BUDGET SUMMARY

HISTORY OF DEPARTMENT-

Founded in April 1971 with 33 members Incorporated June 1971 as a non-profit corporation. Dana Fire & Rescue has undergone many changes since 1971, Dana Fire & Rescue now have 24 members, three 24-hour paid Firefighters, one paid Chief and 19 part-time paid Firefighters.

Within our membership we have 21 State certified Level II Firefighters, 18 Firefighters who are certified in the Emergency Medical field, 13 State certified Technical Rescuer and 15 State certified Driver/Operator. Dana Fire & Rescue has undergone numerous changes and continues to plan for the future of Dana Fire & Rescue and the community.

GOALS AND ACCOMPLISHMENTS -

GOALS -

Maintain our Class 4 rating and to lower that in 2026.

ACCOMPLISHMENTS -

Awarded the SAFER grant in August 2024, started January 2025

PRESENT AND FUTURE NEEDS –

Future Needs — Replace a 1999 Pumper/Tanker

ANNEXATION - N/A

EQUIPMENT FINANCES – See Budget

INSURANCE RATINGS – Class Four

MANPOWER -

Dana Fire & Rescue has 24 members, 6 of which is 24-hour shift Firefighters, one paid Chief and 24-hour part-time firefighter. Giving us four available during the day.

REDISTRICTING –

N/A

SALARIES –

See Budget

Substations –

N/A

| Dana Fire Department | | | | |
|---|------------------|----------------|------------------|-------------------|
| ITEM DESCRIPTION | 2024-2025 BUDGET | YEAR-TO-DATE | 2025-2026 BUDGET | INCREASE/DECREASE |
| | | AS OF | | |
| REVENUE | | | | |
| PRESENT/REQUESTED TAX RATE | | | | |
| ACTUAL HENDERSON COUNTY REVENUE RECEIVED | | | | |
| Henderson County Ad Valorem Taxes | \$1,296,704.16 | \$1,311,606.49 | \$1,315,135.57 | \$18,431.41 |
| Donations | | | | \$0.00 |
| Fundraising | | | | \$0.00 |
| Grants | | | \$196,070.52 | \$196,070.52 |
| HazMat Charges | | | | \$0.00 |
| Interest Income | \$1,000.00 | \$551.88 | \$1,000.00 | \$0.00 |
| Miscellaneous | | | | \$0.00 |
| NC County Sales Tax Refund | \$3,000.00 | \$9,674.72 | \$4,500.00 | \$1,500.00 |
| NC Fuel Tax Refund | \$1,200.00 | \$343.17 | \$1,200.00 | \$0.00 |
| Other Income (City, Other Counties, Town) | \$5,000.00 | \$5,080.47 | \$5,000.00 | \$0.00 |
| Rental Income | | | | \$0.00 |
| Sales of Assets | | | | \$0.00 |
| Total Revenues | \$1,306,904.16 | \$1,327,256.73 | \$1,522,906.09 | \$216,001.93 |
| FOOTNOTES | | | | |
| | l . | L | | l . |

| Dana Fire Department | | | | |
|---|------------------|------------------------|------------------|-------------------|
| ITEM DESCRIPTION | 2024-2025 BUDGET | YEAR-TO-DATE | 2025-2026 BUDGET | INCREASE/DECREASE |
| | | AS OF | | |
| EXPENDITURES | | 3/31/2025 | | |
| Administrative Cost | | | | |
| Annual Payment - Apparatus | \$45,357.12 | \$34,017.84 | \$54,584.80 | \$9,227.68 |
| Annual Payment - Building | | | | \$0.00 |
| Annual Payment - Other Equipment | | | | \$0.00 |
| Appreciation and Award Banquets | \$14,000.00 | \$10,639.51 | \$14,000.00 | \$0.00 |
| Bank Charges | \$165.00 | \$121.20 | \$165.00 | \$0.00 |
| Building Fund | | | | \$0.00 |
| Chaplain | | | | \$0.00 |
| Computer | | | | \$0.00 |
| Contingency Funds | \$28,388.16 | \$33,506.37 | \$140,799.29 | \$112,411.13 |
| Contract Labor (Part-Time Clerk) | | | | \$0.00 |
| County/State Tax | | | | \$0.00 |
| Discretionary Fund | | | | \$0.00 |
| Deposits/Down Payment | | | | \$0.00 |
| Dues/Subscriptions | \$9,000.00 | \$23,882.04 | \$9,000.00 | \$0.00 |
| Expendable Supplies | | | | \$0.00 |
| Flowers/Gifts | | | | \$0.00 |
| Food | | | | \$0.00 |
| nsurance - Building, Business Umbrella, Error | \$32,000.00 | \$32,522.32 | - | \$8,000.00 |
| ∟egal and Professional Fees | \$11,680.00 | \$11,360.00 | \$12,380.00 | \$700.00 |
| Licenses and Permits | | | | \$0.00 |
| Miscellaneous | | | | \$0.00 |
| Office Supplies | \$7,000.00 | \$6,184.34 | \$7,000.00 | \$0.00 |
| Public Relations | \$7,000.00 | \$6,994.16 | \$7,000.00 | \$0.00 |
| Rent | 45.053.53 | *** | 45.000 | \$0.00 |
| On Scene Support | \$5,000.00 | \$283.21 | \$5,000.00 | \$0.00 |
| Optional Line Item) | | | | \$0.00 |
| Optional Line Item) | | | | \$0.00 |
| Optional Line Item) | | * / * ** | | \$0.00 |
| otal Administrative Cost | \$159,590.28 | \$159,510.99 | \$289,929.09 | \$130,338.81 |

| | 2024-2025 BUDGET | YEAR-TO-DATE | 2025-2026 BUDGET | INCREASE/DECREASE |
|---|------------------|--------------|------------------|-------------------|
| Operational Cost | | | | |
| Breathing Apparatus | | | | \$0.00 |
| Communications (radios, pagers, cell phone) | \$11,000.00 | \$15,444.05 | \$15,000.00 | \$4,000.00 |
| EMT Supplies & Equipment | \$4,000.00 | \$2,994.93 | \$4,000.00 | \$0.00 |
| Firefighting Supplies & Equipment | \$12,000.00 | \$5,252.26 | \$12,000.00 | \$0.00 |
| Firefighting Equipment Maintenance | \$5,000.00 | \$2,845.80 | \$5,000.00 | \$0.00 |
| Fuel | \$20,000.00 | \$11,110.10 | \$20,000.00 | \$0.00 |
| Hazardous Materials Supplies | | | | \$0.00 |
| Infection Control | | | | \$0.00 |
| Maintenance/Repair of Apparatus | \$34,000.00 | \$20,646.01 | \$34,000.00 | \$0.00 |
| DOI | | | | \$0.00 |
| Physical Fitness | \$3,380.00 | \$0.00 | \$5,200.00 | \$1,820.00 |
| Public Education and Fire Prevention | | | | \$0.00 |
| Rehabilitation | | | | \$0.00 |
| Rescue Equipment | | | | \$0.00 |
| Training | \$10,000.00 | \$5,516.41 | \$10,000.00 | \$0.00 |
| Turn Out Gear | \$38,500.00 | \$10,229.60 | \$20,000.00 | (\$18,500.00) |
| Uniforms | \$6,000.00 | \$10,229.60 | \$10,000.00 | \$4,000.00 |
| PPE | \$10,000.00 | \$8,701.18 | \$10,000.00 | \$0.00 |
| Truck Fund(E-19) | \$325,000.00 | \$325,000.00 | \$0.00 | (\$325,000.00) |
| Pay Off E-19-3 | | | \$130,000.00 | \$130,000.00 |
| Total Operational Cost | \$478,880.00 | \$417,969.94 | \$275,200.00 | (\$203,680.00) |
| PERSONNEL COST | | | | |
| Payroll | | | | |
| Gross Full-Time Pay | \$277,104.00 | \$230,742.01 | \$480,088.00 | \$202,984.00 |
| Gross Part-Time Pay | \$176,640.00 | \$145,383.26 | \$176,640.00 | \$0.00 |
| Gross Overtime Pay | \$12,000.00 | \$26,183.61 | \$12,000.00 | \$0.00 |
| Gross Holiday Pay | \$7,594.88 | \$4,085.28 | \$10,726.80 | \$3,131.92 |
| Employer's Payroll Taxes (6.2% Soc. Sec. 1.45 | \$37,867.11 | \$32,511.53 | \$54,356.84 | \$16,489.73 |
| Bonus | | | | \$0.00 |
| Vol./FF Reimbursement/Stipend | | | | \$0.00 |
| (Optional Line Item) | | | | \$0.00 |
| (Optional Line Item) | | | | \$0.00 |
| (Optional Line Item) | | | | \$0.00 |
| Total Payroll Cost | \$511,205.99 | \$438,905.69 | \$733,811.64 | \$222,605.65 |
| Benefits | | | | |
| Employer's Retirement Contribution | \$29,433.80 | \$24,856.33 | \$50,281.48 | \$20,847.68 |
| Supplemental Retirement 401k/457 | | | | \$0.00 |
| Health Insurance | \$53,331.79 | \$52,992.26 | \$95,723.64 | \$42,391.85 |

| Dental Insurance | \$2,606.40 | \$2,711.40 | \$4,860.00 | \$2,253.60 |
|------------------------------|--------------|-------------|--------------|--------------|
| Vision Insurance | | . , | . , | \$0.00 |
| Life Insurance | \$7,500.00 | \$8,178.83 | \$8,000.00 | \$500.00 |
| Supplemental Insurance plans | \$15,035.90 | \$9,257.25 | \$18,365.88 | \$3,329.98 |
| State Firemen's Pension Fund | \$840.00 | \$1,260.00 | \$1,260.00 | \$420.00 |
| (Optional Line Item) | | | | \$0.00 |
| (Optional Line Item) | | | | \$0.00 |
| (Optional Line Item) | | | | \$0.00 |
| (Optional Line Item) | | | | \$0.00 |
| Total Benefits Cost | \$108,747.89 | \$99,256.07 | \$178,491.00 | \$69,743.11 |
| | | | | |
| STATIONS: | | | | |
| MAIN STATION | | | | |
| Building Maint | \$15,000.00 | \$17,502.00 | \$20,000.00 | \$5,000.00 |
| Cable | \$1,400.00 | \$1,120.00 | \$1,400.00 | \$0.00 |
| Internet | | \$1,262.69 | \$1,291.92 | \$1,291.92 |
| Electric | \$7,500.00 | \$6,319.58 | \$8,500.00 | \$1,000.00 |
| Garbage | \$2,040.00 | \$1,650.00 | \$2,280.00 | \$240.00 |
| Grounds Upkeep | | | | \$0.00 |
| Heating Fuel | \$3,000.00 | \$1,979.41 | \$3,000.00 | \$0.00 |
| Station Supplies | \$6,000.00 | \$5,942.55 | \$7,000.00 | \$1,000.00 |
| Telephone | \$2,140.00 | \$601.29 | \$802.44 | (\$1,337.56) |
| Water | \$1,200.00 | \$531.54 | \$1,200.00 | \$0.00 |
| STATION #2 | | | | |
| Building Maint | | | | \$0.00 |
| Cable | | | | \$0.00 |
| Internet | | | | \$0.00 |
| Electric | | | | \$0.00 |
| Garbage | | | | \$0.00 |
| Grounds Upkeep | | | | \$0.00 |
| Heating Fuel | | | | \$0.00 |
| Station Supplies | | | | \$0.00 |
| Telephone | | | | \$0.00 |
| Water | | | | \$0.00 |
| | | | | |
| STATION #3 | | | | |
| Building Maint | | | | \$0.00 |
| Cable | | | | \$0.00 |
| Internet | | | | \$0.00 |
| Electric | | | | \$0.00 |

