508 N. Peters Avenue • Norman, OK 73069 405-321-0156 • mlhhmuseum@gmail.com www.normanmuseum.org • www.clevelandcountyhistoricalsociety.com

FY 2024-25 Annual Report

prepared August 2025

Board of Directors

Riley Million President

John Hughes Vice-President

Ashley Evans Treasurer

Carley Veal Secretary

Barbara Million Historian

Malia Bennett

Dawn Jackson

Robertson Million

Mae D. Cox Board Member Emeritus

Vernon Maddux Board Member Emeritus

Sue Schrems Board Member Emeritus

> James Briggs Ex-officio, City Staff

Staff

Amy Pence Museum Manager The Moore-Lindsay Historical House Museum (MLHHM) celebrated 50 years of serving as Norman's local history museum in May 2025. The museum opened in 1975 as the Norman-Cleveland County Historical Museum, the result of a collaboration between the City of Norman and the Cleveland County Historical Society (CCHS). The museum is housed in a beautiful Victorian-style home that was built in 1899 and is a prime example of the success that middle-class families found in Oklahoma Territory. The Historical Society is proud to continue to serve as stewards of the historical house, which is listed on the National Register of Historic Places.



CCHS Mission Statement

The Cleveland County Historical Society seeks to research, preserve, and publicize the history of Cleveland County and its people.



MLHHM Mission Statement

The Moore-Lindsay House seeks to curate a welcoming, engaging, and educational experience of the history of Norman, Cleveland County, and Oklahoma Territory.



Organizational Goals

Organization

Enhance operational efficiency, improve accessibility, and maximize the potential of the museum's physical spaces by reassessing current usage, improving organization, and repurposing under-used areas.

Exposure

Attract visitors, especially those from out-of-state, by promoting the museum as a must-see local attraction, highlighting the unique history of Cleveland County, and offering tailored experiences for visiting families, in order to increase tourism engagement, boost attendance, and expand its regional reach.

Community Engagement

Grow a dedicated volunteer base and recruit high-performing board members by promoting meaningful opportunities to support the museum's mission through education, events, preservation, and daily operations.

Professional Cooperation

Partner with other museums, schools, and cultural institutions to create collaborative educational experiences, share resources, expand audiences, and cross-promote events. These partnerships will enhance the museum's offerings, entice new audiences, and foster long-term relationships between the museum and other educational and cultural institutions.

For more information, view our full strategic plan at www.normanmuseum.org/strategicplan.

Programming

In FY 24-25, the Moore-Lindsay Historical House Museum (MLHHM) and Cleveland County Historical Society (CCHS) have continued to create a quality visitor experience and pursue the mission of presenting, preserving, and publicizing Cleveland County's history. Throughout the past year, the museum has presented two exhibits, four micro-exhibits, sixteen events, thirteen children's history camp sessions, and eighteen educational workshops for adults. Additionally, we have hosted three community group meetings, participated in one outreach event, and provided ten field trips, educational group tours, or private workshops.

Exhibits

- 2024 Annual Exhibit: "Roots & Branches"
- 2025 Annual Exhibit: "History & Heritage"

Micro-Exhibits

- Halloween 2024: "Paranormal Norman"
- Christmas 2024: "Traditions in Oklahoma"
- Valentines 2025: "The Language of Flowers"

Events

- Murder at Teatime
- Trick-or-Treat at the Moore-Lindsay House
- Annual Christmas Open House
- 50th Anniversary Celebration
- 6 Paranormal Investigations

Education & Outreach

- Children's Summer History Camp Series (11 sessions)
- Children's Victorian Valentines
 Workshop
- Children's Spring Break History Camp Series (4 sessions)
- 4 Handmade Soap Workshops
- 6 Embroidery Workshops
- 2 Watercolor Workshops
- On-demand programming: 17 field trips, educational group tours, private workshops, community meetings, and outreach events

Coming in FY 25-26

Museum staff has planned 1 exhibit, 2 micro-exhibits, 10 events, and 35 Education and Outreach programs and in FY 25-26. Staff will also conduct On-Demand Education and Outreach (field trips, educational group tours, and private workshops) as requested by local schools, homeschool groups, clubs, and other organizations; 20-30 such programs are expected in this fiscal year.

