

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2021
Open to Public Inspection

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.

A For the 2021 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Ann Arbor Art Association		D Employer identification number 23-7205537
	Doing business as		E Telephone number 734-994-8004
	Number and street (or P.O. box if mail is not delivered to street address) 117 West Liberty Street	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code Ann Arbor MI 48104		G Gross receipts\$ 2,294,717
	F Name and address of principal officer: Marie Klopf 117 W Liberty St Ann Arbor MI 48104		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions	
J Website: www.AnnArborArtCenter.org		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1909	M State of legal domicile: MI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To be a contemporary forum for the visual arts through education, exploration, collaboration and exhibition, and to engage minds, expand perspectives and inspire growth.		
	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)	21
	4	Number of independent voting members of the governing body (Part VI, line 1b)	20
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	33
	6	Total number of volunteers (estimate if necessary)	50
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	26,173
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 595,706 / Current Year: 1,712,480
	9	Program service revenue (Part VIII, line 2g)	93,818 / 366,736
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,455 / 33,963
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	62,422 / 138,140
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	762,401 / 2,251,319
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	238,950
	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)	175,379 / 509,731
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 389,415	
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	397,148 / 575,371	
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	572,527 / 1,324,052	
19	Revenue less expenses. Subtract line 18 from line 12	189,874 / 927,267	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year: 3,570,259 / End of Year: 3,961,108
	21	Total liabilities (Part X, line 26)	945,100 / 408,682
	22	Net assets or fund balances. Subtract line 21 from line 20	2,625,159 / 3,552,426

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			
	Marie Klopf Type or print name and title	President & CEO			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Thomas A O'Sullivan		05/16/22		P01321877
	Firm's name ▶	Yeo & Yeo, P.C.	Firm's EIN ▶	38-2706146	
	Firm's address ▶	1450 Eisenhower Place Ann Arbor, MI 48108-3283	Phone no.	734-769-1331	

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

Part III Statement of Program Service Accomplishments

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

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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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 \$ 331,246 including grants of \$ 238,950) (Revenue \$ 358,736) See Schedule O

4b (Code:) (Expenses \$ 312,906 including grants of \$) (Revenue \$ 8,000) See Schedule O

4c (Code:) (Expenses \$ 165,122 including grants of \$) (Revenue \$) See Schedule O

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 809,274

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
24d			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
25b			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
26			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
27			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):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
28a			X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b			X
c	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
28c			X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
29			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
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
31			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
32			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
33			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
34			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
35b			
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
36			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
37			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	
38		X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
1a			41
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
1b			0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
1c			X

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		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	33		
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		X	
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 [X]

Section A. Governing Body and Management

Table with 3 main columns: Question, Yes, No. Rows include: 1a (21), 1b (20), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 main columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MI
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. [X] Own website [] Another's website [X] 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 MI

Marie Klopff
Ann Arbor

117 West Liberty Street

MI 48104-1320 734-994-8004

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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) Marie Klopff President & CEO	40.00 0.00			X				108,197	0	12,390
(2) Peter Baker Chair	2.00 0.00	X		X				0	0	0
(3) Matthew Bower Director	1.00 0.00	X						0	0	0
(4) Tom Bray Director	1.00 0.00	X						0	0	0
(5) Marlee Brown Director	1.00 0.00	X						0	0	0
(6) Anne Cooper Vice Chair	2.00 0.00	X		X				0	0	0
(7) JPaul Dixon Chair Emeritus	2.00 0.00	X		X				0	0	0
(8) Christine Euritt Director	1.00 0.00	X						0	0	0
(9) Douglas Gross Treasurer	2.00 0.00	X		X				0	0	0
(10) Justin Herrick Director	1.00 0.00	X						0	0	0
(11) Nakia Johnson Secretary	2.00 0.00	X		X				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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			
(12) Adam Linkner	2.00									
Vice Chair	0.00	X		X			0	0	0	
(13) Chrislan Fuller Manuel	1.00									
Director	0.00	X					0	0	0	
(14) Jennifer Moore	1.00									
Incoming Treasurer	0.00	X					0	0	0	
(15) Steve Palms	1.00									
Incoming Secretary	0.00	X					0	0	0	
(16) Prue Rosenthal	1.00									
Director	0.00	X					0	0	0	
(17) Ellie Serras	1.00									
Director	0.00	X					0	0	0	
(18) Jim Simpson	1.00									
Director	0.00	X					0	0	0	
(19) Robin Suter	1.00									
Director	0.00	X					0	0	0	
1b Subtotal							108,197		12,390	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							108,197		12,390	

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 **1**

	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
O'Neal Construction, Inc. Ann Arbor MI 48103	525 W William St Construction	194,022

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 **1**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b	8,204				
	c Fundraising events	1c	49,829				
	d Related organizations	1d					
	e Government grants (contributions)	1e	60,000				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,594,447				
	g Noncash contributions included in lines 1a-1f	1g	\$ 88				
	h Total. Add lines 1a-1f		1,712,480				
	Program Service Revenue	2a Class Fees	Business Code 611600	336,560	336,560		
b Art Placement Services		531120	30,176	30,176			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			366,736				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		33,963			33,963	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	31,403				
		(ii) Personal					
		6a	31,403				
	b Less: rental expenses	6b	5,230				
	c Rental inc. or (loss)	6c	26,173				
	d Net rental income or (loss)		26,173		26,173		
	7a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		7a					
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ 49,829 of contributions reported on line 1c). See Part IV, line 18		9,638					
	b Less: direct expenses	8b	10,913				
	c Net income or (loss) from fundraising events		-1,275				
9a Gross income from gaming activities. See Part IV, line 19							
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances		128,363					
	b Less: cost of goods sold	10b	27,255				
	c Net income or (loss) from sales of inventory		101,108	101,108			
Miscellaneous Revenue	11a Other Income	Business Code 900099	6,758			6,758	
	b Other Special Events	900099	5,376			5,376	
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		12,134				
12 Total revenue. See instructions		2,251,319	467,844	26,173	46,097		

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	238,950	238,950		
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	120,587	22,610	30,147	67,830
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	311,999	262,268	4,252	45,479
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	41,886	29,013	3,062	9,811
10 Payroll taxes	35,259	24,725	2,339	8,195
11 Fees for services (nonemployees):				
a Management				
b Legal	13,000	1,200	9,800	2,000
c Accounting	40,800		40,800	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
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.)	14,124	525	13,599	
12 Advertising and promotion	19,040	12,139		6,901
13 Office expenses	31,247	16,368	10,118	4,761
14 Information technology				
15 Royalties				
16 Occupancy	47,224	47,224		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	1,985		1,985	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	85,370	85,370		
23 Insurance	9,261		9,261	
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 Capital Campaign	242,085			242,085
b Program supplies and serv	71,235	68,882		2,353
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,324,052	809,274	125,363	389,415
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	955	1	1,078
	2 Savings and temporary cash investments	469,839	2	980,533
	3 Pledges and grants receivable, net	809,713	3	682,580
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	24,308	8	4,917
	9 Prepaid expenses and deferred charges		9	2,613
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,086,547		
	b Less: accumulated depreciation	10b 881,364	2,202,555	10c 2,205,183
	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	62,889	15	84,204
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,570,259	16	3,961,108	
Liabilities	17 Accounts payable and accrued expenses	92,058	17	161,388
	18 Grants payable		18	
	19 Deferred revenue	52,002	19	218,762
	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	801,040	23	28,532
	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		25	
	26 Total liabilities. Add lines 17 through 25	945,100	26	408,682
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,727,228	27	1,390,367
	28 Net assets with donor restrictions	897,931	28	2,162,059
	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	2,625,159	32	3,552,426	
33 Total liabilities and net assets/fund balances	3,570,259	33	3,961,108	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,251,319
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,324,052
3	Revenue less expenses. Subtract line 2 from line 1	3	927,267
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,625,159
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,552,426

Part XII Financial Statements and Reporting

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

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for Michael Watts and Yujia Zhou.