| Garbage | | | | \$0.00 | |
|--------------------|----------------|----------------|----------------|--------------|--|
| Grounds Upkeep | | | | \$0.00 | |
| Heating Fuel | | | | \$0.00 | |
| Station Supplies | | | | \$0.00 | |
| Telephone | | | | \$0.00 | |
| Water | | | | \$0.00 | |
| | | | | | |
| STATION #4 | | | | | |
| Building Maint | | | | \$0.00 | |
| Cable | | | | \$0.00 | |
| Internet | | | | \$0.00 | |
| Electric | | | | \$0.00 | |
| Garbage | | | | \$0.00 | |
| Grounds Upkeep | | | | \$0.00 | |
| Heating Fuel | | | | \$0.00 | |
| Station Supplies | | | | \$0.00 | |
| Telephone | | | | \$0.00 | |
| Water | | | | \$0.00 | |
| Total Station Cost | \$38,280.00 | \$36,909.06 | \$45,474.36 | \$7,194.36 | |
| | | | | | |
| TOTAL EXPENDITURES | \$1,296,704.16 | \$1,152,551.75 | \$1,522,906.09 | \$226,201.93 | |
| | | | | | |
| | | | | | |
| | | | | | |
| Footnotes: | | | | | |

| ana Fire Dep | artment | Capital Projects Roster | | | | | | | | | |
|--------------|-------------------------------------|-------------------------|----------|-----------------------------|----------------------|---------------------|------------------------------------|--|--|--|--|
| Project Year | Project Name | Category | Quantity | Per Unit | | Purchase or Finance | Budget Line Item # (if applicable) | | | | |
| 2025 2025 | 2025 Spartan/Smeal Engine Ranger | | | \$880,000.00 \$33,000.00 | \$ - | Finance Purchase | Finance \$430,000 | | | | |
| | | | | | \$ - \$ - \$ | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - \$ | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - \$ | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - | | | | | | |
| | | | | | \$ - \$ - \$ - | | | | | | |
| | | | | | \$ - | | | | | | |

Dana Fire Department

CURRENT ASSETS

3/31/2025

| Item Description | Current Balance |
|---------------------------------------|-----------------|
| Bonds, Certificates of Deposit, Stock | |
| General Checking | \$2,167.54 |
| Savings | \$253,948.13 |
| Truck Fund | \$575,000.00 |
| Building Fund | |
| Future Needs | \$345,161.63 |
| Contingency Fund | \$175,000.00 |

Total assets \$1,351,277.30

Notes:

| Dana Fire Department | |
|---|---------------------------|
| DESCRIPTION | AMOUNT |
| | |
| TOTAL DISTRICT TAX ASSESSMENT 2025-2026 | \$968,435,615.00 |
| D: :1 11 100 | |
| Divided by 100 | |
| TOTAL | \$9,684,356.15 |
| Multiplied by requested tax rate | 0.14 |
| interruption by requestion tax rate | 0.11 |
| TOTAL | \$1,355,809.86 |
| *Multiplied by tax collection percentage (97%) | |
| TOTAL | \$1,315,135.57 |
| Subtract Training Center Assessment | |
| Add Projected Payments in Lieu of Taxes | |
| **TOTAL PROJECTED REVENUE | \$1,315,135.57 |
| ** Revenue is projected because it does not reflect tax discover | ies, releases or refunds. |
| * Collection percentage based on last complete year of collection | ons. |
| | |



We certify that the attached Financial Statement for Dana Fire and Rescue Department is accurate to the best of our knowledge.

Board President

Board Treasurer

Independent Auditor's Report

on the

Financial Statements

for the years ended June 30, 2024 and 2023

WAYNE J. PARRIS, CPA

CERTIFIED PUBLIC ACCOUNTANT

MAILING ADDRESS: PO BOX 545 FLETCHER, NC 28732 STREET ADDRESS: 21 HYDE PARK PLACE ARDEN, NC 28704

OFFICE AND RESIDENCE TELEPHONE: (828) 687-8824
CELLULAR VOICE MAIL: (828) 778-8824

Independent Auditor's Report

on the

Financial Statements

for the year ended June 30, 2024 and 2023

DANA FIRE AND RESCUE DEPARTMENT, INC. Dana, North Carolina

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WAYNE J. PARRIS, CPA

CERTIFIED PUBLIC ACCOUNTANT

MAILING ADDRESS: PO BOX 545, FLETCHER, NC 28732 STREET ADDRESS: 21 HYDE PARK PLACE, ARDEN, NC 28704 HOME/OFFICE: (828) 687-8824 CELLULAR: (828) 778-8824

e-mail: wparriscpa@hotmail.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of Dana Fire and Rescue Department, Inc.

Opinion

We have audited the accompanying financial statements of Dana Fire and Rescue Department, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2024 and 2023, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Dana Fire and Rescue Department, Inc. as of June 30, 2024 and 2023, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Dana Fire and Rescue Department, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Dana Fire and Rescue Department's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to
 fraud or error, and design and perform audit procedures responsive to those risks. Such procedures
 include examining, on a test basis, evidence regarding the amounts and disclosures in the financial
 statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures
 that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
 effectiveness of Dana Fire and Rescue Department, Inc.'s internal control. Accordingly, no such
 opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that
 raise substantial doubt about Dana Fire and Rescue Department's ability to continue as a going
 concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Wayne & Parris, CPA

Wayne J. Parris, CPA Arden, North Carolina August 22, 2024

DANA FIRE AND RESCUE DEPARTMENT, INC. STATEMENT OF FINANCIAL POSITION June 30, 2024 and 2023

| | | 6-30-2024 | | 6-30-2023 |
|---|----------------|---|-----------|---|
| ASSETS | | | | |
| CURRENT ASSETS Cash and cash equivalents Cash restricted for relief fund Taxes receivable Deposit on Bay Doors TOTAL CURRENT ASSETS | \$ | 814,698.07 46,332.09 28,438.39 0.00 889,468.55 | | 616,934.62 46,188.22 28,023.47 40,650.00 731,796.31 |
| FIXED ASSETS Property and equipment Less: Accumulated depreciation TOTAL FIXED ASSETS TOTAL ASSETS | <u>(</u> \$ | 3,577,492.03 1,606,617.93) 1,970,874.10 2,860,342.65 | \$ | 1,903,958.61) 1,803,647.83 |
| LIABILITIES AND NET ASSETS | | | | |
| CURRENT LIABILITIES Accounts payable Accrued payroll payable Accounts expenses payable Accrued vacation Current portion of long-term debt TOTAL CURRENT LIABILITIES | \$ | 10,352.23 4,097.50 2,893.75 43,311.40 40,501.01 101,155.89 | | 19,192.01 2,062.30 2,638.78 44,858.80 39,113.30 107,865.19 |
| LONG-TERM LIABILITIES Long-term debt TOTAL LONG-TERM LIABILITIES | \$ | 146,949.31 146,949.31 | <u>\$</u> | 187,434.76 187,434.76 |
| TOTAL LIABILITIES | <u>\$</u> | 248,105.20 | \$ | 295,299.95 |
| NET ASSETS Without donor restrictions With donor restrictions TOTAL NET ASSETS TOTAL LIABILITIES AND NET ASSETS | \$ \$ \$ | 2,565,905.36 46,332.09 2,612,237.45 2,860,342.65 | | 2,193,955.97 46,188.22 2,240,144.19 2,535,444.14 |

DANA FIRE AND RESCUE DEPARTMENT, INC. STATEMENT OF ACTIVITIES

For the Years Ended June 30, 2024 and 2023

| | 6-30-2024 | 6-30-2023 |
|---|--|---|
| CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS: Revenues and gains Henderson County Contributions and fundraising Grants Interest income Miscellaneous income Sales tax refund Sale of assets TOTAL REVENUES AND GAINS WITHOUT DONOR RESTRICTIONS | \$ 1,338,480.36 19,893.45 0.00 660.34 18,779.87 16,813.05 41,450.22 \$ 1,436,077.29 | \$ 938,839.36 20,195.00 52,380.95 1,011.77 6,303.07 17,737.16 0.00 \$ 1,036,467.31 |
| Net assets released from restrictions: Restrictions satisfied by payments TOTAL NET ASSETS RELEASED FROM RESTRICTIONS | \$ 5,000.00 \$ 5,000.00 | \$ 0.00 \$ 0.00 |
| TOTAL REVENUES, GAINS, AND OTHER SUPPORT WITHOUT DONOR RESTRICTIONS | <u>\$ 1,441,077.29</u> | \$ 1,036,467.31 |
| Expenses Program Services Supporting Services Fund-raising TOTAL EXPENSES | \$ 1,016,157.18 51,252.32 1,718.40 \$ 1,069,127.90 | 904,532.22 61,351.78 1,720.00 \$ 967,604.20 |
| INCREASE (DECREASE) IN NET ASSETS WITHOUT DONOR RESTRICTIONS | \$ 371,949.39 | \$ 68,863.11 |
| CHANGES IN NET ASSETS WITH DONOR RESTRICTIONS Relief fund supplement Interest income on relief fund Net assets released from restrictions INCREASE (DECREASE) IN NET ASSETS WITH DONOR RESTRICTIONS | \$ 5,134.84 9.03 (5,000.00) \$ 143.87 | 4,709.87 8.95 (0.00) \$ 4,718.82 |
| INCREASE (DECREASE) IN NET ASSETS NET ASSETS AT BEGINNING OF YEAR | \$ 372,093.26 2,240,144.19 | \$ 73,581.93 2,166,562.26 |
| NET ASSETS AT END OF YEAR | \$ 2,612,237.45 | \$ 2,240,144.19 |

DANA VOLUNTEER FIRE AND RESCUE DEPARTMENT, INC. STATEMENTS OF FUNCTIONAL EXPENSES For the Years Ended June 30, 2024 and 2023