Programming

In FY 24-25, the Moore-Lindsay Historical House Museum (MLHHM) and Cleveland County Historical Society (CCHS) have continued to create a quality visitor experience and pursue the mission of presenting, preserving, and publicizing Cleveland County's history. Throughout the past year, the museum has presented two exhibits, three micro-exhibits, ten events, sixteen children's camps or workshops, and twelve educational workshops for adults. Additionally, we have hosted fifteen on-demand educational programs (field trips, educational group tours, and private workshops).

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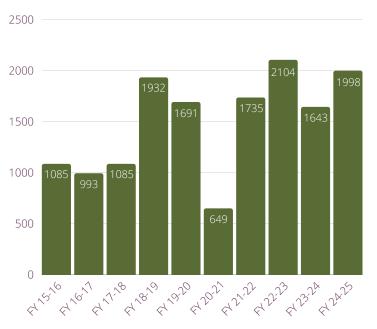
Museum staff has planned 5 exhibits or micro-exhibits, 10 events, and 35 Education & Outreach programs and in FY 25-26. Staff will also conduct On-Demand Education & Outreach as requested by local schools, homeschool groups, clubs, and other organizations; 20-30 such programs are expected in this fiscal year.

Participants

In FY 24-25 the Moore-Lindsay House welcomed 2000 visitors. The museum benefitted from the assistance of 22 volunteers and 1 intern, with a total of 333 work hours

donated.

Visitor Numbers

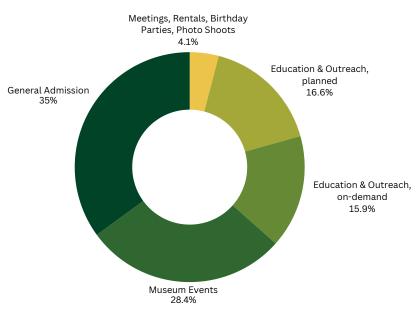




Visitor Ages

Seniors (65+) 15.1% Children (0-17) 35.2% Adults (18-64) 49.8%

Attendance Reasons



Fees & Income

Museum Admission:

Adults & Teens: \$5

Children 12 & under: free

Children's workshops & camps: \$10

Adult workshops: varied, \$20-50

Photographer Fees: \$50/hour

Rental Fee: \$50/hour

Birthday Party Package: \$150

Percentage of Expenditures
Paid By Non-City Funds
FY 18-19 - FY 24-25



The MLHHM charges a \$5 admission fee for museum visitors over the age of 12. In order to keep the museum as accessible as possible, admission is free for children, SNAP card holders, and CCHS members. Additionally, admission is free for everyone on the first Friday of every month, and the MLHHM is a Blue Star Museum, providing free admission for active service military and their families in the summer. MLHHM camps and workshops are priced at \$10 per person for children's classes and \$20-50 per person for adult programming.

Additional income sources include the museum gift shop, grants, royalties on CCHS books, fundraisers, and grants. The historical house can be rented by photographers for use as a photography set, the property can be rented out for small events, and the museum also offers a birthday party package; all of these offerings bring in supplemental funds to support museum programming.

CCHS continues to seek additional fundraising and grant opportunities to support the museum's operations. In FY 24-25, CCHS was honored to receive a \$2000 sponsorship from OEC, and we have applied for up to \$10,000 in funding for FY25-26 from OEC's Operating Round-Up. The MLHHM is proud to be the recipient of a FY 25-26 & FY 26-27 general support grant from the Norman Arts Council for \$26,000.00.

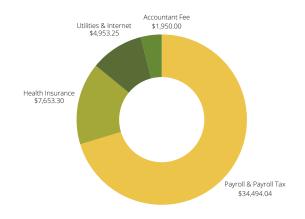
Percentage of Total Expenditure Paid By Income Source, FY 24-25



Use of FY 24-25 City Funds

In FY 24-25, CCHS received \$44,500 from the City of Norman. These funds are used to pay for the basic necessities of running the museum: the museum manager's salary and the assistant manager's hourly wage, the cost of utilities and internet for the building, and fees for the accountant who handles museum payroll and taxes. Other uses include purchasing health insurance for the museum manager, paying bank account fees for the account holding the funds, and paying the fee for the yearly City of Norman registration for our alarm system. This frees up funding from other sources to cover the costs of museum programming and necessary supplies. These items totaled \$49,050.59 in FY24-25. At this time, it would be impossible to continue operating the museum without this essential funding.