1b Subtotal
1c Total from continuation sheets to Part VII, Section A
1d Total (add lines 1b and 1c)

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

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

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

**SCHEDULE A
(Form 990)**

Public Charity Status and Public Support

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

**Open to Public
Inspection**

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

Name of the organization <p style="text-align: center;">Ann Arbor Art Association</p>	Employer identification number <p style="text-align: center;">23-7205537</p>
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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						

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

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions)
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))
15 Public support percentage from 2020 Schedule A, Part II, line 14
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
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
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
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
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(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.")	715,636	856,036	1,353,065	595,706	1,712,480	5,232,923
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	770,898	725,363	421,239	147,967	504,737	2,570,204
3 Gross receipts from activities that are not an unrelated trade or business under section 513	32,376	13,973	12,329	2,355	6,758	67,791
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	1,518,910	1,595,372	1,786,633	746,028	2,223,975	7,870,918
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	161,575	390,000	880,097	81,485	1,107,210	2,620,367
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	161,575	390,000	880,097	81,485	1,107,210	2,620,367
8 Public support. (Subtract line 7c from line 6.)						5,250,551

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	1,518,910	1,595,372	1,786,633	746,028	2,223,975	7,870,918
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	23,997	21,331	19,925	10,455	33,963	109,671
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	23,997	21,331	19,925	10,455	33,963	109,671
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	9,794		35,326	12,818	30,549	88,487
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.)	1,552,701	1,616,703	1,841,884	769,301	2,288,487	8,069,076

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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	65.07%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	68.28%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	1%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	1%

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 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?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
2a		
b Did the activities described 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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. 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? <i>If "Yes" or "No," provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	
9 Distributable amount for 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— <i>explain in Part VI</i>). 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, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 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			

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

Ann Arbor Art Association

Employer identification number

23-7205537

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number of funds, aggregate values, and compliance questions.

Part II Conservation Easements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, and monitoring details.

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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	62,889	52,434	54,908	55,432	52,602
b Contributions			2,200	200	200
c Net investment earnings, gains, and losses	21,315	10,455	-4,674	-724	2,630
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	84,204	62,889	52,434	54,908	55,432

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

- a** Board designated or quasi-endowment ▶ 50.24 %
- b** Permanent endowment ▶ 49.76 %
- 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		187,500		187,500
b Buildings		1,554,754	241,143	1,313,611
c Leasehold improvements		90,766		90,766
d Equipment		71,773	42,423	29,350
e Other		1,181,754	597,798	583,956
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,205,183

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

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	2,267,462
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	16,143
e	Add lines 2a through 2d	2e	16,143
3	Subtract line 2e from line 1	3	2,251,319
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	2,251,319

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	1,340,195
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	16,143
e	Add lines 2a through 2d	2e	16,143
3	Subtract line 2e from line 1	3	1,324,052
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	1,324,052

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

Support of art and art education in Ann Arbor.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Special Event Expenses \$ 10,913

Rental Expenses \$ 5,230

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Special Event Expenses \$ 10,913

Rental Expenses \$ 5,230

Part XII, Line 4b - Expense Amounts Included on Return - Other

Part XIII Supplemental Information *(continued)*

	\$	-3,354
Book / Tax Depreciation Difference	\$	3,354

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ 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

Ann Arbor Art Association

Employer identification number

23-7205537

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

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

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

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

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

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Artini</u> (event type)	<u>Vine and Dine</u> (event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	31,676	27,791		59,467
	2 Less: Contributions	24,493	25,336		49,829
	3 Gross income (line 1 minus line 2)	7,183	2,455		9,638
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	4,461	6,452		10,913
	10 Direct expense summary. Add lines 4 through 9 in column (d)				10,913
11 Net income summary. Subtract line 10 from line 3, column (d)				-1,275	

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

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

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain:

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

b If "Yes," explain:

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Ann Arbor Art Association

Employer identification number

23-7205537

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3** Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2021)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Scholarship	27	238,950			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

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**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

Ann Arbor Art Association

Employer identification number

23-7205537

Form 990 - Organization's Mission

To be a contemporary forum for the visual arts through education, exploration, collaboration and exhibition, and to engage minds, expand perspectives and inspire growth in students of all ages, teachers, artists, and the community.

Form 990, Part III, Line 4a - First Accomplishment

Art Education: Our portfolio of education programs encompasses activities for people of all ages, backgrounds, and skill levels. Our instructors drive the quality of our classes. Some instructors are university or pre-professional program faculty who enjoy teaching at community arts centers; most instructors have MFA, BFA, or art education degrees. A2AC staff, as educators and artists, support instructors through coaching to improve performance in real time. Class options include Introduction to Watercolor, Creative Collage, Botanical Illustration, Date Night Painted Bowls, Block Printing, Graphic Novel Academy, and many others. At the start of 2021, students began to express interest in returning to in-person programming, as well as parents inquiring about in-person Summer Art Camp. Our team identified best practices to mitigate COVID exposure and risk, and planned seven consecutive weeks of Summer Art Camp,

Form 990, Part III, Line 4b - Second Accomplishment

Art Presentation: Our art exhibition program is designed to elevate, challenge, and inspire our community. The selection of artists, curators, and jurors for exhibitions broadens our reach and provides valuable time

Name of the organization Ann Arbor Art Association	Employer identification number 23-7205537
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and space for the creative community to expand their practice in exciting new ways at every stage of their creative journey. Governed by a talented and creative artist committee, The A2AC hosts four distinct galleries for artists to showcase their art: the A2AC Gallery, the Aquarium Gallery, the A2AC Spotlight Gallery, and the retail A2AC Shop. Artists are selected via invitation from the Exhibition committee or through individual application through our website. Over the past 24 months the 117 Gallery hosted 10 exhibitions; 3 juried (Art Now: Photography was virtual), 5 curated, and 2 community partnership exhibitions.

Form 990, Part III, Line 4c - Third Accomplishment

Community Engagement and Outreach: In addition to formal instruction and indoor galleries, the A2AC offers a variety of hands-on, off-site, and accessible community engagement opportunities such as our online Art Resources for families (created in response to the Shelter-in-Place order in April 2020), and MLK Day 2021. New initiatives launched during the summer of 2020 in response to the global pandemic include: Our Art in Public Program (AiP) launched A2AC Murals 2020 which represents culmination of pairing downtown building and business owners with local, regional, and national artists who transformed the building walls into spectacular expressions of their skill-providing the community and visitors the opportunity to experience and enjoy these large, vibrant works of public art. We were overwhelmed by the community's expression of joy by having this opportunity to emerge from their homes, walk around downtown, and while safely socially distanced, explore and enjoy the new murals. ArtBox: Outreach, another brand-new initiative launched during the pandemic, was designed specifically to reach underserved populations

Name of the organization Ann Arbor Art Association	Employer identification number 23-7205537
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throughout SE Michigan, helping, healing, and enabling youth to be inspired by creative works of art with supplies they may not have access to while out of school. Since April 2020, the A2AC has partnered with over 35 organizations throughout SE Michigan to distribute ArtBoxes to over 4,000 individuals and families.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
The 990 will be reviewed and approved by the Finance Committee of the Board of Directors before filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
An operating principal of the organization is that all vendors of \$5,000 or more must acknowledge any potential conflicts in relationships with the organization. Board of Directors must acknowledge any conflict of interest they may have in discussions and voting on any business with their companies.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
Yes - The Human Resources Committee of the Board of Directors does periodic reviews comparing the Art Association's compensation levels to that of similar organizations. Compensation is based on salary ranges for each position and periodic performance reviews.