| | 6-30-2024 | | | | | | | 6-30-2023 | | | | | | | | |
|-------------------------------------|-----------|---------------|---------------------|-------------|----|-------------|-----|-------------|---------------------|--------------|----|-------------|----|-------------|---|------------|
| | Program | | | | | | | | Program | | | | | | | |
| | Ser | vices | Supporting Services | | | Services | | | Supporting Services | | | | | | | |
| | | | N | lanagement | | | | | | | | Management | | | | |
| | Fi | re & Rescue | _ a | ind General | | Fundraising | | Total | F | ire & Rescue | | and General | _ | Fundraising | | Total |
| Compensation and related expenses | | <u> </u> | | | | | | | | | | | _ | | | |
| Salaries and wages | \$ | 470,027.33 | \$ | 0.00 | \$ | 0.00 | | 470,027.33 | \$ | 447,726.63 | \$ | 0.00 | \$ | | | 447,726.63 |
| Health, life and dental insurance | | 49,435.30 | | 0.00 | | 0.00 | | 49,435.30 | | 42,567.48 | | 0.00 | | 0.00 | | 42,567.48 |
| Retirement contributions | | 29,064.55 | | 0.00 | | 0.00 | | 29,064.55 | | 24,840.41 | | 0.00 | | 0.00 | | 24,840.41 |
| Payroll taxes | | 38,041.39 | _ | 0.00 | | 0.00 | _ | 38,041.39 | | 35,307.82 | _ | 0.00 | | 0.00 | | 35,307.82 |
| Compensation and related expenses | \$ | 586,568.57 | \$ | 0.00 | \$ | 0.00 | - | 586,568.57 | \$ | 550,442.34 | \$ | 0.00 | \$ | • | i | 550,442.34 |
| Bank Charges | | 0.00 | | 205.20 | | 0.00 | | 205.20 | | 0.00 | | 164.90 | | 0.00 | | 164.90 |
| Communications | | 15,037.03 | | 0.00 | | 0.00 | | 15,037.03 | | 12,942.48 | | 0.00 | | 0.00 | | 12,942.48 |
| Depreciation | | 100,404.29 | | 0.00 | | 0.00 | | 100,404.29 | | 94,193.33 | | 0.00 | | 0.00 | | 94,193.33 |
| Disability pay | | 0.00 | | 5,000.00 | | 0.00 | | 5,000.00 | | 0.00 | | 0.00 | | 0.00 | | 0.00 |
| Dues and subscriptions | | 13,520.29 | | 0.00 | | 0.00 | | 13,520.29 | | 9,131.24 | | 0.00 | | 0.00 | | 9,131.24 |
| Firefighter's fund | | 0.00 | | 18,400.90 | | 1,718.40 | | 20,119.30 | | 0.00 | | 16,776.51 | | 1,720.00 | | 18,496.71 |
| Firefighting equipment and supplies | | 79,520.66 | | 0.00 | | 0.00 | | 79,520.66 | | 43,137.98 | | 0.00 | | 0.00 | | 43,137.98 |
| Fire prevention | | 5,321.52 | | 0.00 | | 0.00 | | 5,321.52 | | 6,330.27 | | 0.00 | | 0.00 | | 6,330.27 |
| Insurance | | 55,624.68 | | 0.00 | | 0.00 | | 55,624.68 | | 50,275.06 | | 0.00 | | 0.00 | | 50,275.08 |
| Interest | | 6,259.38 | | 0.00 | | 0.00 | | 6,259.38 | | 23,914.10 | | 0.00 | | 0.00 | | 23,914.10 |
| Miscellaneous | | 3,228.89 | | 7,598.10 | | 0.00 | | 10,826.99 | | 146.25 | | 13,910.84 | | 0.00 | | 14,057.09 |
| On-scene support | | 2,503.04 | | 0.00 | | 0.00 | | 2,503.04 | | 4,613.33 | | 0.00 | | 0.00 | | 4,613.33 |
| Pension fund contributions | | 0.00 | | 480.00 | | 0.00 | | 480.00 | | 0.00 | | 960.00 | | 0.00 | | 960.00 |
| Physicals and hepatiti shots | | 3,500.00 | | 0.00 | | 0.00 | | 3,500.00 | | 2,340.00 | | 0.00 | | 0.00 | | 2,340.00 |
| Postage and stamps | | 0.00 | | 530.57 | | 0.00 | | 530.57 | | 0.00 | | 240.00 | | 0.00 | | 240.00 |
| Professional fees | | 0.00 | | 11,680.00 | | 0.00 | | 11,680.00 | | 0.00 | | 10,630.00 | | 0.00 | | 11,380.00 |
| Property maintenance | | 25,204.92 | | 2,800.55 | | 0.00 | | 28,005.47 | | 26,974.07 | | 2,997.12 | | 0.00 | | 29,971.19 |
| Rescue equipment and supplies | | 4,019.35 | | 0.00 | | 0.00 | | 4,019.35 | | 1,925.18 | | 0.00 | | 0.00 | | 1,925.18 |
| Supplies | | · | | | | | | | | | | | | | | |
| Computer | | 0.00 | (| 2,009.14) | | 0.00 | (| (2,009.14) | | 0.00 | | 10,100.28 | | 0.00 | | 10,100.28 |
| Expendables | | 4,969,42 | • | 552.16 | | 0.00 | | 5,521.58 | | 5,058.67 | | 562.07 | | 0.00 | | 5,620.74 |
| Office | | 0.00 | | 3,307,82 | | 0.00 | | 3,307,82 | | 0.00 | | 1,800.66 | | 0.00 | | 1,800.66 |
| Training and education | | 11,208.26 | | 0.00 | | 0.00 | | 11,208.26 | | 8,580.98 | | 0.00 | | 0.00 | | 8,580.98 |
| Uniforms | | 10,245.11 | | 0.00 | | 0.00 | | 10,245.11 | | 8,068.71 | | 0.00 | | 0.00 | | 8,068.71 |
| Utilities | | 1 | | | | | | | | | | | | | | |
| Cable | | 0.00 | | 1,400.00 | | 0.00 | | 1,400.00 | | 0.00 | | 1,125.11 | | 0.00 | | 1,125.11 |
| Celi phones | | 3,598.04 | | 0.00 | | 0.00 | | 3,598.04 | | 2,568.66 | | 0.00 | | 0.00 | | 2,568.66 |
| Electricity | | 6,417.60 | | 713.07 | | 0.00 | | 7,130.67 | | 6,114.35 | | 679.37 | | 0.00 | | 6,793.72 |
| Natural gas | | 1,617.98 | | 179.78 | | 0.00 | | 1,797.76 | | 2,218.65 | | 246.52 | | 0.00 | | 2,465.17 |
| Sanitation | | 1,836.00 | | 204.00 | | 0.00 | | 2,040.00 | | 1,836.00 | | 204.00 | | 0.00 | | 2,040.00 |
| Telephone | | 1,883.81 | | 209.31 | | 0.00 | | 2,093.12 | | 1,839.59 | | 204.40 | | 0.00 | | 2,043.99 |
| Vehicles | | .,555.51 | | 200.01 | | 2.00 | | | | | | | | | | |
| Fuel | | 16,187.34 | | 0.00 | | 0.00 | | 16,187.34 | | 18,850.57 | | 0.00 | | 0.00 | | 18,850.57 |
| Maintenance | | 57,481.00 | | 0.00 | | 0.00 | | 57,481.00 | | 23,030.41 | | 0.00 | | 0.00 | | 23,030.41 |
| Total Expenses | \$ | 1,016,157.18 | \$ | 51,252.32 | \$ | 1,718.40 | _ | | \$ | 904,532.22 | \$ | 61,351.78 | \$ | 1,720.20 \$ | ; | 967,604.20 |
| rotal Expenses | <u>*</u> | .,0 10,101.10 | <u> </u> | 0.1002.02 | Ě | .,, | : Ě | , , | = | | = | | = | | | |

DANA FIRE AND RESCUE DEPARTMENT, INC. STATEMENT OF CASH FLOWS

For the Years Ended June 30, 2024 and 2023

| | 6-30-2 | :024 | 6-30-2023 |
|---|----------------------------------|--|---|
| CASH FLOWS FROM OPERATING ACTIVITIES Cash received from governments Cash received from contributors and fundraising Interest received Cash received from other revenue sources Cash paid to employees and suppliers Interest paid Gain on sale of assets NET CASH PROVIDED BY OPERATING ACTIVITIES | 36,2 (993,2 (6,2 41,4 | \$89.33 \$893.45 \$669.37 \$267.64 \$225.23 (259.38) (450.22 \$185.40 \$ | 20,195.00 1,020.72 72,692.44 873,754.34) 23,832.75) 0.00 |
| CASH FLOWS FROM INVESTING ACTIVITIES Payments for property and equipment Proceeds from sale of assets NET CASH USED BY INVESTING ACTIVITIES | 109,0 | 180.34) \$ 000.00 180.34) \$ | 0.00 |
| CASH FLOWS FROM FINANCING ACTIVITIES Proceeds from borrowing Payments for reduction of long-term debt NET CASH USED BY FINANCING ACTIVITIES | | 0.00 \$ 097.74) 097.74) <u>\$</u> | (463,991.27) |
| NET INCREASE IN CASH AND CASH EQUIVALENTS BEGINNING CASH AND CASH EQUIVALENTS ENDING CASH AND CASH EQUIVALENTS | 663, | 907.32 \$ 122.84 030.16 \$ | (502,349.33) 1,165,472.17 663,122.84 |
| Reconciliation of Change in Net Assets to Net Cash Provided (Used) by Operating Activities | | | |
| Change in net assets Adjustments to reconcile change in net assets to net cash used by operating activities | \$ 372,0 | 093.26 \$ | 73,581.93 |
| Noncash revenues and expenses Depreciation Gain on sale of assets | | 404.29 450.22) | 94,193.33 0.00 |
| Changes in current assets and liabilities (Increase) Decrease in taxes receivable (Increase) Decrease in deposit on bay doors Increase (Decrease) in accounts receivable Increase (Decrease) in accounts payable Increase (Decrease) in accrued payroll payable Increase (Decrease) in accrued expenses payable Increase (Decrease) in accrued vacation | 40,6 (8,8 2,1 (1,8 | 414.92) 650.00 0.00 839.78) 035.20 254.97 547.40) | 7,634.02 (40,650.00) |
| Net cash provided by operations | Ψ 403, | <u> </u> | 100,000.10 |

Notes to the Financial Statements For The Year Ended June 30, 2024 and 2023

NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

Dana Fire & Rescue is located in Henderson County (North Carolina) and provides Fire & Rescue protection for approximately 8,000 citizens in a 21 square mile area.

Founded in April 1971 with 33 members, Incorporated in June 1971 as a Non-profit Corporation. Dana Fire & Rescue has experienced many changes in the past several years. Dana Fire & Rescue has had to adapt to providing services such as Search & Rescue, Wild Land Fire Fighting, Rope Rescue, Water Rescue and Extrication of patients of Motor Vehicle Crashes.

Dana Fire & Rescue has 42 members, 1 full-time Chief, 3 full time Firemen and 19 part-time Firemen who man the station 24 hours a day 7 days a week.

In addition to providing fire protection to the residents of the Dana fire district, we also provide mutual-aid to the other Henderson County Fire Departments, Henderson County Sheriff's Office and the Henderson County Rescue Squad.

The officer's board of Dana Fire & Rescue consists of the following positions: Chief, Deputy Chief, Assistant Chief, 5 Captains, 2 Lieutenants and 9 Board of Directors.

Within our membership we have 40 State Certified Level II Firefighters, and 34 Firefighters who are certified in the Emergency Medical Field. All members receive training to improve their skills in the Fire, Rescue, Medical fields.

Dana Fire & Rescue strives hard to preserve the history of the department and the traditions of firefighting while continuing to plan for the future of the community and the department. The members of Dana Fire & Rescue are proud to serve the residents of the Dana Fire District.

The Fire Department is a North Carolina chartered not-for-profit organization. There is no capital stock and all funds received are devoted exclusively to the purpose designated in the charter which primarily is fire protection and rescue services for the community of Dana, North Carolina. The Corporation is exempt from federal and State income taxes under code section 501(c)(3) of the Internal Revenue Code.

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

FASB Accounting Standards Codification

In June 2009, the Financial Accounting Standards Board (FASB) issued a statement titled *The Accounting Standards Codification and the Hierarchy of Generally Accepted Accounting Principles* (ASC). This standard establishes FASB ASC as the source of authoritative United States accounting and reporting standards for nongovernmental entities. References made to generally accepted accounting principles (GAAP) in these statements refer to the ASC.

Financial Statements Presentation

On August 18, 2016, FASB issued ASU 2016-14, *Not-for-Profit Entities* (Topic 958) - *Presentation of Financial Statements of Not-for-Profit Entities*. The update addresses the complexity and understanding of net asset classifications, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return.

Notes to the Financial Statements For The Year Ended June 30, 2024 and 2023

Information regarding its financial position and activities are grouped according to two classes of net assets, net assets without donor restrictions and net assets with donor restrictions. The two classes of net assets are defined as follows:

Net Assets Without Donor Restrictions

Net assets that are nor subject to donor-imposed restrictions are those assets whose use is not limited or restricted by donors. The generally arise as a result of exchange transaction, contributions without restrictions, or contributions with restrictions whose restrictions have expired due to time and/or purpose requirements being met. These net assets may be used at the discretion of the Department's management and the Board of Directors.

Net assets without donor restrictions are classified as follows in the Statement of Financial Position:

Undesignated - Net assets without donor restrictions that are not subject to any stipulations or designations.

Net Assets With Donor Restrictions

Net assets that are subject to restrictions imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Department or by the passage of time. Other donor restrictions are perpetual in nature, where the donor has stipulated the funds be maintained in perpetuity.

Other donations are perpetual in nature, where the donor has stipulated the funds be maintained in perpetuity. However, these net assets with donor restrictions generally do not get reclassified since by definition, the donor imposed stipulation to treat the contribution as with donor restrictions results in the restriction never expiring.