FY 24-25 City Grant Funds



Projected Use of FY 25-26 City Funds







CCHS FY 24-25 Financial Statement

Funds Balance Report

Account	Beginning of	End of		
Account	FY24-25	FY24-25		
Unrestricted Assets				
City of Norman Grant Fund	\$9,720.75	\$9,575.58		
CCHS Operating Fund	\$3,716.50	\$5,208.97		
NAC Grant Fund	\$5,461.02	\$2,532.59		
Insurance Fund	\$2,351.98	\$3,422.37		
CCHS Books Account	\$1,254.92	\$1,258.68		
PayPal	\$0.00	\$68.62		
Total Unrestricted Assets	\$22,505.17	\$22,066.81		
Restricted Assets				
Carpenter's Lace Restoration Fund	\$1,095.41	\$1,095.41		
CD	\$50,000.00	\$52,605.92		
OCCF Endowment Fund	\$23,301.58	\$24,530.29		
Total Restricted Assets	\$74,396.99	\$78,231.62		
Total Assets	\$96,902.16	\$100,298.43		



CCHS FY 24-25 Financial Statement, Cont'd

FY 2024-25 Income

1 1 2 2 1 1 2 1 1 1 2 1 1 1 2						
City of Norman Grant Funds	\$44,500.00					
Other Grants	\$13,503.00					
Admission Fees	\$2,854.35					
Camp, Workshop, & Tea Party Enrollment Fees	\$6,631.14					
Gift Shop, Book Sales & Royalties, Member Dues	\$3,055.61					
Donations	\$1,850.51					
Rentals, Photographer Fees, & Birthday Parties	\$550.00					
Investments & Endowments, Sponsorships, Etc.	\$4,437.30					
Total Income	\$77,381.91					

FY 2024-25 Expenses

Total Expenses	\$76,115.41
Miscellaneous	\$2,705.56
Banking & Transaction Fees	\$513.63
Website & Software	\$730.05
Marketing	\$4,274.84
Gift Shop	\$1,827.50
Professional Development	\$1,477.36
Programming	\$6,492.02
Supplies	\$3,110.79
Utilities & Internet	\$5,727.59
Contract Labor	\$6,608.74
Manager's Health Insurance	\$7,653.30
Payroll & Payroll Taxes	\$34,994.04

Budget Shortfall or Overage:	overage
Budget Shortian of Overage.	\$1,266.50



FY 2025-26 Budget

Projected Income

City of Norman Grant Funds	\$44,500
Other Grants	\$23,350
Admission Fees	\$3,000
Camp, Workshop, & Tea Party Enrollment Fees	\$8,000
Gift Shop, Book Sales & Royalties, Member Dues	\$3,000
Donations	\$2,500
Rentals, Photographer Fees, & Birthday Parties	\$500
Investments & Endowments, Sponsorships, Etc.	\$4,000
Total Income	\$88,850

Projected Expenses

Payroll & Payroll Taxes	\$34,000
Manager's Health Insurance	\$9,000
Contract Labor	\$9,000
Utilities & Internet	\$5,500
Supplies	\$5,000
Programming	\$12,000
Professional Development	\$1,500
Gift Shop	\$2,000
Marketing	\$6,000
Website & Software	\$2,500
Banking & Transaction Fees	\$750
Miscellaneous	\$1,500
Total Expenses	\$88,750
Projected Budget Shortfall or Overage:	overage
Trojected budget shortian or overage.	\$100



Board of Directors

Voting Board Members

Riley Million - President Term Ends Feb. 2026

312 S. Mercedes Dr., Norman, OK 73069 405-546-8426 skatoadl@netscape.net

Carley Veal - Secretary
Term Ends Feb. 2026

514 Boulder Ct., Norman, OK 73072 405-501-8139 carleyveal@gmail.com

Barbara Million - Historian

Term Ends Feb. 2026

409 Foreman Ave., Norman, OK 73069 405-364-6747 beelermillion@gmail.com

Dawn Jackson
No Term Limit

6211 Crooked Oak Dr., Norman, OK 73026 405-410-8851 dawnweatherwax@yahoo.com John Hughes - Vice President Term Ends Feb. 2026