Form 990, Part VI, Line 15b - Compensation Process for Officers
Yes - The Human Resources Committee of the Board of Directors does periodic reviews comparing the Art Association's compensation levels to that of similar organizations. Compensation is based on salary ranges for each

Name of the organization

Employer identification number

Ann Arbor Art Association

23-7205537

position and periodic performance reviews.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

All documents are available upon request at the organization's office.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Special Event Expenses	\$ 10,913
Rental Expenses	\$ 5,230
Special Event Expenses	\$ -10,913
Rental Expenses	\$ -5,230
	\$ -3,354
Book / Tax Depreciation Difference	\$ 3,354



Filing Instructions

Ann Arbor Art Association

Exempt Organization Business Tax Return

Taxable Year Ended December 31, 2021

Date Due: November 15, 2022

Remittance: None is required. Your Form 990-T for the tax year ended 12/31/21 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Yeo & Yeo, P.C.
1450 Eisenhower Place
Ann Arbor, MI 48108-3283

Important: Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **990-T**

**Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))**

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection
for 501(c)(3)
Organizations Only

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

<p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section</p> <p><input checked="" type="checkbox"/> 501(C)(3)</p> <p><input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)</p> <p><input type="checkbox"/> 408A <input type="checkbox"/> 530(a)</p> <p><input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)</p> <p>Ann Arbor Art Association</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.</p> <p>117 West Liberty Street</p> <p>City or town, state or province, country, and ZIP or foreign postal code</p> <p>Ann Arbor MI 48104</p>	<p>D Employer identification number</p> <p>23-7205537</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>C Book value of all assets at end of year ▶ 3,961,108</p>			

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Check if filing only to ▶ Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ▶

J Enter the number of attached Schedules A (Form 990-T) ▶ 1

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation

L The books are in care of ▶ Marie Klopf Telephone number ▶ 734-994-8004

Part I Total Unrelated Business Taxable income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	10,441
2 Reserved	2	
3 Add lines 1 and 2	3	10,441
4 Charitable contributions (see instructions for limitation rules)	4	
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	10,441
6 Deduction for net operating loss. See instructions	6	10,441
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	0
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	0
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0

For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2021)

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d		1e	
2 Subtract line 1e from Part II, line 7		2	
3 Other amounts due. Check if from <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)		3	
4 Total tax. Add lines 2 and 3 (see instructions) <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here		4	0
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)		5	
6a Payments: A 2020 overpayment credited to 2021	6a		
b 2021 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439	6g		
<input type="checkbox"/> Form 4136			
7 Total payments. Add lines 6a through 6g		7	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		8	
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed		9	0
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10	
11 Enter the amount of line 10 you want: Credited to 2022 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		11	

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

		Yes	No
1 At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here <input type="checkbox"/>			X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			X
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year			
4 Enter available pre-2018 NOL carryovers here <input type="checkbox"/> -25,573. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.			
5 Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.			
Business Activity Code	Available post-2017 NOL carryover		
531120	\$	14,526	
	\$		
	\$		
	\$		
6a Did the organization change its method of accounting? (see instructions)			X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V			

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer <input type="checkbox"/>	Date	Title <input type="checkbox"/>		
			President & CEO		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Thomas A O'Sullivan		05/16/22		P01321877
	Firm's name <input type="checkbox"/>	Firm's EIN <input type="checkbox"/>			
	Yeo & Yeo, P.C.		38-2706146		
	Firm's address <input type="checkbox"/>				Phone no. <input type="checkbox"/>
	1450 Eisenhower Place				734-769-1331
	Ann Arbor, MI 48108-3283				

**SCHEDULE A
(Form 990-T)**

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). **Open to Public Inspection for 501(c)(3) Organizations Only**

A Name of the organization Ann Arbor Art Association	B Employer identification number 23-7205537
C Unrelated business activity code (see instructions) ▶ 531120	D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ Rental Income

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance ▶	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	4a		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7 31,403	5,230	26,173
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement)	12		
13 Total. Combine lines 3 through 12	13 31,403	5,230	26,173

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income			
1 Compensation of officers, directors, and trustees (Part X)	1		1,206
2 Salaries and wages	2		
3 Repairs and maintenance	3		
4 Bad debts	4		
5 Interest (attach statement). See instructions	5		
6 Taxes and licenses	6		
7 Depreciation (attach Form 4562). See instructions	7 3,354		
8 Less depreciation claimed in Part III and elsewhere on return	8a 3,354	8b	0
9 Depletion	9		
10 Contributions to deferred compensation plans	10		
11 Employee benefit programs	11		
12 Excess exempt expenses (Part VIII)	12		
13 Excess readership costs (Part IX)	13		
14 Other deductions (attach statement)	14		
15 Total deductions. Add lines 1 through 14	15		1,206
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		24,967
17 Deduction for net operating loss. See instructions	17		14,526
18 Unrelated business taxable income. Subtract line 17 from line 16	18		10,441

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

Part III Cost of Goods Sold

Enter method of inventory valuation ►

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)	► _____			
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)	► _____			

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A 115 W. Liberty St. Ann Arbor MI 48104

B _____

C _____

D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property	31,403			
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)	3,354			
b Other deductions (attach statement)	1,876			
c Total deductions (add lines 3a and 3b, columns A through D)	5,230			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)	See Statement 2 29,167			
5 Average adjusted basis of or allocable to debt-financed property (attach statement)	17,500			
6 Divide line 4 by line 5	100.00%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6	31,403			
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	► <u>31,403</u>			
9 Allocable deductions. Multiply line 3c by line 6	5,230			
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	► <u>5,230</u>			
11 Total dividends-received deductions included in line 10	► _____			

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organization			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations				
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)

Totals

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)

Totals

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity:	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5	Gross income from activity that is not unrelated business income	5
6	Expenses attributable to income entered on line 5	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A	<input type="checkbox"/>	_____
B	<input type="checkbox"/>	_____
C	<input type="checkbox"/>	_____
D	<input type="checkbox"/>	_____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)	▶ _____			
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)	▶ _____			
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5 Readership costs				
6 Circulation income				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13	▶ _____			

Part X Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1) Marie Klopf	President & CEO	1.00%	1,206
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			▶ 1,206

Part XI Supplemental Information (see instructions)

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Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ Attach to your tax return.

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

OMB No. 1545-0172

2021

Attachment Sequence No. **179**

Name(s) shown on return

Ann Arbor Art Association

Identifying number

23-7205537

Business or activity to which this form relates

Vine and Dine

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,050,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,620,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2020 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12	▶ 13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	41,993

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2021	17	2,063
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2021 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	44,056
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2021)

DAA

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ Attach to your tax return.