As of June 30, 2024, the Department held no assets with donor restrictions that must be held in perpetuity.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and reported amounts of revenue and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Fair Value Measurements and Disclosures

The Department discloses for each class of financial instruments the methods used and the significant assumptions made in determining the fair value of financial assets and/or liabilities. If there is a change in the valuation method, then the Department discloses both the change and the reason for the change.

The Department estimates the fair value of all financial instrumented and those estimates do not materially differ from the aggregate carrying values of the financial instruments as recorded in the Statement of Financial Position.

The estimated fair value amounts have been determined using available market information and appropriate valuation methodologies.

Notes to the Financial Statements
For The Year Ended June 30, 2024 and 2023

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Department considers all unrestricted highly liquid investments available for current use with an initial maturity of three months or less to be cash equivalents.

Promises to Give

Contributions are recognized when the donor makes a promise to give to the Department that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions.

The Department uses the allowance method to determine uncollectible unconditional promises receivable. The allowance is based on prior years' experience and management's analysis of specific promises made.

Property and Equipment

It is the Department's policy to capitalize property and equipment over \$1,000.00. Lesser amounts are expensed in the year of acquisition. Purchased property and equipment is capitalized at cost. Donations of property and equipment are recorded as contributions at their estimated fair value. Such donations are reported as contributions without donor restrictions unless the donor has restricted the donated asset for a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as contributions with donor restrictions. Absent donor stipulations regarding how long those assets must be maintained, the Department reports expiration of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Department reclassifies net assets with donor restrictions to net assets without donor restrictions at that time. Property and equipment are depreciated using the straight-line method over their estimated useful lives.

Contributed Services

No amounts have been reflected in the financial statements for donated services. The Department generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist the Department, but these services do not meet the criteria for recognition as contributed services.

Contributions

Contributions received are recorded as net assets with donor restrictions or net assets without donor restrictions depending on the existence or nature of any donor restrictions.

Income Tax Status

The Department is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and classified by the Internal Revenue Service as other than a private foundation.

Notes to the Financial Statements
For The Year Ended June 30, 2024 and 2023

2. RESTRICTIONS ON NET ASSETS

Net assets with donor restrictions

All of the restrictions on net assets at June 30, 2024 and June 30, 2023 are related to the Firemen's Local Relief Fund. The North Carolina Law requires the Relief Fund Monies may be used ONLY for the purpose of caring for firemen who are hurt in the line of duty or their dependents. These monies may be spent for no other purpose unless approval is received for the North Carolina Firemen's Association, Secretary's Office, or the North Carolina Legislature. Net assets with donor restrictions for the Firemen's Local Relief Fund as of June 30, 2024 and 2023 amounts to \$46,332.09 and \$46,188.22, respectively.

3. LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The following reflects the Department's financial assets as of the balance sheet date, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheet date.

| | 6-30-24 | 6-30-23 |
|---|----------------------|---------------|
| Financial assets at year-end | \$ 889,468.55 | \$ 731,796.31 |
| Less those unavailable for general expenditures within one year, due to: | | |
| Donor-restricted for relief fund | 46,332.09 | 46,188.22 |
| Financial assets available to meet cash needs for general expenditure within one year | <u>\$ 843,136.46</u> | \$ 685,608.09 |

4. TAXES RECEIVABLE

Taxes receivable represents amounts collected on behalf of the Dana Fire District by Henderson County but not remitted to the Fire Department as of June 30, 2024 and 2023. The dollars shown represent amounts which could be quantified by the Henderson County Tax Offices. It is recognized that uncollected fire district taxes exist in Henderson County, but none could be quantified by the County's tax office. As of June 30, 2024 and 2023 there are property taxes receivable from Henderson County of \$21,863.77 and \$20,491.31, respectively. There is also sales taxes receivable from the State of North Carolina as of June 30, 2024 and 2023 amounting to \$6,574.62 and \$7,532.16.

5. PROPERTY AND EQUIPMENT

Property and equipment consist of the following:

| | Beginning | | Additions | | Disposals | | Ending |
|-----------------------------------|-----------------|----|-------------|-----|-------------|----|---------------|
| Land | \$ 175,000.00 | \$ | 0.00 | \$ | 0.00 | \$ | 175,000.00 |
| Buildings | 1,636,167.45 | | 219,664.00 | | 0.00 | | 1,855,831.45 |
| Furniture and equipment-station | 99,527.06 | | 0.00 | | 0.00 | | 99,527.06 |
| Firefighting and rescue equipment | 394,329.55 | | 10,540.04 | | 0.00 | | 404,869.59 |
| Vehicles | 1,402,582.38 | | 104,976.30 | (| 465,294.75) | | 1,042,263.93 |
| | \$ 3,707,606.44 | \$ | 335,180.34 | \$(| 465,294.75) | \$ | 3,577,492.02 |
| Accumulated depreciation | (1,903,958.61) | _(| 100,404.29) | | 397,744.97 | (| 1,606,617.93) |
| | \$ 1,803,647.83 | \$ | 234,776.05 | \$(| 67,549.78) | \$ | 1,970,874.10 |

Notes to the Financial Statements For The Year Ended June 30, 2024 and 2023

LONG-TERM DEBT

(A) Mortgage Payable

On December 10, 2021 the Fire Department obtained a loan from First Bank in the amount of \$282,668.00. The loan is to be repaid in 84 monthly payments of \$3,779.76 beginning on January 28, 2022, and on the 1st day of each month thereafter to the maturity date of November 28, 2028. The interest rate on the principal outstanding is 2.950%. The loan is not subject to a prepayment penalty in the repayments terms. The loan has a balance of \$187,450.32 as of June 30, 2024. The loan is secured by the building and property located at 2001 Dana Road, Hendersonville, NC.

| 5 | Schedule of Maturities | |
|------------|------------------------|-----------|
| 6-30-2025 | \$ | 40,299.32 |
| 6-30-2026 | \$ | 41,521.34 |
| 6-30-2027 | \$ | 42,780.39 |
| 6-30-2028 | \$ | 44,077.63 |
| 6-30-2029 | \$ | 18,771.64 |
| Thereafter | \$ | 0.00 |

7. RETIREMENT

The Department makes available a 401(k) plan to full-time employees. Employees are eligible to participate after six months of employment. The Department will contribute ten (10) percent of the base salary of any full-time employee. In order to receive employer contributions, the employee must participate. If an employee chooses to participate in the plan, he/she must sign the appropriate forms. The Department will deduct the specified amount from the employee's paycheck and send the employee's contribution along with the Department's matching amount to the retirement plan trustee. The employee will have 100% vested interest in the retirement plan as set forth in the plan guidelines.

8. RISK MANAGEMENT

The Department is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to volunteers; and natural disasters.

The Department carries commercial coverage for all risks of loss, including property and general liability insurance, and worker's compensation coverage up to statutory limits. There have been no significant reductions in insurance coverage in the prior year, and settled claims have not exceeded coverage in any of the past three fiscal years.

ECONOMIC DEPENDENCE

Approximately 93% and 91% of recurring operating revenues of the general fund for the period ended June 30, 2024 and 2023, respectively, came from special fire district property taxes levied by Henderson County.

10. EVALUATION OF SUBSEQUENT EVENTS

The Department has evaluated subsequent events through August 22, 2024, the date which the financial statements were available to be issued.

Form **990**

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 2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

| Α | For th | ie 2023 caler | dar year, or tax | year begin | ining 7/0 |)1 | , 20 | 23, an | d endin | g 6/ | | | 20 2024 |
|--------------|--|---|--|---------------------------|--------------------|-------------------------------|------------------------------|----------------------|--------------|--------------|---------------------------------|---------------|--------------------------------|
| В | Check i | f applicable: | C | | | | | | | | D Employ | er identi | fication number |
| | Ad | dress change | DANA FIRE | & RESC | UE DEPAR | TMENT | | | | | | | |
| | ⊢Na | me change | 2001 DANA | ROAD | | | | | | | E Telepho | ne numb | er |
| | H | tial return | HENDERSON | VILLE, | NC 28792 | ? | | | | | (82 | 3) 68 | 35-3494 |
| | } | al return/terminated | | | | | | | | | | | |
| | H | nended return | | | | | | | | | G Gross re | eceipts \$ | 1,441,221. |
| | \vdash | | F Name and addr | ess of principa | al officer: | | | | | H(a) Is this | a group retur | | |
| | ШАр | plication pending | 2001 DANA | | HENDERSC | MUTTE | NC 28 | 792 | | H(b) Are all | subordinates " attach a list | included | ? Yes No |
| | <u> </u> | | | 501(c) (| | nsert no.) | 4947(a)(1 | | 527 | lf "No, | " attach a list | See ins | tructions. |
| <u> </u> | | exempt status: | X 501(c)(3) | 301(c) (| | iscit iiu.) | 4347 (a)(1 | / UI L | JE! | U/a) Group | exemption nu | ımher | |
| J_ | | bsite: N | | 1 | F | 1 011 | | 1 / | - f form of | ion: 197 | | | egal domicile: NC |
| <u>K</u> | | of organization: | | Trust | Association | Other | | L Year | or format | ion: 197 | T 1111 3 | nate of it | sgar dolffiche. IVC |
| Pa | rt I | Summa | <u>ry</u> | ir. 1 | | -in-lileant a | otivitios: T | ים חד | OUTTO | r cupr | DTOD E | ישם ז | DDOTECTION & |
| | 1 | Briefly descr | ibe the organiza | tion's miss | ion or most | Significant a | TTENTC | .U Pr | MC MI | TTUTN | | | PROTECTION & RE DISTRICT. |
| ė | | EMI/FIR: | ST KESPONDE | R PEKA | TCF2 TO | TIEF PET | TVEN2 | <u> </u> | MG M | F 77.77 77 | TITE DVI | T | TITT DIDITION |
| ano | | | | _ | | | | - | | | | | |
| Governance | _ | A-75-7 | | | on discontinu | od its opera | tions or d | | d of me | ore than 2 | 5% of its | net as | |
| òО | 2 | Check this b | oting members of | organizano of the gove | rning body (| eu its opera Part VI. line | 1a) | | | | ,, | 3 | 9 |
| જ | 3 | Number of it | ndependent votir | na member | rs of the gove | ernina bodv | (Part VI. | line 1b |)) | | | 4 | 9 |
| es | 5 | Total number | r of individuals e | emploved i | n calendar ve | ear 2023 (Pa | art V, line | 2a) | | | | 5 | 32 |
| Ϋ́ | 6 | Total number | r of volunteers (| estimate if | necessary). | | | | | | | 6 | 0 |
| Activities & | 7a | Total unrela | ted business rev | enue from | Part VIII, col | lumn (C), lir | ne 12 | <i>.</i> | | | | 7a | 0 |
| | b | Net unrelate | d business taxal | ole income | from Form 9 | 990-T, Part I | I, line 11. | | | <u> </u> | | 7b | 0. |
| _ | | | | | ···· | | | | | | Prior Year | | Current Year |
| | 8 | Contribution | s and grants (Pa | | 72,5 | | 19,893. | | | | | | |
| ПE | 9 Program service revenue (Part VIII, line 2g) | | | | | | | | | · L | 943,8 | | 1,343,898. |
| Revenue | 10 | Investment | ncome (Part VII | I, column (| (A), lines 3, 4 | i, and 7d) | | | | | | 21. | 669. |
| æ | 11 | Other reven | ue (Part VIII, col | umn (A), li | ines 5, 6d, 8d | c, 9c, 10c, a | ınd 11e) | | | | 23,7 | | 76,761. |
| | 12 | Total revenu | ie – add lines 8 | through 11 | (must equa | l Part VIII, c | olumn (A |), <u>line</u> | 12) <u>.</u> | | 1,041,1 | .87. | 1,441,221. |
| | 13 | Grants and | similar amounts | paid (Part | IX, column (| A), lines 1-3 | 3) | | | · | | | |
| | 14 | 4 Benefits paid to or for members (Part IX, column (A), line 4) | | | | | | | | | | | |
| | 15 | Salaries, oth | ner compensatio | n, employe | ee benefits (F | Part IX, colu | mn (A), li | nes 5- | 10) | | 550,4 | 142. | 586,568. |
| ses | 16a | Professiona | I fundraising fees | s (Part IX, | column (A), | line 11e) | . , | | | | | | |
| Expenses | "" | | ising expenses (| | | | | | 718. | | H K.F. A | | |
| ᄶ | 0 | | ising expenses (ises (Part IX, col | | | | | | | | 417,1 | 61 | 482,560. |
| | 17 | Other exper | ses (Part IX, co ses. Add lines 13 | umn (A), i | nies marinu | i, i i i•24€) V. aalumn (| A) lina 25 | 51 | | · | 967,6 | $\overline{}$ | 1,069,128. |
| | 18 | Total expen | ses, Add lines 13 | 3-17 (musi | equal mart i. | 7, coluinii (/ | A), IIIIC 20 | <i></i> | | ` | 73,5 | | 372,093. |
| | 19 | Revenue les | s expenses. Sul | otract line | 18 from line | 32 | | | | | ing of Currer | | End of Year |
| ð 9 | | | 40 1 V E 10 | | | | | | | <u> </u> | 2,535,4 | | 2,860,342. |
| Net Assets | 20 | Total assets | (Part X, line 16 ies (Part X, line |) 268 | | | | | | | 295,2 | | 248,105. |
| t As | 21 | | • | | | | | | | | | | |
| | | | or fund balances | . Subtract | line 21 from | line 20 | | | | · | 2,240,1 | 44. | 2,612,237. |
| Pa | art II | Signatu | re Block | | | | | | | | | | |
| Und | er pena | lities of perjury, I | declare that I have ex parer (other than office | amined this re | turn, including ac | ccompanying so | hedules and er has any kr | statemer nowledge | nts, and to | the best of | my knowledg | e and be | lief, it is true, correct, and |
| com | piete. L | Declaration of pre | parer (other than office | | | | | | | | | - | |
| | | | | | | | | | | | | | |
| Si | gn | Signature | от опісег | | | | | | , | | | | |
| He | ere | | WOMACK_ | | | | | | | CHIEF | | | |
| | | | int name and title | | | | | | into | | Ta | <u>vi., i</u> | PTIN |
| | | I | preparer's name | | Preparer's sig | | | | ate | | 1 ' | X if | |
| Pa | iid | WAYNE | J. PARRIS | | | . J. fan | <u>د, ۱۳۵</u> | 4 | 2 · 2 · 1 | · 2 4 | self-employ | ed | P01202486 |
| | epar | er Firm's na | | J. PAF | | <u> </u> | | | | | ┤_ | | |
| | se Oı | | | DE PARE | | | | | | | Firm's EIN | | |
| | | | ARDEN | , NC 28 | 3704 | | | | | | Phone no. | (82 | |
| Ma | y the | IRS discuss | this return with t | | | ve? See ins | tructions. | | | | | | X Yes No |