602 N. Jones Ave., Norman, OK 73069 281-910-7974 jchfenris@gmail.com

> Ashley Evans – Treasurer Term Ends Feb. 2026

4116 Beechwood Dr., Norman, OK 73072 501-513-7081 catladyevans@gmail.com

Malia Bennett

No Term Limit

13168 Eastridge Dr., OKC, OK 73170 405-514-8394 maliakatherinebennett@gmail.com

Robertson Million

No Term Limit

1100 Oak Tree Ave., Norman, OK 73072 405-546-8425 robomillion@yahoo.com

Non-Voting Board Members

Amy Pence - Museum Manager

Ex-Officio, no term limit

1624 Oriole Dr., Norman, OK 73071 405-342-0361 mlhhmuseum@gmail.com

James Briggs - City of Morman Ex-Officio, no term limit

225 N. Webster Ave., Norman, OK 73069 405-366-5480 james.briggs@normanok.gov

Sue Schrems - Emeritus Member

Lifetime Position

1128 Riviera Dr., Norman, OK 73072 405-420-1356 sschrems1@gmail.com Vacant - Museum Asst. Mngr. Ex-Officio, no term limit

Mae Cox - Emeritus Member

Lifetime Position

922 Barbour Ave., Norman, OK 73069 405-321-1617mae@coxok.com

Vernon Maddux - Emeritus Member

Lifetime Position

3210 N. Northshore Blvd., Wichita, KS 67205 405-669-7597 vmadd@sbcglobal.net

Record Maintenance & Expenditure Authorization

Financial Record Maintenance:

- Ashley Evans, CCHS Board Treasurer
 - maintains records of bank accounts, investments, & CCHS income and expenses
- Amy Pence, Museum Manager
 - maintains records of grant funds, gift shop funds, donations, PayPal account, & MLHHM income and expenses
- Heather Koonce, CCHS Accountant
 - oversees and verifies all financial recordkeeping, handles payroll and state and federal taxes

Expenditure Approval:

- Board of Directors, by majority vote
 - any expenses of any amount
- Executive Committee, by majority vote
 - comprised of President, Vice
 President, and Treasurer
 - any single expense up to \$300
- Riley Million, CCHS Board President
 - any single expense up to \$150
- Ashley Evans, CCHS Board Treasurer
 - any single expense up to \$150
- Amy Pence, Museum Manager
 - any single expense up to \$100
 - expenditure of grant funds, following board-approved budget for said grant





2024 Form-990-EZ

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

Inte	ernal Reve	venue Service Go to www.irs.gov/Form990E2 for instructions and the latest info	rmation		•			
A	For the	2024 calendar year, or tax year beginning , 2024, and er	nding		, 20			
В	Check if	applicable: C Name of organization		D Employer id	entification number			
	Address	s change CLEVELAND COUNTY HISTORICAL SOCIETY		73-1051970				
Н	Name ch	to be the second of the second	/suite	E Telephone n	umber			
Н	Initial ret	turn/terminated 508 NORTH PETERS AVENUE						
Н		City or town, state or province country, and ZID or foreign postal code		F Group Exe	mption			
Н	Amended return Application pending NORMAN, OK 73069				Number			
G	Account	ting Method: X Cash Accrual Other (specify):	Н	Check X if th	e organization is not			
	Website	•	_	_	ch Schedule B			
		mpt status (check only one) -	- ,	Form 990).				
		f organization: X Corporation Trust Association Other:						
		es 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or i	f total as	cete				
		lumn (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ			66,299			
	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (s						
	arti	Check if the organization used Schedule O to respond to any question in this Part						
_	1	Contributions, gifts, grants, and similar amounts received						
	2	Program service revenue including government fees and contracts			58,029			
					015			
	3	Membership dues and assessments			215			
	4	Investment income		4	35			
	5a	Gross amount from sale of assets other than inventory						
	b	Less: cost or other basis and sales expenses						
	С	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)		5c				
	6	Gaming and fundraising events:						
	a	Gross income from gaming (attach Schedule G if greater than						
e		\$15,000)						
Revenue	b	Gross income from fundraising events (not including \$ of contributions						
æ		from fundraising events reported on line 1) (attach Schedule G if the						
		sum of such gross income and contributions exceeds \$15,000) 6b						
	С	Less: direct expenses from gaming and fundraising events 6c						
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract						
		line 6c)		6d				
	7a	Gross sales of inventory, less returns and allowances						
	b	Less: cost of goods sold						
	С	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		7c				
	8	Other revenue (describe in Schedule O)			8,020			
	9	Total revenue . Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			66,299			
	10	Grants and similar amounts paid (list in Schedule O)			,			
	11	Benefits paid to or for members						
	12	Salaries, other compensation, and employee benefits			43,420			
es	13	Professional fees and other payments to independent contractors			7,093			
Expenses	14	Occupancy, rent, utilities, and maintenance			2,731			
×								
ш	15	Printing, publications, postage, and shipping			232			
	16	Other expenses (describe in Schedule O)			15,825			
_	17	Total expenses. Add lines 10 through 16			69,301			
16	18	Excess or (deficit) for the year (subtract line 17 from line 9)		18	(3,002			
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with						
As		end-of-year figure reported on prior year's return)			112,193			
é	20	Other changes in net assets or fund balances (explain in Schedule O)						
_	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	109,191			