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

OMB No. 1545-0172

2021

Attachment Sequence No. **179**

Name(s) shown on return

Ann Arbor Art Association

Identifying number

23-7205537

Business or activity to which this form relates

Rental

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,050,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,620,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2020 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12	▶ 13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	38,605

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2021	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2021 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	38,605
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2021)

DAA

Form 990-T	Schedule A Loss Carryover Calculation	2021
Name <u>Ann Arbor Art Association</u>		Taxpayer Identification Number <u>23-7205537</u>
Description <u>Rental Income</u>		
Unincorporated Business Income Tax Code: <u>531120</u> Activity: <u>Lessors of nonresidential buildi</u>		
Each activity may carryforward losses after 2018		

1 Activity income	1	26,173
2 Activity deductions	2	1,206
3 Activities income or loss, after deductions	3	24,967
4 Enter losses carried over to this year (no amounts prior to 2018) plus any carried-back amounts	4	14,526
5 Enter 100% of the amount on Line 3, if both lines 3 and 4 are positive.	5	24,967
6 Take the lesser of Line 4 or Line 5. Enter here and on Line 17 of Form 990-T, Sch A, Part II	6	14,526
7 Remaining losses to be carried forward to 2022 (Subtract Line 6 from line 4)	7	
8 If line 3 is less than zero, enter that amount here as a positive number	8	0
9 Total loss carried forward to 2022 (Add lines 7 and 8)	9	0

Electronic Filing includes the report of additional amounts for this activity

E1 Post-2017 loss amounts from 2020, indefinite carryover (Reported with Form 990-T, Pt IV, with above UBIT code)	E1	14,526
E2 Prior year activity losses included on Schedule A, Line 17	E2	14,526

Federal Statements

Form 990-T, Part IV, Line 5 - Post 2017 NOL Carryover Amounts

<u>Activity Description</u>	<u>UBIT Num</u>	<u>Available Carryover</u>
Rental Income	531120	\$ 14,526
Total		\$ 14,526

Federal Statements**Rental Income****Statement 1 - Schedule A (990T), Part V, Line 3b - Other Debt Finance Expense Information**

<u>Description</u>	<u>Deduction</u>
Rental	\$
Repairs	1,308
Utilities	568
Total	<u>\$ 1,876</u>

Rental Income**Statement 2 - Schedule A (990T), Part V, Line 4 - Amount of Average Acquisition debt on or Allocable to Debt Financed Property**

<u>Description</u>	<u>Deduction</u>
Rental	
Sum of Debt Outstanding at First of Each Month	7,000,000
Divided by Total Number of Months Property Held	<u>12</u>
Average Acquisition Debt	<u>583,333</u>
Unrelated Activity Percentage	<u>5</u>
Allocated Acquisition Debt	<u>29,167</u>

23-7205537

Federal Asset Report

FYE: 12/31/2021

Vine and Dine

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
47	10 ME-6 Easels	10/30/97	1,281				1,281	5	HY 200DB	1,281	0
	Sold/Scrapped: 12/31/21										
48	Kiln Purchase	4/30/98	1,381				1,381	5	HY 200DB	1,381	0
	Sold/Scrapped: 12/31/21										
49	Electrical Improvements - Liberty	6/15/99	2,790				2,790	7	MQ200DB	2,790	0
50	Office Equipment for Felch	9/15/98	450				450	3	MQ200DB	450	0
	Sold/Scrapped: 12/31/21										
51	Kiln # 1 at Felch Street	4/15/99	3,506				3,506	5	MQ200DB	3,506	0
	Sold/Scrapped: 12/31/21										
52	Kiln # 2 - Highwater Kiln	5/15/99	1,324				1,324	5	MQ200DB	1,324	0
	Sold/Scrapped: 12/31/21										
53	Kiln # 3 - Ramsen Kiln	6/15/99	1,217				1,217	5	MQ200DB	1,217	0
	Sold/Scrapped: 12/31/21										
54	iMac Computer (Marsha)	8/15/99	1,200				1,200	3	MQ200DB	1,200	0
	Sold/Scrapped: 12/31/21										
62	Guardrailing Installation	7/31/00	3,150				3,150	7	HY 200DB	3,150	0
65	Voice Mail Computer Module	4/06/00	2,499				2,499	5	HY 200DB	2,499	0
	Sold/Scrapped: 12/31/21										
70	A/C-Robertson Morrison-Floors 2 & 3	5/31/00	4,550				4,550	7	HY 200DB	4,550	0
71	Roof replacement	6/26/01	13,956				13,956	39	MMS/L	6,993	358
72	Jewelery Press	10/17/00	683				683	7	HY 200DB	683	0
	Sold/Scrapped: 12/31/21										
73	Potter's Wheel	2/22/01	925				925	7	HY 200DB	925	0
	Sold/Scrapped: 12/31/21										
74	Pug Mill	4/17/01	500				500	7	HY 200DB	500	0
	Sold/Scrapped: 12/31/21										
77	Mail Server	12/01/00	1,000				1,000	5	HY 200DB	1,000	0
	Sold/Scrapped: 12/31/21										
117	Server/Computer Upgrades	5/31/13	3,610			X	1,805	5	MQ200DB	3,610	0
118	Furnace - 2nd Floor	6/11/13	8,900			X	4,450	5	MQ200DB	8,900	0
123	Back Door - 117 Gallery	11/10/14	3,650			X	1,825	7	HY 200DB	3,460	163
124	3rd Floor Renovations	4/07/15	38,100				38,100	39	MMS/L	5,577	977
125	Luxor Presentation Cart	2/28/15	141			X	70	7	HY 200DB	134	6
126	Laptop Presentation Cart	2/28/15	144			X	72	7	HY 200DB	137	6
127	Routers	2/28/15	229			X	114	5	HY 200DB	229	0
128	Portable Hard Drive	2/28/15	140			X	70	5	HY 200DB	140	0
129	Epson Scanner	2/28/15	200			X	100	5	HY 200DB	200	0
130	Wacaom Tablets & Protection Plans	2/28/15	984			X	492	5	HY 200DB	984	0
131	Printer	2/28/15	220			X	110	5	HY 200DB	220	0
132	Projector	3/12/15	2,173			X	1,087	7	HY 200DB	2,059	97
133	Kiln	3/17/15	3,718			X	1,859	7	HY 200DB	3,524	166
134	Vent for Kiln	3/19/15	452				452	39	MMS/L	67	12
136	4x6 markerboard	3/31/15	518			X	259	7	HY 200DB	491	23
137	72x30 Table for RHB Art	3/31/15	547			X	273	7	HY 200DB	519	24
139	Tables & Chairs	4/30/15	3,102			X	1,551	7	HY 200DB	2,941	138
140	Da-Lite Projector	4/30/15	250			X	125	7	HY 200DB	237	11
141	Promaster Copy Stands	5/31/15	1,100			X	550	7	HY 200DB	1,043	49
142	Stainless Steel Cabinet	5/31/15	752			X	376	7	HY 200DB	713	33
143	Webcams	6/15/15	620			X	310	5	HY 200DB	620	0
152	Roof Replacement - 117 W Liberty	12/31/18	33,995			X	0	20	HY 150DB	33,995	0
			<u>143,957</u>				<u>94,462</u>			<u>103,249</u>	<u>2,063</u>

Other Depreciation:

1	Building	9/01/97	62,354				62,354	40	MO S/L	62,354	0
2	Building	9/01/97	29,900				29,900	40	MO S/L	24,917	747
4	Building Improvements	9/01/97	86,682				86,682	30	MO S/L	86,682	0
5	Building Improvements	9/01/97	24,277				24,277	30	MO S/L	24,277	0
6	Building Improvements	9/01/97	9,115				9,115	30	MO S/L	9,115	0
7	Building Improvements	9/01/97	43,834				43,834	30	MO S/L	43,834	0
8	Building Improvements	9/01/97	53,707				53,707	30	MO S/L	53,707	0
9	Building Improvements	9/01/97	10,453				10,453	30	MO S/L	10,453	0
10	Building Improvements	9/01/97	24,917				24,917	30	MO S/L	24,917	0
11	Building Improvements	9/01/97	31,808				31,808	30	MO S/L	31,101	707
12	Building Improvements	9/01/97	13,358				13,358	30	MO S/L	12,172	445
13	Building Improvements	9/01/97	14,334				14,334	30	MO S/L	11,149	477
14	Building Improvements	9/01/97	10,578				10,578	30	MO S/L	8,933	352
15	Building Improvements	9/01/97	31,550				31,550	30	MO S/L	25,591	1,051