| Form | 990 (2023) DANA FIRE & F | ESCUE DEPARTMENT | Page 2 |
|------|--|--|--|
| Par | III Statement of Program | Service Accomplishments | |
| | Check if Schedule O contain | ns a response or note to any line in this Part III | |
| 1 | Briefly describe the organization's | mission: | |
| | TO PROVIDE SUPERIOR F | IRE PROTECTION & EMT/FIRST RESPON | DER SERVICES TO THE CITIZENS |
| | LIVING WITHIN THE DAN | | |
| | | <u> </u> | |
| | | | |
| | Did the organization undertake any si | gnificant program services during the year which were no | ot listed on the prior |
| _ | Form 990 or 990-EZ? | | Yes X No |
| | If "Yes," describe these new services | | |
| 3 | Did the organization cease conduc | ting, or make significant changes in how it conducts, | any program services? Yes X No |
| | If "Yes " describe these changes on \$ | Schedule O. | |
| 4 | Describe the organization's progra | m service accomplishments for each of its three larg- ganizations are required to report the amount of gran | est program services, as measured by expenses. |
| 7 | Section 501 (c)(3) and 501(c)(4) or | ganizations are required to report the amount of gran | nts and allocations to others, the total expenses, |
| | and revenue, if any, for each prog | am service reported. | |
| | | | |
| 4a | (Code:) (Expenses \$ | 1,016,157. including grants of \$ |) (Revenue \$) |
| | WE PROVIDED EXCEPTION | AL FIREFIGHTING AND RESCUE SERVIC | ES TO THE DANA FIRE DISTRICT AS |
| | WELL AS FIRE PREVENTI | ON EDUCATION TO THE COMMUNITY. | |
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| | | including grants of \$ |) (Revenue \$) |
| 4b | (Code:) (Expenses \$ | including grants of \$ |) (Nevenue 4 |
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| 40 | : (Code:) (Expenses \$ | including grants of \$ |) (Revenue \$ |
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| 40 | Other program services (Describe | | |
| | (Expenses \$ | including grants of \$ |) (Revenue \$) |
| 40 | Total program service expenses | 1,016,157. | Com. 000 (0000) |
| RΔ | \ | TEEA0102L 08/23/23 | Form 990 (2023) |

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Page 2

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Х 1 Χ 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Χ 3 for public office? If "Yes," complete Schedule C, Part I..... Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II..... Χ 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III. 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Χ 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.......... 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х complete Schedule D, Part III . . . Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 9 Χ Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V..... Χ If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule X 11a **b** Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.* Х 11b c Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Х 11c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Х Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X..... 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X... Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII..... b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and Х if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional...... 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E..... 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States?.... 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Х foreign organization? If "Yes," complete Schedule F, Parts II and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV..... Χ 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions..... Χ 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 lines 1c and 8a? If "Yes," complete Schedule G, Part II...... Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," Х complete Schedule G, Part III 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H..... Х 202 b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?..... 20b

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| Pai | t IV | Checklist of Required Schedules (continued) | | | |
|-------------|---------------------------|--|-----|-----|-------|
| | | | | Yes | No |
| 22 | colum | ne organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, nn (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Х |
| 23 | and fo | e organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current ormer officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete dule J | 23 | | X |
| 24 a | the la | e organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of set day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and set of the Schedule K. If "No," go to line 25a | 24a | | Х |
| b | Did th | ne organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did th | e organization maintain an escrow account other than a refunding escrow at any time during the year to defease ax-exempt bonds? | 24c | | ı |
| d | | ne organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 a | Secti trans | on 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit action with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| b | ls the that th Sche | organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and ne transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete dule L, Part I | 25b | | Х |
| 26 | forme | ne organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or er officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity mily member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | Х |
| 27 | emple | ne organization provide a grant or other assistance to any current or former officer, director, trustee, key byee, creator or founder, substantial contributor or employee thereof, a grant selection committee ber, or to a 35% controlled entity (including an employee thereof) or family member of any of these ons? If "Yes," complete Schedule L, Part III | 27 | | Х |
| 28 | Was t | the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, actions for applicable filing thresholds, conditions, and exceptions). | | | |
| a | A cur | rent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If " complete Schedule L, Part IV | 28a | | Х |
| E | | nily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | Х |
| | : A 359 | % controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," | 28c | | Х |
| 29 | | ne organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did ti | the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation ibutions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did t | ne organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did th Sche | ne organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete dule N, Part II | 32 | | Х |
| 33 | Did th 301.7 | ne organization own 100% of an entity disregarded as separate from the organization under Regulations sections 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | Х |
| 34 | Was | the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, | 34 | | Х |
| 35a | | the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| ŀ | If "Ye | es" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled y within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Socti | ion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related hization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 | Did th | ne organization conduct more than 5% of its activities through an entity that is not a related organization and that is ed as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | Х |
| 38 | Note | ne organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? : All Form 990 filers are required to complete Schedule O | 38 | х | |
| Pa | rt 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 |
| 1. | . Ente | r the number reported in box 3 of Form 1096. Enter -0- if not applicable | 1 . | " | |
| 1 | b Ente | r the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | | |
| | | he organization comply with backup withholding rules for reportable payments to vendors and reportable gaming abling) winnings to prize winners? | | | |
| | (gam | abling) winnings to prize winners? | 1c | X | (000) |

Page 5 DANA FIRE & RESCUE DEPARTMENT Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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..... 32 2b X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?..... 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?...... Χ 3a b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule Q....... 3h 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)?. Х 4a 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). X 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 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 Χ solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were 6b not tax deductible?.... 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 X 7a services provided to the payor?.... **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 Х 7c Form 8282?.... d If "Yes," indicate the number of Forms 8282 filed during the year..... 7d X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?..... 7e X 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7g as required?..... h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Form 1098-C?..... 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?..... Я 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?.... 9a 9b 10 Section 501(c)(7) organizations. Enter: b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders **b** Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)..... 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?..... 13a Note: See the instructions for additional information the organization must report on Schedule O. **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 c Enter the amount of reserves on hand..... X 14a Did the organization receive any payments for indoor tanning services during the tax year?..... 14a **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q..... 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х 15 excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Х 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?.......

Form 990 (2023) DANA FIRE & RESCUE DEPARTMENT Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes Nο 1a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. ${f b}$ Enter the number of voting members included on line 1a, above, who are independent . . . 1b 9 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee, or key employee?..... Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person?..... Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed?..... Did the organization become aware during the year of a significant diversion of the organization's assets?..... X X 6 Did the organization have members or stockholders?..... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?...SEE .SCHEDULE .O. X b Are any governance decisions of the organization reserved to (or subject to approval by) members, SEE SCH O 7b Х stockholders, or persons other than the governing body?..... Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... **b** Each committee with authority to act on behalf of the governing body?..... Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Χ 10a 10a Did the organization have local chapters, branches, or affiliates?..... b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13..... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done... SEE, SCHEDULE.O. Х 12c X 13 Did the organization have a written whistleblower policy?..... 13 X 14 14 Did the organization have a written document retention and destruction policy?..... 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official...... X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16a taxable entity during the year?..... b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 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 Other (explain on Schedule O) X Upon request Own website Another's website Describe on Schedule 0 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. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records.

JIMMY WOMACK

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Form 990 (2023)

| Form 990 | (2023) | DANA | FIRE | ς, | RESCUE | DEPARTMENT | T |
|----------|--------|------|------|----|--------|------------|---|

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 the instructions for definition of "key employees."
- 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, box 6 of 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.

