREN'S, AND VETERANS PROGRAMS. APPROXIMATELY 500 GUESTS VISITED THE GIFT SHOP AND GALLERY THIS YEAR.

THE GIFT SHOP AND GALLERY WERE CLOSED THE MAJORITY OF THIS PAST YEAR DUE TO COVID RESTRICTIONS AND STAFFING SHORTAGES. IN 2023, WE HAVE BROUGHT BACK A FULL EXHIBIT CALENDAR AND HAVE REOPENED THE OPERATIONS OF OUR GIFT SHOP. WE TYPICALLY ATTRACT TWO TO THREE THOUSAND GUESTS IN OUR GALLERY AND GIFT SHOP EACH YEAR.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE RETURN IS REVIEWED AND APPROVED BY THE ORGANIZATION'S EXECUTIVE DIRECTOR, ACCOUNTANT, AND THE BOARD OFFICERS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ON AN ONGOING BASIS ANY KNOWN OR POTENTIAL CONFLICTS OF INTEREST. FAILURE TO DISCLOSE WILL RESULT IN DISCIPLINARY OR CORRECTIVE ACTION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

Name of the organization

Employer identification number

NORMAN FIREHOUSE ART CENTER, INC.

23-7112097

THE BOARD OF DIRECTORS FOR THE FIREHOUSE DID A COMPARATIVE STUDY FOR THE EXECUTIVE DIRECTOR'S SALARY, LOOKING AT JOB DESCRIPTIONS, RESPONSIBILITIES AND RELATIVE BUDGET SIZE. THROUGH THIS STUDY, THEY DETERMINED THE CURRENT COMPENSATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

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

TOT/PROG SERVICE

MGT & GENERAL

FUNDRAISING

DESIGN

\$ 2,703

\$ 0

\$ 0

ARTIST COMMISSION

\$ 10,402

\$ 0

\$ 0

INSTRUCTOR FEES

\$ 32,025

\$ 0

\$ 0

OTHER PROFESSIONAL FEES

\$ 1,291

\$ 1,288

\$ 0

PROGRAMMING ASSISTANTS

\$ 3,561

\$ 0

\$ 0

MISC SERVICES

\$ 592

\$ 340

\$ 0

TOTAL

\$ 50,574

\$ 1,628

\$ 0