23-7205537

Federal Asset Report

FYE: 12/31/2021

Vine and Dine

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Sec Bonus	Basis for Depr	PerConv Meth	Prior	Current
18	Land	9/01/97	25,000				25,000	0 -- Land	0	0
19	Kiln ED	9/01/97	1,260				1,260	10 MO S/L	1,260	0
	Sold/Scrapped: 12/31/21									
20	Kiln ED	9/01/97	1,200				1,200	10 MO S/L	1,200	0
	Sold/Scrapped: 12/31/21									
21	Loom	9/01/97	1,315				1,315	10 MO S/L	1,315	0
	Sold/Scrapped: 12/31/21									
22	Computer Performa	9/01/97	1,415				1,415	5 MO S/L	1,415	0
	Sold/Scrapped: 12/31/21									
23	Computer Performa	9/01/97	1,415				1,415	5 MO S/L	1,415	0
	Sold/Scrapped: 12/31/21									
24	Computer Performa	9/01/97	1,415				1,415	5 MO S/L	1,415	0
	Sold/Scrapped: 12/31/21									
25	Computer Performa	9/01/97	1,415				1,415	5 MO S/L	1,415	0
	Sold/Scrapped: 12/31/21									
26	Computer Performa	9/01/97	1,415				1,415	5 MO S/L	1,415	0
	Sold/Scrapped: 12/31/21									
27	Tent SW	9/01/97	2,018				2,018	5 MO S/L	2,018	0
	Sold/Scrapped: 12/31/21									
28	Tent SW	9/01/97	2,018				2,018	5 MO S/L	2,018	0
	Sold/Scrapped: 12/31/21									
29	Phone System	9/01/97	8,178				8,178	5 MO S/L	8,178	0
	Sold/Scrapped: 12/31/21									
30	Computer Performa	9/01/97	1,199				1,199	5 MO S/L	1,199	0
	Sold/Scrapped: 12/31/21									
31	Laserwriter	9/01/97	1,910				1,910	5 MO S/L	1,910	0
	Sold/Scrapped: 12/31/21									
33	Kiln FOC	9/01/97	2,590				2,590	10 MO S/L	2,590	0
	Sold/Scrapped: 12/31/21									
34	Kiln FOC	9/01/97	2,590				2,590	10 MO S/L	2,590	0
	Sold/Scrapped: 12/31/21									
35	Computer Performa 96/7	9/01/97	2,140				2,140	5 MO S/L	2,140	0
	Sold/Scrapped: 12/31/21									
36	Feat of Clay Furniture	9/01/97	2,624				2,624	10 MO S/L	2,624	0
	Sold/Scrapped: 12/31/21									
37	Feat of Clay Display	9/01/97	1,054				1,054	10 MO S/L	1,054	0
	Sold/Scrapped: 12/31/21									
38	Computer 95/6	9/01/97	1,677				1,677	5 MO S/L	1,677	0
	Sold/Scrapped: 12/31/21									
39	Shop Display & Sales Desk	9/01/97	9,965				9,965	10 MO S/L	9,965	0
	Sold/Scrapped: 12/31/21									
40	ArtVentures Furniture	9/01/97	2,541				2,541	10 MO S/L	2,541	0
	Sold/Scrapped: 12/31/21									
41	Weaving Benches	9/01/97	1,080				1,080	10 MO S/L	1,080	0
	Sold/Scrapped: 12/31/21									
42	Brent Wheel	9/01/97	615				615	10 MO S/L	615	0
43	Brent Wheel	9/01/97	615				615	10 MO S/L	615	0
44	Brent Wheel	9/01/97	615				615	10 MO S/L	615	0
45	Artventures Sign	9/01/97	3,000				3,000	10 MO S/L	3,000	0
	Sold/Scrapped: 12/31/21									
46	Education Chairs	9/01/97	6,220				6,220	10 MO S/L	6,220	0
	Sold/Scrapped: 12/31/21									
67	MIP Software	9/07/99	7,362				7,362	3 MO S/L	7,362	0
	Sold/Scrapped: 12/31/21									
68	MIP Professional Services	2/28/00	2,693				2,693	3 MO S/L	2,693	0
	Sold/Scrapped: 12/31/21									
76	Microsoft Windows 2000	1/09/01	1,938				1,938	3 MO S/L	1,938	0
	Sold/Scrapped: 12/31/21									
79	Felch Equipment	4/18/02	13,680				13,680	5 MO S/L	13,680	0
	Sold/Scrapped: 12/31/21									
80	Liberty Equipment	7/31/02	4,782				4,782	7 MO S/L	4,782	0
	Sold/Scrapped: 12/31/21									
82	Felch Cabinets	4/15/03	2,516				2,516	7 MO S/L	2,516	0
	Sold/Scrapped: 12/31/21									
85	Projector & Screen	8/08/04	1,199				1,199	7 MO S/L	1,199	0
	Sold/Scrapped: 12/31/21									
86	Marsha's Dell Computer	9/27/04	1,982				1,982	3 MO S/L	1,982	0
	Sold/Scrapped: 12/31/21									
87	Lap top	12/14/04	1,200				1,200	3 MO S/L	1,200	0
	Sold/Scrapped: 12/31/21									
88	Filemaker / MIP accounting software upgra	2/25/05	2,839				2,839	3 MO S/L	2,839	0