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| Chec | k this box if neither the organization nor any relat | ed organiz | ation | cor | nper | nsate | ed any c | current officer, direc | or, or trustee. | |
|-------------|--|---|----------|------------------|----------|----------------------------------|---|------------------------------|--|--|
| | (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | box, | , unle cer ar | ess pe | ition more erson direct | than one is both are is both are or/trust Highest compensated | Reportable compensation from | (E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
| (1) J. | MMY WOMACK | 4 | | \vdash | | | | | | |
| Ci | HIEF | 0 | <u>X</u> | | | <u>L</u> | | | 0. | 0. |
| | /LE_WOMACK | 2 | ļ | | | | | | | |
| | ICE PRESIDENT | 0 | Х | | X | <u> </u> | | | 0. | 0. |
| | ATTHEW HOSSLEY | 2 | ļ | | | | | | | |
| В | DARD MEMBER | 0 | X | <u> </u> | | L | | | 0. | 0. |
| (4) C | ORBAN HOSSLEY | 2 | ĺ | | | | | | | |
| | ECRETARY | 0 | Х | | Х | | | | 0. | 0. |
| (5) T | ONY BENTLEY | 4 | ļ | | | | | | | |
| BO | DARD MEMBER | 0 | X | | <u> </u> | <u> </u> | | 0. | 0. | 0. |
| (6) DA | AVID_YOUNG | 2 | ļ | | | | | | | |
| | DARD MEMBER | 0 | X | | | | | 0. | 0. | 0. |
| _(7)_ T | IM_GRIFFIN | 2 | ļ | | | | | | | |
| | DARD MEMBER | 0 | X | | | | | 0. | 0. | 0. |
| | HRIS MCDOWELL | 2 | ļ | | | | | | _ | _ |
| | REASURER | 0 | X | ļ | Х | | | 0. | 0. | 0. |
| | ERRY MARSHALL | 2 | ļ | | | | | | _ | _ |
| | RESIDENT | 0 | X. | ļ | Х | | | 0. | 0. | 0. |
| <u>(10)</u> | | | { | | | | | | | |
| <u>(11)</u> | | | | | | | | | | |
| <u>(12)</u> | | | | _ | | | | <u> </u> | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | <u> </u> | | |

TEEA0107L 08/23/23

| Par | VII Section A. Officers, Directors, Tru | stees, i | ney | CII | ibic | ye | es, | am | u nignest con | ipensated Linp | r (continued) |
|------|---|---|-----------------------------------|-----------------------|------------------------------------|-------------------|---------------------------------|----------------|--|---|--|
| | (A) Name and title | (B) Average hours | box, | unles | Posi neck i ss per d a di | more rson | than c is both or/trust | an | (D) Reportable compensation from the organization | (E) Reportable compensation from | (F) Estimated amount of other compensation from |
| | | per week (list any hours for related organiza- tions below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099- MISC/1099-NEC) | related organizations (W-2/1099- MISC/1099-NEC) | the organization and related organizations |
| (15) | | | | | · | | <u>a</u> | | | | |
| (16) | | | | | | | | | | | |
| (17) | | | | | | | | | | | |
| (18) | | | | | | | | | | | |
| (19) | | | - | | | | | | | | |
| (20) | | | | | | | | | | | |
| (21) | | | - | | | | | | | | |
| (22) | | | | | | | | | | | |
| (23) | | | | | - | | | | | | |
| (24) | | | | | | | | | - | | |
| (25) | | | | | | | | | | | |
| c | Subtotal | on A | | | | | | | 0. | 0. 0. 0. | 0. 0. 0. |
| 2 | Total number of individuals (including but not limited from the organization | to those I | isted | abo | ve) v | who | recei | ved | more than \$100,00 | | |
| 3 | Did the organization list any former officer, direct | tor, truste | e. ke | ev e | mple | ove | e. or | hial | hest compensated | I employee | Yes No |
| | on line 1a? If "Yes,"complete Schedule J for such | <i>h individu</i> Frenortab | i <i>al</i> le co | mpe | ensa | ition | and | oth | ner compensation | from | 3 X |
| | the organization and related organizations greate such individual | er than \$1 | 50,0 | 00? | If " | res, ···· | cor | трк | ete Scneaule J 10: | <i>, , , .</i> | 4 X |
| | Did any person listed on line 1a receive or accrument for services rendered to the organization? If "Yestion B. Independent Contractors | e comper s," compl | isatic ete S | n fr iche | om <i>dule</i> | any <i>J f</i> | unre or su | elate ich j | ed organization or person | individual | 5 X |
| 1 | Complete this table for your five highest compen compensation from the organization. Report compen | sated ind sation for | epen the c | den alen | t co dar | ntra year | ctors | tha | at received more t with or within the or | han \$100,000 of ganization's tax year | ·. • |
| | (A) Name and business add | | | | | | | | (B Description |) | (C) Compensation |
| | | | _ | | | | | | | | |
| | | | | | | | | | | | |
| 2 | Total number of independent contractors (including b \$100,000 of compensation from the organization | | ited to | o the | ose I | iste | d abo | ve) | who received more | than | |
| BAA | 4. cojoo o. co.,po.,po.,o., | | TEEA(| 0108L | 08/ | 23/23 | } | | <u>.</u> | | Form 990 (2023 |

Form 990 (2023) DANA FIRE & RESCUE DEPARTMENT | Part VIII | Statement of Revenue

| | | Check if Schedule O contains a re | senance or note to an | v line in this Part V | 711 | | П |
|---|---------------|---|-----------------------|---------------------------------------|--|---|--|
| | | Check if Schedule O contains a re | esponse of note to an | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| s, Grants, Amounts | b c | Federated campaigns 1 Membership dues 1 Fundraising events 1 | b c | | | | |
| Contributions, Gifts, Grants, and Other Similar Amounts | e f | Related organizations | е | | | | |
| ontrik and Ot | • | Noncash contributions included in lines 1a-1f | g | 10.002 | | | |
| _ | 11 | Total. Add lines 1a-11 | Business Code | 19,893. | | | nast viite bu |
| Program Service Revenue | 2a b | HENDERSON COUNTY POLK COUNTY | | 1,338,480. 5,418. | 1,338,480. 5,418. | | |
| am Servio | d e | | | | | | |
| Progra | | All other program service revenue Total. Add lines 2a-2f | | 1,343,898. | | | |
| | | Investment income (including dividends other similar amounts) | | 669. | 669. | | |
| | 4 5 | Income from investment of tax-exen Royalties. | | | | | |
| | | Gross rents | (ii) Personal | | | | |
| | | Less; rental expenses 6b Rental income or (loss) 6c | | | | | |
| | | Net rental income or (loss) | | | | | |
| | | Gross amount from sales of assets other than inventory Less; cost or other basis | s (ii) Other | | | | |
| | ı | and sales expenses 7b Gain or (loss) 7c Net gain or (loss) | | | | | |
| venue | 8a | Gross income from fundraising events (not including \$ of contributions reported on line 1c). | | | | | |
| Other Revenu | ı | See Part IV, line 18 | 8b events | | | | |
| • | 9a | Gross income from gaming activities. See Part IV, line 19 | 9a | | | | |
| | b | Less: direct expenses | 9ь | # # # # # # # # # # # # # # # # # # # | 1 (88) (1) 2 | | |
| | i | Net income or (loss) from gaming a | ctivities | | | | |
| | | Gross sales of inventory, less returns and allowances | 10a 10b | | | | |
| | | Net income or (loss) from sales of in | | | | | |
| 3 | | | Business Code | 41.450 | 41 450 | | <u> </u> |
| ž g | 11a | SALE OF ASSETS | - | 41,450. 16,813. | 41,450. 16,813. | | |
| scellaned Revenue | þ | SALES_TAX_REFUND MISCELLANEOUS | - | 12,039. | 12,039. | | - |
| Miscellaneous Revenue | d | All other revenue | | 6,459. | 6,459. | | |
| Σ | 1 - | Total. Add lines 11a-11d | | 76,761. | | | |
| | 12 | Total revenue. See instructions | | 1,441,221. | 1,421,328. | 0. | 0. |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising (C) (A) Total expenses (B) Do not include amounts reported on lines Management and Program service 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21,.... Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members..... Compensation of current officers, directors, 0. 0 135,913 trustees, and key employees..... 135,913 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described 0 0. in section 4958(c)(3)(B)...... 0 0 334,114 334,114 Other salaries and wages..... Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)...... 29,065 29,065 49,435 Other employee benefits...... 49,435 10 Payroll taxes..... 38,041 38,041 11 Fees for services (nonemployees): a Management..... **b** Legal..... 11,680 c Accounting..... 11,680 d Lobbying..... e Professional fundraising services. See Part IV, line 17. . . Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.).... Advertising and promotion 1,299 1,299 Office expenses..... 14 Information technology..... 33,241 5,093 38,334 16 Occupancy.... Payments of travel or entertainment 18 expenses for any federal, state, or local public officials..... Conferences, conventions, and meetings. . . . 6,259. 6.259. Interest.... Payments to affiliates..... 100,404 100,404 Depreciation, depletion, and amortization... 55,625 55,625 23 Insurance..... 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.)..... 79,521 a FIREFIGHTING EXPENSES 79,521 57,481 57,481 VEHICLES-MAINTENANCE c FIREMENS FUND DISBURSEMENTS 20,119 18,4011,718. 16,187 16,187 d VEHICLES-FUEL 80,871. 14,780 95,651 51,253. 1,718. 1,069,128 1,016,157. Total functional expenses. Add lines 1 through 24e . . . Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following Check here SOP 98-2 (ASC 958-720).....

| | | Check if Schedule O contains a response or note to | any I | ine in this Part X | | | |
|-----------------------------|--|---|-------|--------------------|---------------------------------|------|------------------------|
| | | | | | (A) Beginning of year | | (B) End of year |
| Assets | 1 | Cash — non-interest-bearing | | | 663,123. | 1 | 861,030. |
| | 2 | Savings and temporary cash investments | | | | 2 | |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | | | 28,023. | 4 | 28,438. |
| | 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 | |
| | _ | Loans and other receivables from other disqualified persons (as defined under | | | | | |
| | 6 | section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | 3,577, <u>492.</u> | | | |
| | b | Less: accumulated depreciation | 10b | 1,606,618. | 1,803,647. | 10c | 1,970,874. |
| | 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 | | | 40,650. | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | | | 2,535,443. | 16 | 2,860,342. |
| | | | | | | | |
| | 17 | Accounts payable and accrued expenses | | | 68,751. | 17 | 60,655. |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | | 20 | |
| | 20 | Tax-exempt bond liabilities | | | | 21 | |
| Liabilities | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | and the second second | V0.7 | |
| | 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 | | | 226,548. | 23 | 187,450. |
| | 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 | | | 295,299. | 26 | 248,105. |
| Net Assets or Fund Balances | | Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. |) | X | | | |
| | 27 | | | ,, | 2,193,956. | 27 | 2,565,905. |
| | 28 | Net assets with donor restrictions | | | 46,188. | 28 | 46,332. |
| | | | | | | | |
| | 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 | | | 2,240,144. | 32 | 2,612,237. |
| | 33 | Total liabilities and net assets/fund balances | | | 2,535,443. | 33 | 2,860,342. |
| BA | ــــــــــــــــــــــــــــــــــــــ | Total national and the additional additional and the second | | 11L 08/23/23 | | | Form 990 (2023) |

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|--------------|----|----|-----|---|
| \mathbf{r} | ac | 10 | - 1 | - |
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|----------|--|---------|---------|------|-------------|
| Par | t 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 | | 41,2 | |
| 2 | Total expenses (must equal Part IX, column (A), line 25). | 2 | 1,0 | 69,1 | <u>128.</u> |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 3 | 72,0 |)93. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 2,2 | 40,1 | 144. |
| 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 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 2 6 | 12,2 | 27 |
| <u> </u> | | | | 14,4 | 237. |
| Par | t XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | <u> </u> |
| | | | <u></u> | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual 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? | | 2a | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both. | ed on a | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | ate | | | |
| | basis, consolidated basis, or both. | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | 1.73 | | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi review, or compilation of its financial statements and selection of an independent accountant? | t, | 2c | Х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. | | 13 F N | | |
| | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F? | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au or audits, explain why on Schedule O and describe any steps taken to undergo such audits | dit | 3b | | |
| BAA | TETALIA (1.00.00.00) | | Forn | 990 | (2023) |
| | • | | | | • |

SCHEDULE A (Form 990)

Public Charity Status and Public Support

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

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

DANA FIRE & RESCUE DEPARTMENT 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) X A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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: 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 12 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. 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. 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. 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. 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). (ili) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (vi) Amount of other (iv) Is the organization listed (i) Name of supported organization support (see instructions) in your governing document? Yes No (A) (B) (C) (D) (E) Total

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

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.)