Form **990-EZ** (2024)

Pai	T II Balance Sheets (see the instructions for Pa					
	Check if the organization used Schedule O	to respond to any qu				<u>X</u>
			_	(A) Beginning of year	Ь.,	(B) End of year
22	Cash, savings, and investments			107,132	22	105,755
23	Land and buildings			0	23	0
24	Other assets (describe in Schedule O)			6,510	24	5,076
25	Total assets			113,642	25	110,831
26	Total liabilities (describe in Schedule O)		_	1,449	26	1,640
27	Net assets or fund balances (line 27 of column (B) m			112,193	27	109,191
Pai	t III Statement of Program Service Accompli			•		
	Check if the organization used Schedule O	to respond to any q	uestion in this Part I	II		Expenses
What	is the organization's primary exempt purpose? TO PRE	SERVE HISTORICA	L STUDY			quired for section (c)(3) and 501(c)(4)
as m	ribe the organization's program service accomplishments freesured by expenses. In a clear and concise manner, described and the religion of the control of t	ribe the services provid			and the same of	inizations; optional for
28	ns benefited, and other relevant information for each progr TO PROMOTE KNOWLEDGE AND INTEREST IN					
	STUDY OF CLEVELAND COUNTY OKLAHOMA					
	(Grants \$) If this amount	nt includes foreign grant	s, check here		28a	69,301
29						
	(Grants \$) If this amou	nt includes foreign grant	s, check here		29a	
30						
	(Grants \$) If this amou	nt includes foreign grant	s, check here		30a	
31	Other program services (describe in Schedule O)					
		nt includes foreign grant			31a	
					_	
32	Total program service expenses (add lines 28a throug	h 31a)			32	69,301
	Total program service expenses (add lines 28a throught IV List of Officers, Directors, Trustees, and				_	45/44-
	t IV List of Officers, Directors, Trustees, and	Key Employees (li	st each one even if not	compensated-see th	e inst	ructions for Part IV)
		Key Employees (li to respond to any qu	st each one even if not	compensated-see th	e inst	ructions for Part IV)
	t IV List of Officers, Directors, Trustees, and	Key Employees (li	st each one even if not uestion in this Part I	compensated-see th	e inst	ructions for Part IV)
	Check if the organization used Schedule O	to respond to any que (b) Average hours per week	st each one even if not uestion in this Part I (c) Reportable compensation (Forms W-2/1099-MISC/	compensated-see th V	e inst	ructions for Part IV)
Pai	Check if the organization used Schedule O	to respond to any que (b) Average hours per week	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	compensated-see th V	e inst	ructions for Part IV)
John	Check if the organization used Schedule O (a) Name and title	to respond to any que (b) Average hours per week	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	compensated-see th V	e inst	ructions for Part IV)
John	Check if the organization used Schedule O (a) Name and title	to respond to any quality (b) Average hours per week devoted to position	st each one even if not Lestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	compensated-see th V (d) Health benefits, contributions to employe benefit plans, and deferred compensation	e inst	eructions for Part IV) Estimated amount of other compensation
John Vice Car:	Check if the organization used Schedule O (a) Name and title 1 Hughes 2 President	to respond to any quality (b) Average hours per week devoted to position	st each one even if not Lestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	compensated-see th V (d) Health benefits, contributions to employe benefit plans, and deferred compensation	e inst	eructions for Part IV) Estimated amount of other compensation
John Vice Cari	Check if the organization used Schedule O (a) Name and title 1. Hughes 2. President Ley Veal	(b) Average hours per week devoted to position	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	compensated-see th V	e inst	s) Estimated amount of other compensation
John Vice Car: Sec: Sue	Check if the organization used Schedule O (a) Name and title Hughes President Ley Veal Cetary	(b) Average hours per week devoted to position	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	compensated-see the V	e inst	s) Estimated amount of other compensation
John Vice Car: Sec: Sue Tree	Check if the organization used Schedule O (a) Name and title 1. Hughes 2. President Ley Veal 2. retary 3. Schrems	(b) Average hours per week devoted to position	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	compensated-see the V	e inst	a) Estimated amount of other compensation
John Vice Car: Sec: Sue Tree Rile	Check if the organization used Schedule O (a) Name and title Hughes President Ley Veal retary Schrems assurer	(b) Average hours per week devoted to position	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	compensated-see the V	e inst	a) Estimated amount of other compensation