23-7205537

Federal Asset Report

FYE: 12/31/2021

Vine and Dine

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
91	Furnace	3/24/06	3,500				3,500	10	MO S/L	3,500	0
	Sold/Scrapped: 12/31/21										
93	Furnance replacement	3/03/07	5,400				5,400	15	MO S/L	4,950	360
94	Bryant A/C Condenser	6/20/07	3,951				3,951	15	MO S/L	3,556	263
95	1st floor bathroom improvements	3/15/09	885				885	15	MO S/L	699	59
96	L/I Space planning	3/31/09	5,497				5,497	15	MO S/L	4,306	366
97	Remodeling	4/30/09	20,935				20,935	15	MO S/L	16,283	1,396
98	Remodeling	5/15/09	7,067				7,067	15	MO S/L	5,496	472
99	REmodeling	6/15/09	63,346				63,346	15	MO S/L	48,917	4,223
100	remodeling	7/15/09	2,618				2,618	15	MO S/L	2,007	175
101	Remodeling	8/15/09	2,042				2,042	15	MO S/L	1,554	136
102	Remodeling	9/15/09	13,353				13,353	15	MO S/L	10,089	890
103	Remodeling	11/15/09	1,357				1,357	15	MO S/L	1,011	90
104	Remodeling	1/01/10	1,300				1,300	15	MO S/L	953	87
105	Remodeling	2/19/10	5,000				5,000	15	MO S/L	3,611	333
106	Metal Sandwich Board	12/01/09	1,220				1,220	7	MO S/L	1,220	0
	Sold/Scrapped: 12/31/21										
107	Kiln	3/22/10	2,595				2,595	7	MO S/L	2,595	0
108	Pottery Wheel	7/21/10	1,161				1,161	7	MO S/L	1,161	0
109	Kiln for Ceramic Studio	7/06/11	2,492				2,492	5	MO S/L	2,492	0
110	Remodeling	3/10/11	9,923				9,923	15	MO S/L	6,505	662
111	Emergency Lighting	12/31/11	2,993				2,993	15	MO S/L	1,796	199
112	Building Improvements	6/29/12	7,500				7,500	15	MO S/L	4,250	500
113	Pottery Wheel	1/05/12	1,104				1,104	7	MO S/L	1,104	0
114	Building Improvements	5/09/13	6,916				6,916	15	MO S/L	3,535	461
115	New Awning	5/21/13	1,938				1,938	15	MO S/L	980	129
116	QuickBooks Software	5/17/13	1,700			X	850	3	MOAmort	1,700	0
119	New Windows S of Building	9/26/13	18,260			X	18,260	15	MO S/L	8,826	1,217
120	Doorlocks/Drywall 3rd Floor	10/31/13	1,743				1,743	15	MO S/L	833	116
121	Electrical Work	10/31/13	2,469				2,469	15	MO S/L	1,180	164
122	Women's Toilets - 3rd Floor	10/31/13	1,353				1,353	15	MO S/L	646	91
135	iStop Motion licenses (6)	3/31/15	288			X	144	3	MOAmort	288	0
138	Art Labs Software	4/30/15	368			X	184	3	MOAmort	368	0
144	Jewelry Studio Remodel	5/01/16	36,176				36,176	15	MO S/L	10,451	2,412
145	Office Equipment 2016	7/01/16	4,819				4,819	7	MO S/L	2,983	689
146	Elevator Update Project	9/30/17	91,562				91,562	15	MO S/L	19,838	6,105
149	QB POS V18	5/13/18	2,033			X	0	3	MOAmort	2,033	0
	Sold/Scrapped: 12/31/21										
150	Ceramic Studio Remodel	10/07/18	140,083				140,083	20	MO S/L	15,759	7,004
153	Facade Renovation	1/31/19	71,292				71,292	20	MO S/L	6,832	3,565
154	New Server	2/28/19	2,352				2,352	5	MO S/L	863	470
156	Uline Tables for Education	10/30/19	1,689				1,689	10	MO S/L	197	169
157	Shimpro RK-Whisper Throwing Wheel	2/05/20	1,148				1,148	10	MO S/L	105	115
158	Education office remodel	2/01/20	3,539				3,539	20	MO S/L	162	177
159	Electric service upgrade	6/16/20	28,403				28,403	20	MO S/L	710	1,420
160	115 W Liberty Building Remodel Educaitor	1/01/20	147,950				147,950	40	MO S/L	3,699	3,699
161	AAA Center Renovations 2021	12/31/21	90,768				90,768	0	-- Memo	0	0
	Total Other Depreciation		<u>1,397,645</u>				<u>1,394,434</u>			<u>742,935</u>	<u>41,993</u>
	Total ACRS and Other Depreciation		<u>1,397,645</u>				<u>1,394,434</u>			<u>742,935</u>	<u>41,993</u>
	Grand Totals		1,541,602				1,488,896			846,184	44,056
	Less: Dispositions and Transfers		124,564				122,531			124,564	0
	Less: Start-up/Org Expense		0				0			0	0
	Net Grand Totals		<u>1,417,038</u>				<u>1,366,365</u>			<u>721,620</u>	<u>44,056</u>

23-7205537

Federal Asset Report

FYE: 12/31/2021

Rental

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
161	Bonny Doon 3" Deep-Draw Kit	1/01/20	1,985		X	0	5 HY 200DB	1,985	0
162	Bonny Doon 20-Ton Mark III Electric Hydr	1/01/20	5,818		X	0	5 HY 200DB	5,818	0
163	Durston 158mm Double Combination Rollin	1/01/20	2,850		X	0	5 HY 200DB	2,850	0
164	Fretz Forming DVD/Tool Master Set	1/01/20	1,725		X	0	5 HY 200DB	1,725	0
165	Bonny Doon Steel 6" Master Deep-Draw K1	1/01/20	3,277		X	0	5 HY 200DB	3,277	0
166	Bonny Doon Steel 6" Re-Draw Kit	1/01/20	1,781		X	0	5 HY 200DB	1,781	0
167	VIC 12 Tabletop Solid and perforated-flask	1/01/20	1,850		X	0	5 HY 200DB	1,850	0
168	Kiln X-LG Prog Electric 220V Safety Switc	1/01/20	3,125		X	0	5 HY 200DB	3,125	0
			<u>22,411</u>			<u>0</u>		<u>22,411</u>	<u>0</u>
Other Depreciation:									
147	115 W. Liberty Land	12/15/17	162,500			162,500	0 -- Land	0	0
148	115. W Liberty Building	12/15/17	1,462,500			1,462,500	39 MO S/L	115,625	37,500
151	Roof Replacement - 115 W Liberty	12/31/18	22,097			22,097	20 MO S/L	2,210	1,105
	Total Other Depreciation		<u>1,647,097</u>			<u>1,647,097</u>		<u>117,835</u>	<u>38,605</u>
	Total ACRS and Other Depreciation		<u>1,647,097</u>			<u>1,647,097</u>		<u>117,835</u>	<u>38,605</u>
	Grand Totals		1,669,508			1,647,097		140,246	38,605
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>1,669,508</u>			<u>1,647,097</u>		<u>140,246</u>	<u>38,605</u>

23-7205537

Future Depreciation Report**FYE: 12/31/22**

FYE: 12/31/2021

Vine and Dine

Asset	Description	Date In Service	Cost	Tax	AMT
<u>Prior MACRS:</u>					
49	Electrical Improvements - Liberty	6/15/99	2,790	0	0
62	Guardrailing Installation	7/31/00	3,150	0	0
70	A/C-Robertson Morrison-Floors 2 & 3	5/31/00	4,550	0	0
71	Roof replacement	6/26/01	13,956	358	0
117	Server/Computer Upgrades	5/31/13	3,610	0	0
118	Furnace - 2nd Floor	6/11/13	8,900	0	0
123	Back Door - 117 Gallery	11/10/14	3,650	27	0
124	3rd Floor Renovations	4/07/15	38,100	976	0
125	Luxor Presentation Cart	2/28/15	141	1	0
126	Laptop Presentation Cart	2/28/15	144	1	0
127	Routers	2/28/15	229	0	0
128	Portable Hard Drive	2/28/15	140	0	0
129	Epson Scanner	2/28/15	200	0	0
130	Wacaom Tablets & Protection Plans	2/28/15	984	0	0
131	Printer	2/28/15	220	0	0
132	Projector	3/12/15	2,173	17	0
133	Kiln	3/17/15	3,718	28	0
134	Vent for Kiln	3/19/15	452	11	0
136	4x6 markerboard	3/31/15	518	4	0
137	72x30 Table for RHB Art	3/31/15	547	4	0
139	Tables & Chairs	4/30/15	3,102	23	0
140	Da-Lite Projector	4/30/15	250	2	0
141	Promaster Copy Stands	5/31/15	1,100	8	0
142	Stainless Steel Cabinet	5/31/15	752	6	0
143	Webcams	6/15/15	620	0	0
152	Roof Replacement - 117 W Liberty	12/31/18	33,995	0	0
			<u>127,991</u>	<u>1,466</u>	<u>0</u>

Other Depreciation:

1	Building	9/01/97	62,354	0	0
2	Building	9/01/97	29,900	748	0
4	Building Improvements	9/01/97	86,682	0	0
5	Building Improvements	9/01/97	24,277	0	0
6	Building Improvements	9/01/97	9,115	0	0
7	Building Improvements	9/01/97	43,834	0	0
8	Building Improvements	9/01/97	53,707	0	0
9	Building Improvements	9/01/97	10,453	0	0
10	Building Improvements	9/01/97	24,917	0	0
11	Building Improvements	9/01/97	31,808	0	0
12	Building Improvements	9/01/97	13,358	445	0
13	Building Improvements	9/01/97	14,334	478	0
14	Building Improvements	9/01/97	10,578	353	0
15	Building Improvements	9/01/97	31,550	1,052	0
18	Land	9/01/97	25,000	0	0
42	Brent Wheel	9/01/97	615	0	0
43	Brent Wheel	9/01/97	615	0	0
44	Brent Wheel	9/01/97	615	0	0
93	Furnance replacement	3/03/07	5,400	90	0
94	Bryant A/C Condenser	6/20/07	3,951	132	0
95	1st floor bathroom improvements	3/15/09	885	59	0
96	L/I Space planning	3/31/09	5,497	367	0
97	Remodeling	4/30/09	20,935	1,395	0
98	Remodeling	5/15/09	7,067	471	0
99	REmodeling	6/15/09	63,346	4,223	0
100	remodeling	7/15/09	2,618	174	0
101	Remodeling	8/15/09	2,042	136	0
102	Remodeling	9/15/09	13,353	890	0
103	Remodeling	11/15/09	1,357	91	0
104	Remodeling	1/01/10	1,300	87	0
105	Remodeling	2/19/10	5,000	334	0
107	Kiln	3/22/10	2,595	0	0
108	Pottery Wheel	7/21/10	1,161	0	0
109	Kiln for Ceramic Studio	7/06/11	2,492	0	0
110	Remodeling	3/10/11	9,923	661	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
111	Emergency Lighting	12/31/11	2,993	200	0
112	Building Improvements	6/29/12	7,500	500	0
113	Pottery Wheel	1/05/12	1,104	0	0
114	Building Improvements	5/09/13	6,916	461	0
115	New Awning	5/21/13	1,938	129	0
116	QuickBooks Software	5/17/13	1,700	0	0
119	New Windows S of Building	9/26/13	18,260	1,218	0
120	Doorlocks/Drywall 3rd Floor	10/31/13	1,743	116	0
121	Electrical Work	10/31/13	2,469	165	0
122	Women's Toilets - 3rd Floor	10/31/13	1,353	90	0
135	iStop Motion licenses (6)	3/31/15	288	0	0
138	Art Labs Software	4/30/15	368	0	0
144	Jewelry Studio Remodel	5/01/16	36,176	2,411	0
145	Office Equipment 2016	7/01/16	4,819	688	0
146	Elevator Update Project	9/30/17	91,562	6,104	0
150	Ceramic Studio Remodel	10/07/18	140,083	7,005	0
153	Facade Renovation	1/31/19	71,292	3,564	0
154	New Server	2/28/19	2,352	470	0
156	Uline Tables for Education	10/30/19	1,689	169	0
157	Shimpro RK-Whisper Throwing Wheel	2/05/20	1,148	115	0
158	Education office remodel	2/01/20	3,539	177	0
159	Electric service upgrade	6/16/20	28,403	1,420	0
160	115 W Liberty Building Remodel Educaiton	1/01/20	147,950	3,698	0
161	AAA Center Renovations 2021	12/31/21	90,768	0	0
	Total Other Depreciation		<u>1,289,047</u>	<u>40,886</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>1,289,047</u>	<u>40,886</u>	<u>0</u>
	Grand Totals		<u>1,417,038</u>	<u>42,352</u>	<u>0</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Prior MACRS:</u>					
161	Bonny Doon 3" Deep-Draw Kit	1/01/20	1,985	0	0
162	Bonny Doon 20-Ton Mark III Electric Hydraulic	1/01/20	5,818	0	0
163	Durston 158mm Double Combination Rolling M	1/01/20	2,850	0	0
164	Fretz Forming DVD/Tool Master Set	1/01/20	1,725	0	0
165	Bonny Doon Steel 6" Master Deep-Draw Kt	1/01/20	3,277	0	0
166	Bonny Doon Steel 6" Re-Draw Kit	1/01/20	1,781	0	0
167	VIC 12 Tabletop Solid and perforated-flask	1/01/20	1,850	0	0
168	Kiln X-LG Prog Electric 220V Safety Switch	1/01/20	3,125	0	0
			<u>22,411</u>	<u>0</u>	<u>0</u>
<u>Other Depreciation:</u>					
147	115 W. Liberty Land	12/15/17	162,500	0	0
148	115. W Liberty Building	12/15/17	1,462,500	37,500	0
151	Roof Replacement - 115 W Liberty	12/31/18	22,097	1,104	0
	Total Other Depreciation		<u>1,647,097</u>	<u>38,604</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>1,647,097</u>	<u>38,604</u>	<u>0</u>
	Grand Totals		<u>1,669,508</u>	<u>38,604</u>	<u>0</u>

Form 990-T	Business Income Activity Summary	2021
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Name <u>Ann Arbor Art Association</u>	Taxpayer Identification Number <u>23-7205537</u>
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Business Activity Income (and allocation of Prior-2018 NOL)

A. Total Pre-2018 Net Operating Losses Carried Forward	A. <u>25,573</u>
B. Total Pre-2018 Net Operating Loss allocated to Sch A activities	B. _____
C. Total Pre-2018 Net Operating Loss allocated to Form 990-T, Line 6	C. <u>10,441</u>
D. Pre-2018 Applied (Sum of B and C)	D. <u>10,441</u>
E. Pre-2018 Remaining (Line A minus Line D)	E. <u>15,132</u>
F. Pre-2018 Net Operating Losses Expiring this Year	F. _____
G. Pre-2018 Net Operating Losses Carried Forward	G. <u>15,132</u>

Unrelated Business Income Activity with Income	Code	Net Income	Allocated Pre2018 NOL
1. <u>Rental Income</u>	<u>531120</u>	1. <u>10,441</u>	_____
2. _____		2. _____	_____
3. _____		3. _____	_____
4. _____		4. _____	_____
5. _____		5. _____	_____
6. _____		6. _____	_____
7. _____		7. _____	_____
8. _____		8. _____	_____
9. _____		9. _____	_____
10. _____		10. _____	_____
11. _____		11. _____	_____
12. _____		12. _____	_____
13. _____		13. _____	_____
14. _____		14. _____	_____
15. All other revenue		15. _____	_____
16. Total taxable income		16. <u>10,441</u>	_____

Business Activity Losses

Unrelated Business Income Activity with Losses	Code	Current Year Loss
1. _____		1. _____
2. _____		2. _____
3. _____		3. _____
4. _____		4. _____
5. All other activities		5. _____
6. Totals		6. _____

Form 990-T		Net Operating Loss Carryover Worksheet for Pre-2018 Losses			2021
		For calendar year 2021, or tax year beginning _____, ending _____			
Name Ann Arbor Art Association				Employer Identification Number 23-7205537	
Preceding Taxable Year	Adj. To NOL Inc/(Loss) After Adj.	Prior Year		Current Year	Next Year Carryover
		NOL Utilized (Income Offset)	Carryovers to Current Year	Income Offset By Prior Carryover	
17th 12/31/01					
16th 12/31/02					
15th 12/31/03					
14th 12/31/04					
13th 12/31/05					
12th 12/31/06					
11th 12/31/07					
10th 12/31/08					
9th 12/31/09					
8th 12/31/10					
7th 12/31/11					
6th 12/31/12					
5th 12/31/13					
4th 12/31/14					
3rd 12/31/15					
2nd 12/31/16					
1st 12/31/17	-25,573		25,573	10,441	15,132
NOL carryover available to current year			25,573		
Current year	10,441			10,441	
NOL carryover available to next year					15,132