| Sect | ion A. Public Support | | | | | r · · · · · · · · · · · · · · · · · · · | |
|--------------|---|---|--|---|---|--|--------------------|
| begir | ndar year (or fiscal year nning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 19,305. | 19,671. | 20,360. | 20,360. 72,676. | | 151,905. |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | 834,218. | 883,473. | 891,715. | 943,853. | 1,343,898. | 4,897,157. |
| • | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 4 | Total. Add lines 1 through 3 | 853,523. | 903,144. | 912,075. | 1,016,529. | 1,363,791. | 5,049,062. |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 0. |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 5,049,062. |
| Sect | tion B. Total Support | | | | | | |
| | ndar year (or fiscal year nning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| 7 | Amounts from line 4 | 853,523. | 903,144. | 912,075. | 1,016,529. | 1,363,791. | 5,049,0 <u>62.</u> |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 1,593. | 1,976. | 1,062. | 1,021. | 669. | 6,321. |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 0. |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI | 82,408. | 15,429. | 13,858. | 23,736. | 76,760. | 212,191. |
| | Total support. Add lines 7 through 10 | | | | | | 5,267,574. |
| 12 | Gross receipts from related activ | ities, etc. (see in | structions) | | | | 0. |
| 13 | First 5 years. If the Form 990 is organization, check this box and | for the organization | on's first, second | third, fourth, or f | ifth tax year as a | section 501(c)(3) | |
| Sec | tion C. Computation of Pu | L. L' C D | | | | | |
| 14 | Public support percentage for 20 | 023 (line 6, columi | n (f), divided by li | ne 11, column (f) |) <i></i> | 14 | 95.85% |
| 15 | Public support percentage from | 2022 Schedule A, | Part II, line 14 | | | 15 | 96.20 % |
| | 33-1/3% support test—2023. If t and stop here. The organization | qualifies as a pul | olicly supported o | rganization | | | A |
| | 33-1/3% support test—2022. If the and stop here. The organization | i qualifies as a pu | blicly supported t | organization | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 1 7 a | 10%-facts-and-circumstances to or more, and if the organization the organization meets the facts | mande the feete o | and aircumetaneas | · tact chack this | nay ana cian ner i | e explain in ear | VI //OW |
| | 10%-facts-and-circumstances to or more, and if the organization organization meets the facts-and | meets the facts-a d-circumstances to | ind-circumstances est. The organiza | s test, check this tion qualifies as a | pox and stop ne r publicly supporte | e, Explain in Fart ed organization | |
| 18 | Private foundation. If the organ | ization did not che | eck a box on line | 13, 16a, 16b, 17a | , or 17b, check th | ns box and see in: | structions |

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.)

| | ion A. Public Support | | | | T | | |
|------------|--|-----------------------------|--------------------------|--------------------|---|---------------------------------------|---------------------------------------|
| 1 | ar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| | 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 | | | | | | |
| | Gross receipts from activities that are not an unrelated trade or business under section 513. | | | | | | |
| • | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| _ | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | <u>.</u> |
| 7 a | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| | 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 | | | | | | |
| С | Add lines 7a and 7b | | | | | | ··· |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| | tion B. Total Support | | | | 11,0000 | (-) 0002 | /O Total |
| | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| | Amounts from line 6 | | | | | | |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is organization, check this box and | stop here | | third, fourth, or | fifth tax year as a | section 501(c)(3) | |
| Sec | tion C. Computation of Pu | blic Support P | ercentage | | | · · · · · · · · · · · · · · · · · · · | |
| 15 | Public support percentage for 20 | 023 (line 8, colum | n (f), divided by li | ne 13, column (f |)) | 15 | 96 |
| 16 | Public support percentage from | | | | *************************************** | 10 | |
| | tion D. Computation of Inv | estment Incor | ne Percentage | ed by the 13 cel | lump (f) | | |
| 17 | Investment income percentage | for 2023 (line 10c, | column (1), alvide | ea by line 13, coi | iumn (i)) | | |
| 18 | Investment income percentage | from 2022 Schedu | ie A, Part III, line | hov on line 14 | nd line 15 is more | than 33-1/3% and | |
| | 33-1/3% support tests—2023. If is not more than 33-1/3%, check | k this box and sto l | p here. The organ | lization qualifies | as a publicly supp | orted organization | · · · · · · · · · · · · · · · · · · · |
| | 33-1/3% support tests—2022. If line 18 is not more than 33-1/39 | %, check this box a | and stop here. In | ie organization qu | ualifies as a public | iy supported organ | 112a(1011, |
| 20 | Private foundation. If the organ | ization did not che | | | check this box and | see instructions | |
| BAA | | | TEEA0403L | 08/14/23 | | Schedule / | A (Form 990) 2023 |

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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? 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. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). | 2 | | |
| За | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. | 3 a | | : |
| 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)? If "Yes," describe in Part VI when and how the organization made the determination. | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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. | 4b | | |
| С | 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)? 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. | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? 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). | 5a | William Control | |
| 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? | 5b | 3.73 | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | 1 () · · · · · · · · · · · · · · · · · · | |
| 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? If "Yes," provide detail in Part VI . | 6 | | |
| 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? If "Yes," complete Part I of Schedule L (Form 990). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L. (Form 990). | 8 | | |
| 9 a | 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))? If "Yes," provide detail in Part VI . | 9a | | |
| 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? If "Yes," provide detail in Part VI . | 9b | 2.2 | |
| 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? If "Yes," provide detail in Part VI. | 9с | | |
| 1 0 a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If "Yes," answer line 10b below. | 10a | AA | |
| t | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) | 10b | | |

| Sche | edule A (Form 990) 2023 DANA FIRE & RESCUE DEPARTMENT | | | ago o |
|-------------|--|---------------|---------|---------|
| Pa | rt IV Supporting Organizations (continued) | $\overline{}$ | Vac | No |
| | Has the organization accepted a gift or contribution from any of the following persons? | | Yes | NU |
| | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, | 11a | E9 | · .: |
| ŀ | | 11b | | |
| | | 11c | ix | y s. r. |
| | ction B. Type I Supporting Organizations | | | |
| 5 ec | tion B. Type I Supporting Organizations | | Yes | No |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | 2 | | |
| Sec | ction C. Type II Supporting Organizations | ; | V | |
| | | | Yes | No |
| 1 | of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Sec | ction 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 | 165 | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| Se | ction 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 The organization satisfied the Activities Test. Complete line 2 below. | | | |
| | b The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| | c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in | nstr | uction: | s). |
| 2 | 2 Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2 a | | |
| | b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 2 | Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> | | | |
| 2 | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. | 3a | | |
| | b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

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| Par | Type in Non-runctionally integrated 303(a)(3) Supporting Orga | 111124 | 110113 | |
|-----|--|-----------------|---|-----------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization | t on N ns mu | lov. 20, 1970 (explain in st complete Sections A | Part VI). See hrough E. |
| Sec | tion 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 | | <u> </u> |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sec | tion 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 | | |
| t | Average monthly cash balances | 1b | | |
| | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| 6 | Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 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 | | , |
| Sec | tion C – Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | AP CARRYBURY | |
| 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 | Check here if the current year is the organization's first as a non-functionally inte (see instructions). | egrate | | |
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| Part V | Type III Non-Functionally Integrated 509(a)(3) Si | upporting Organiza | tions (continued | d) | |
|-------------|---|--------------------------------|--------------------------------------|---------------|--|
| | n D – Distributions | | | | Current Year |
| 1 Ar | nounts paid to supported organizations to accomplish exempt pu | rposes | | 1 | |
| | nounts paid to perform activity that directly furthers exempt purposes excess of income from activity | of supported organizations | i, | 2 | |
| 3 Ac | dministrative expenses paid to accomplish exempt purposes of s | upported organizations | | 3 | |
| | nounts paid to acquire exempt-use assets | | | 4 | |
| 5 Qı | ualified set-aside amounts (prior IRS approval required - provide | e details in Part VI) | | 5 | |
| 6 Ot | her distributions (describe in Part VI). See instructions. | | | 6 | |
| | otal annual distributions. Add lines 1 through 6. | | | 7 | |
| | stributions to attentive supported organizations to which the organizat Part VI). See instructions. | ion is responsive (provide | details | 8 | |
| | stributable amount for 2023 from Section C, line 6 | | | 9 | |
| | ne 8 amount divided by line 9 amount | | | 10 | |
| | n E — Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributio Pre-2023 | | (iii) Distributable Amount for 2023 |
| 1 Di | stributable amount for 2023 from Section C, line 6 | | | | |
| 2 Ur ca | nderdistributions, if any, for years prior to 2023 (reasonable use required - explain in Part VI). See instructions. | | | | |
| 3 Ex | cess distributions carryover, if any, to 2023 | | | | Walion Ada |
| a Fr | om 2018 | | | 10.0 | |
| b Fr | om 2019 | | | 3,634 | |
| c Fr | om 2020 | | | 100 | |
| d Fr | om 2021 | | 建始的 自动 的 | <u>Bijdir</u> | |
| e Fr | om 2022 | | | | |
| f To | otal of lines 3a through 3e | | | | |
| g Ap | oplied to underdistributions of prior years | | | | |
| h Ap | oplied to 2023 distributable amount | | | grift. | |
| i Ca | arryover from 2018 not applied (see instructions) | | | | |
| j Re | emainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | |
| | stributions for 2023 from Section D, see 7: | | | | |
| a Ar | oplied to underdistributions of prior years | | | | |
| | oplied to 2023 distributable amount | | | | 1000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | emainder. Subtract lines 4a and 4b from line 4. | | | 1 | |
| Sı | emaining underdistributions for years prior to 2023, if any. ubtract lines 3g and 4a from line 2. For result greater than ero, explain in Part VI . See instructions. | | | | |
| fro | emaining underdistributions for 2023. Subtract lines 3h and 4b om line 1. For result greater than zero, <i>explain in Part VI</i> . See structions. | | | | |
| 7 E> | ccess distributions carryover to 2024. Add lines 3j and 4c. | | | <u> </u> | |
| 8 Br | reakdown of line 7: | | | | |
| a E | ccess from 2019 | | | | 一个人是基本的。这是是 |
| | ccess from 2020 | | | | |
| c Ex | ccess from 2021 | | | <u> </u> | |
| d Ex | ccess from 2022 | | | <u>711.</u> | plate has been been been been been been been bee |
| e F | xcess from 2023 | 100 | Section Control | | 含农品酱渍蛋 。 |

Schedule A (Form 990) 2023

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME

| NATURE AND SOURCE | 2023 | 2022 | 2021 | 2020 | 2019 |
|--|--------------------------|--------------------------|-------------------------|-------------------------|-------------------------|
| FUEL TAX REFUNDS MISCELLANEOUS | \$ 1,324. 12,038. | \$ 1,289. | \$ 1,199. 907. | \$ 1,166. 333. | \$ 4,522. 5. |
| RELIEF FUND SUPPLEMENTS SALE OF ASSETS | 5,135. 41,450. | 4,710. | 4,540. | 3,785. 5,000. | 4,089. 70,000. |
| SALES TAX REFUNDS TOTAL | \$ 16,813. 76,760. | \$ 17,737. 23,736. | \$ 7,212. 13,858. | \$ 5,145. 15,429. | \$ 3,792. 82,408. |

SCHEDULE D (Form 990)