John Vice Car: Sec: Sue Tree Rile Pres	Check if the organization used Schedule O (a) Name and title The Hughes President Ley Veal Tetary Schrems Assurer By Million	(b) Average hours per week devoted to position 5.00	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-) 0	compensated-see the V	e inst	by Estimated amount of other compensation
John Vice Car: Sec: Sue Tres Rile Pres Barl	Check if the organization used Schedule O (a) Name and title The Hughes President Ley Veal Schrems Assurer By Million Sident	(b) Average hours per week devoted to position 5.00	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-) 0	compensated-see the V	e inst	by Estimated amount of other compensation
John Vice Car: Sec: Sue Tres Rile Pres Barl	Check if the organization used Schedule O (a) Name and title The Hughes President Ley Veal retary Schrems assurer By Million Sident Dara Million	(b) Average hours per week devoted to position 5.00 5.00	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-) 0	compensated-see the V	e inst	s) Estimated amount of other compensation 0 0 0
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John Vice Car: Sec: Sue Tres Rile Pres Barl	Check if the organization used Schedule O (a) Name and title The Hughes President Ley Veal retary Schrems assurer By Million Sident Dara Million	(b) Average hours per week devoted to position 5.00 5.00	st each one even if not uestion in this Part I' (c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-) 0	compensated-see the V	e inst	s) Estimated amount of other compensation 0 0 0
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Form 99	0-EZ (2024) CLEVELAND COUNTY HISTORICAL SOCIETY 73-10519	70	Р	age 3
Part	Other Information (Note the Schedule A and personal benefit contract statement requirements in the			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			. [
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		x
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		x
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		x
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		x
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
00	during the year? If "Yes," complete applicable parts of Schedule N	36		x
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions			Α
b	Did the organization file Form 1120-POL for this year?	37b		x
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were	376		
504	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		x
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved	Jua		
b		-		
39	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
a	Gross receipts, included on line 9, for public use of club facilities	-		
b 40a		-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: ; section 4915: ; section 4955:			
b	section 4911: ; section 4912: ; section 4955: ; section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
b				
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	40b		77
•	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	400		X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	40-		
44	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed: OK Take the states with which a copy of this return is filed:	<i>-</i>		
42a	The organization's books are in care of: Sue Schrems Telephone no. 405-3	64-9	54/	
b	Located at: 508 NORTH PETERS AVENUE, NORMAN, OK ZIP + 4 73069		Yes	Na
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	42h	res	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filling requirements for FinCEN Form 114. Report of Foreign Reply and			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).	42-		
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Х
40	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year		Vaa	Ma
44-	Did the association reciptain and described funds during the use 2 If "Ves " Form 200 must be		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	44-		
	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
420	completed instead of Form 990-EZ	44b		X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ. See instructions	45b		X

May the IRS discuss this return with the preparer shown above? See instructions

EEA

X Yes

Form 990-EZ (2024)

Thank you for 50 years of support of



We are proud to be a part of Norman's thriving arts and humanities community.

We are so grateful for the support provided by the City of Norman, and we are so lucky to be in a city that recognizes the value of the arts and humanities in building quality of life for its citizens.