Form **990****Tax Return History****2021**

Name

Ann Arbor Art Association

Employer Identification Number

23-7205537

	2017	2018	2019	2020	2021	2022
Contributions, gifts, grants	706,128			595,706	1,704,276	
Membership dues	9,510				8,204	
Program service revenue	555,936			93,818	366,736	
Capital gain or loss						
Investment income	23,997			10,455	33,963	
Fundraising revenue (income/loss)	3,678				-1,275	
Gaming revenue (income/loss)						
Other revenue	64,396			62,422	139,415	
Total revenue	1,363,645			762,401	2,251,319	
Grants and similar amounts paid	11,611				238,950	
Benefits paid to or for members						
Compensation of officers, etc.	100,000			42,767	120,587	
Other compensation	577,432			132,612	389,144	
Professional fees	40,742			24,682	67,924	
Occupancy costs	82,324			9,807	47,224	
Depreciation and depletion	34,476			28,626	85,370	
Other expenses	203,214			334,033	374,853	
Total expenses	1,049,799			572,527	1,324,052	
Excess or (Deficit)	313,846			189,874	927,267	
Total exempt revenue	1,363,645			762,401	2,251,319	
Total unrelated revenue	-25,573			13,818	26,173	
Total excludable revenue	669,902			152,877	513,941	
Total Assets	3,828,244			3,570,259	3,961,108	
Total Liabilities	2,402,827			945,100	408,682	
Net Fund Balances	1,425,417	1,425,417		2,625,159	3,552,426	

Form 990T	Tax Return History	2021
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Name Ann Arbor Art Association	Employer Identification Number 23-7205537
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* Income shown net of expenses

	2017	2018	2019	2020	2021	2022
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income	147,252					
Total trade or business income.	147,252				10,441	
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

Form 990T	Tax Return History	2021
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Name Ann Arbor Art Association	Employer Identification Number 23-7205537
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	2017	2018	2019	2020	2021	2022
Other deductions	172,825					
Net income (first activity, year 2019 & prior)	-25,573				10,441	
UBTI from all trades	0	0	0	0	10,441	
Charitable contributions						
Net operating loss deduction					10,441	
Specific deduction				1,000	1,000	
Section 199A deduction (trusts)						
Income after deductions						
Income tax (corporate or trust)	-3,575					
Other taxes						
Total taxes	-3,575					
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

Federal Statements**Tax-Exempt Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
Endowment Earnings	\$ 33,963				14	
Total	<u>\$ 33,963</u>					

Federal Statements

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
Other professional fees	\$ 14,124	\$ 525	\$ 13,599	\$
Total	\$ 14,124	\$ 525	\$ 13,599	\$ 0

Schedule A, Part III, Line 1(e)

Description	Amount
	\$ 8,204
	60,000
Contributions Vine and Dine Cash Contribution	1,594,447
Artini Cash Contribution	25,336
	24,493
Total	\$ 1,712,480

Schedule A, Part III, Line 2(e)

Description	Amount
Class Fees	\$ 336,560
Gallery Space Rental Income	
Art Placement Services	30,176
Vine and Dine	2,455
Gallery Sales	128,363
Artini	7,183
Art & Brew	
Total	\$ 504,737

Federal Statements

Schedule A, Part III, Line 3(e)

Description	Amount
Other Income	\$ 6,758
Total	\$ 6,758

Schedule A, Part III, Line 7a - Support from Disqualified Persons

Donor Name	2017	2018	2019	2020	2021
	\$ 161,575	\$ 390,000	\$ 880,097	\$ 81,485	\$ 1,107,210
Total	\$ 161,575	\$ 390,000	\$ 880,097	\$ 81,485	\$ 1,107,210

Schedule A, Part III, Line 10a(e)

Description	Amount
Endowment Earnings	\$ 33,963
Total	\$ 33,963

Schedule A, Part III, Line 11

Description	Amount
Other Special Events	\$ 5,376
Rental	26,173
Less: Deductions	-1,000
Total	\$ 30,549

Federal Statements**Vine and Dine****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Artist honorarium	\$ 525
Supplies & materials	4,276
Merchant fees	633
Dues, fees, subscriptions	800
Ad purchases	160
Postage	58
Total	<u>\$ 6,452</u>

Artini**Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Supplies and materials	\$ 3,524
Merchant fees	877
Ad purchases	60
Total	<u>\$ 4,461</u>

Forms 990 / 990-EZ Return Summary

For calendar year 2021, or tax year beginning _____, and ending _____

23-7205537

Ann Arbor Art Association

Net Asset / Fund Balance at Beginning of Year 2,625,159

Revenue

Contributions	<u>1,712,480</u>	
Program service revenue	<u>366,736</u>	
Investment income	<u>33,963</u>	
Capital gain / loss	<u> </u>	
Fundraising / Gaming:		
Gross revenue	<u>9,638</u>	
Direct expenses	<u>10,913</u>	
Net income	<u>-1,275</u>	
Other income	<u>139,415</u>	
Total revenue		<u>2,251,319</u>

Expenses

Program services	<u>809,274</u>	
Management and general	<u>125,363</u>	
Fundraising	<u>389,415</u>	
Total expenses		<u>1,324,052</u>
Excess / (deficit)		<u>927,267</u>

Changes

Net Asset / Fund Balance at End of Year 3,552,426

Reconciliation of Revenue

Total revenue per financial statements	<u>2,267,462</u>	
Less:		
Unrealized gains	<u> </u>	
Donated services	<u> </u>	
Recoveries	<u> </u>	
Other	<u>16,143</u>	
Plus:		
Investment expenses	<u> </u>	
Other	<u> </u>	
Total revenue per return	<u>2,251,319</u>	

Reconciliation of Expenses

Total expenses per financial statements	<u>1,340,195</u>	
Less:		
Donated services	<u> </u>	
Prior year adjustments	<u> </u>	
Losses	<u> </u>	
Other	<u>16,143</u>	
Plus:		
Investment expenses	<u> </u>	
Other	<u>-3,354</u>	
Total expenses per return	<u>1,324,052</u>	

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>3,570,259</u>	<u>3,961,108</u>	
Liabilities	<u>945,100</u>	<u>408,682</u>	
Net assets	<u>2,625,159</u>	<u>3,552,426</u>	<u>927,267</u>

Miscellaneous Information

Amended return _____
 Return / extended due date 11/15/22
 Failure to file penalty _____

Form 990-T Return Summary

For calendar year 2021, or tax year beginning _____, and ending _____

23-7205537

Ann Arbor Art Association

Income & Losses (Form 990-T, Sch A)	# of Schedules	<u>1</u>	
Income from all activities		<u>10,441</u>	
Losses from all activities		_____	
Unrelated business taxable income from all trades			<u>10,441</u>
Income Adjustments (Form 990-T, Part I)			
Disallowed fringe benefits		_____	
Charitable contributions		_____	
Net operating loss (prior to 2018)		<u>10,441</u>	
Specific deduction		<u>1,000</u>	
Section 199A Deduction (Trusts Only)		_____	
Total adjustments			<u>(11,441)</u>
Unrelated business taxable income			=====
Taxes & Credits (Form 990-T, Part II and III)			
Regular tax		_____	
Other tax: <input type="checkbox"/> Proxy <input type="checkbox"/> AMT <input type="checkbox"/> Facilities		_____	
Tax Due			_____
Foreign tax credit and other credits		_____	
General business credits		_____	
Prior year minimum tax credit		_____	
Total nonrefundable credits			_____
Other taxes		_____	
Total tax			=====
Payments & Penalties			
Estimated tax payments and Tax withheld		_____	
Paid with extension		_____	
Refundable credits and other payments		_____	
Payments			_____
Net tax due			=====
Estimated tax penalty		_____	
Interest on late payments		_____	
Failure to file penalty		_____	
Failure to pay penalty		_____	
Penalties			_____
Balance due			=====
Total overpayment		_____	
Overpayment applied to next year's tax		_____	
Refund			=====

Next Year's Estimates

1st quarter _____
 2nd quarter _____
 3rd quarter _____
 4th quarter _____
Total _____

Miscellaneous Information

Amended return _____
 Return / extended due date 11/15/22