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 2023

Open to Public Inspection
Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

| DAN | A FIRE & RESCUE DEPARTMENT | | | |
|-----|--|---|---|--|
| Par | t I Organizations Maintaining Donor Advised | Funds or Other Sim | ilar Funds or Ac | counts |
| | Complete if the organization answered "Yes | | | |
| - | \ | onor advised funds | (b) Fu | nds and other accounts |
| 7 | A | | | |
| 2 | | | ··· | |
| 3 | | | | |
| 4 | Aggregate value at end of year | | | |
| 5 | Did the organization inform all donors and donor advisors in ware the organization's property, subject to the organization's e | xclusive legal control? | | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor ad for charitable purposes and not for the benefit of the donor or impermissible private benefit? | donor advisor, or for any | other purpose confe | erring |
| Par | t II Conservation Easements | | | |
| | Complete if the organization answered "Yes | | IV, line 7. | |
| 1 | Purpose(s) of conservation easements held by the organizatio | | | |
| | Preservation of land for public use (for example, recreation or | — | | cally important land area |
| | Protection of natural habitat | Pres | servation of a certifie | ed historic structure |
| _ | Preservation of open space | | L - f f | tion consent on the |
| 2 | Complete lines 2a through 2d if the organization held a qualified co last day of the tax year. | nservation contribution in t | ne form of a conserva | ition easement on the |
| | , | | He | ld at the End of the Tax Year |
| | Total number of conservation easements | | | |
| | Total acreage restricted by conservation easements | | | |
| C | : Number of conservation easements on a certified historic struc | cture included on line 2a. | 2c | |
| C | Number of conservation easements included on line 2c acquire a historic structure listed in the National Register | | Za | |
| 3 | Number of conservation easements modified, transferred, released tax year | , extinguished, or terminate | ed by the organization | during the |
| 4 | Number of states where property subject to conservation ease | | | |
| 5 | Does the organization have a written policy regarding the period | odic monitoring, inspection | on, handling of violat | ions, |
| _ | and enforcement of the conservation easements it holds? | | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, handling | ng of violations, and enforc | ing conservation ease | ements during the year |
| 7 | Amount of expenses incurred in monitoring, inspecting, handling of | violations, and enforcing of | conservation easemen | ts during the year |
| 8 | Does each conservation easement reported on line 2d above s and section 170(h)(4)(B)(ii)? | satisfy the requirements of | of section 170(h)(4)(l | B)(i) Yes No |
| 9 | In Part XIII, describe how the organization reports conservation include, if applicable, the text of the footnote to the organization conservation easements. | n easements in its reven on's financial statements | ue and expense stat that describes the o | ement and balance sheet, and rganization's accounting for |
| Pai | | rt. Historical Treası | res. or Other Sir | milar Assets |
| | t III Organizations Maintaining Collections of A Complete if the organization answered "Yes | " on Form 990, Part | IV, line 8. | |
| 1a | If the organization elected, as permitted under FASB ASC 958 historical treasures, or other similar assets held for public exhipant XIII the text of the footnote to its financial statements that | ibition, education, or rese | nue statement and bearch in furtherance | valance sheet works of art, of public service, provide in |
| b | If the organization elected, as permitted under FASB ASC 958 historical treasures, or other similar assets held for public exhibition following amounts relating to these items. | n, education, or research in | furtherance of public | service, provide the |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | | \$ |
| | (i) Revenue included on Form 990, Part VIII, line 1 | .,., | | \$ |
| 2 | If the organization received or held works of art, historical treasures | s, or other similar assets fo | r financial gain, provid | de the following |
| а | Revenue included on Form 990, Part VIII, line 1 | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | \$ |
| b | Assets included in Form 990, Part X | | | \$ |

Schedule D (Form 990) 2023

| Part III Organizations Maintaining | Collections of Art, His | storicai i reasures, | or Other Similar A | ssets (cont | inuea) |
|--|--|---|------------------------------|--------------|--------------|
| 3 Using the organization's acquisition, access items (check all that apply). | ion, and other records, check a | ny of the following that m | ake significant use of its | collection | |
| a Public exhibition | d Loan | or exchange program | | | |
| b Scholarly research | e Other | <u> </u> | | | |
| c Preservation for future generations | | | | | |
| 4 Provide a description of the organization's or Part XIII. | | | | | |
| 5 During the year, did the organization sol to be sold to raise funds rather than to b | e maintained as part of the o | t, historical treasures, corganization's collection | or other similar assets | Yes | No |
| Part IV Escrow and Custodial Arr Complete if the organization Form 990, Part X, line 21. | angements on answered "Yes" on F | orm 990, Part IV, li | ine 9, or reported a | an amount o | on |
| 1a Is the organization an agent, trustee, custon Form 990, Part X? | stodian, or other intermediary | for contributions or oth | er assets not included | Yes | No |
| b If "Yes," explain the arrangement in Part XI | | | [| | |
| D. A. Carlon Indones | | | 1- | Amount | |
| c Beginning balance | | | | | |
| d Additions during the year | | | | | |
| e Distributions during the year | | | | | |
| f Ending balance | | | | | — |
| 2a Did the organization include an amount of b If "Yes," explain the arrangement in Part | | | - | ш, | No |
| Part V Endowment Funds | | | | | |
| Complete if the organization | on answered "Yes" on F | orm 990, Part IV, I | ine 10. | | |
| (a) (| current year (b) Prior year | r (c) Two years back | (d) Three years back | (e) Four yea | rs back |
| 1a Beginning of year balance | | | | | |
| b Contributions | • | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
| 2 Provide the estimated percentage of the | current year end balance (lin | e 1g, column (a)) held | as: | | |
| a Board designated or quasi-endowment | 8 | | | | |
| b Permanent endowment | 8 | | | | |
| c Term endowment % | | | | | |
| The percentages on lines 2a, 2b, and 2c sho | ould equal 100%. | | | | |
| 3a Are there endowment funds not in the posse organization by: | ssion of the organization that a | ire held and administered | for the | Yes | No |
| (i) Unrelated organizations? | | | | . 3a(i) | +- |
| (ii) Related organizations? | | | | _ ` ' ' | |
| b If "Yes" on line 3a(ii), are the related org | | | | | |
| 4 Describe in Part XIII the intended uses o | | | | | |
| Part VI Land, Buildings, and Equi | | | | | |
| Complete if the organization answ | | IV line 11a See Form 9 | 90 Part X line 10 | | |
| | <u> </u> | · · · · · · · · · · · · · · · · · · · | | (d) D (| |
| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book v | |
| 1a Land | <u></u> | 175,000. | | | <u>,000.</u> |
| b Buildings | | 1,855,831. | | 1,855 | <u>,831.</u> |
| c Leasehold improvements | | | | | |
| d Equipment | | 1,447,134. | | 1,447 | |
| e Other | | 99,527. | 1,606,618. | -1,507 | ,091. |
| Total, Add lines 1a through 1e. (Column (d) m | ust equal Form 990, Part X. I | ine 10c, column (B)) | , . , | 1.970 | . 874 |

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| Part VII | Investments — Other Securities Complete if the organization answered "Yes" on | Form 990, Part IV, line | N/A 11b. See Form 990. Part X. line 12. | |
|-------------------|---|----------------------------------|---|------|
| (a) Descrip | otion of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value | |
| | I derivatives | | | |
| | held equity interests | | | |
| (3) Other | | | | |
| (A) | | | | |
| (8) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) (G) | | | | |
| (H) | | | | |
| (I) | | | | |
| | n (b) must equal Form 990, Part X, line 12, column (B)) | | | |
| Part VIII | Investments – Program Related Complete if the organization answered "Yes" on | | | |
| | 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 va | liue |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| <u>(4)</u> (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | n (b) must equal Form 990, Part X, line 13, column (B)) | N/A | | - |
| Part IX | Other Assets Complete if the organization answered "Yes" on | | | |
| | | scription | (b) Book value | e |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) (10) | | | | |
| | ımn (b) must equal Form 990, Part X, line 15, c | rolumn (R)) | | |
| Part X | Other Liabilities | Johann (Dy) | | |
| FartA | Complete if the organization answered "Yes" on | Form 990, Part IV, line | 11e or 11f. See Form 990, Part X, line 25. | |
| 1. | | iption of liability | (b) Book value | , |
| | al income taxes | | | |
| (2) | | . | | |
| (3) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | mn (b) must equal Form 990, Part X, line 25, co | olumn (B)) | | |
| 2. Liability for | uncertain tax positions. In Part XIII. provide the text of the fo | potnote to the organization's fi | inancial statements that reports the organization's liability for uncertain | |
| | nder FASB ASC 740. Check here if the text of the footnote has | | | . [|

| Schedule D. (For | m 990) 2023 - | DANA | FTRE | ς, | RESCHE | DEPARTMENT |
|------------------|---------------|------|------|----|--------|------------|

Page 4

| Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per | Return N/A |
|--|----------------------|
| Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | |
| 1 Total revenue, gains, and other support per audited financial statements | . 1 |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | XX. |
| a Net unrealized gains (losses) on investments | |
| b Donated services and use of facilities | |
| c Recoveries of prior year grants | |
| d Other (Describe in Part XIII.) | 7 : 1 |
| e Add lines 2a through 2d. | . 2e |
| 3 Subtract line 2e from line 1 | 3 |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 7 (44) 1 (4) (4 |
| a Investment expenses not included on Form 990, Part VIII, line 7b | |
| b Other (Describe in Part XIII.) | |
| c Add lines 4a and 4b | 4c |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 |
| Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per | er Return N/A |
| Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | |
| 1 Total expenses and losses per audited financial statements | 1 |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | |
| a Donated services and use of facilities | |
| b Prior year adjustments | |
| c Other losses | |
| d Other (Describe in Part XIII.) | |
| e Add lines 2a through 2d | 2e |
| 3 Subtract line 2e from line 1 | 3 |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | |
| b Other (Describe in Part XIII.) | |
| c Add lines 4a and 4b | |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). | 5 |
| Part XIII Supplemental Information | |

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

Schedule D (Form 990) 2023

SCHEDULE O (Form 990)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DANA FIRE & RESCUE DEPARTMENT

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

THROUGH NOMINATIONS FROM THE FLOOR AND MAJORITY APPROVAL FOR EACH POSITION.

FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS

THE ONLY ITEM REQUIRING FULL MEMBERSHIP APPROVAL IS ANY CHANGE IN THE BY-LAWS. ALI OTHER ITEMS ARE APPROVED ONLY BY BOARD MEMBERS.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

CPA MEETS WITH THE CHIEF, TREASURER AND/OR OTHER BOARD MEMBERS BEFORE FINALIZING TAX RETURNS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

ANY COMPLAINT OR DISCOVERY GOES BFORE THE BOARD OF DIRECTORS PRIVATELY TO DISCUSS SUCH ISSUES.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

ERFORMANCE IS REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS AND COMPENSATION ADJUST BASED UPON THAT REVIEW.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL ORGANIZATION DOCUMENTS ARE OPEN TO THE PUBLIC UPON REQUEST IMMEDIATELY.

FEDERAL WORKSHEETS

PAGE 1

DANA FIRE & RESCUE DEPARTMENT

FORM 990, PART III, LINE 4E PROGRAM SERVICES TOTALS

TOTAL EXPENSES

GRANTS REVENUE

| PROGRAM SERVICES TOTAL | FORM 990 | SOURCE |
|------------------------------|----------|---|
| 1,016,157. | 0. | PART IX, LINE 25, COL. B PART IX, LINES 1-3, COL. B PART VIII. LINE 2. COL. A |

FORM 990, PART VIII, LINE 11D OTHER REVENUE

| | BUS. | | TOTAL | RELATED OR EXEMPT FUNC | UNRELATED BUSINESS | REVENUE EXCLUDED |
|------------------------|------|----|---------|------------------------|-----------------------|---------------------|
| DESCRIPTION | CODE | | REVENUE | TION REVENU | REVENUE | FROM TAX |
| RELIEF FUND SUPPLEMENT | | \$ | 5,135. | \$ 5,135. | | |
| FUEL TAX REFUND | | | 1,324. | 1,324. | | |
| TOTALS | | _ | 6,459. | 6,459. | \$ 0. | \$ 0. |

FORM 990, PART IX, LINE 24E OTHER EXPENSES

| | (A) | (B) | (C) | (D) |
|-----------------------------|------------|---------------------|-------------------------|-------------|
| | TOTAL | PROGRAM SERVICES | MANAGEMENT & GENERAL | FUNDRAISING |
| BANK CHARGES | 205. | | 205. | |
| CELLULAR SERVICE | 3,598. | 3,598. | | |
| COMMUNICATIONS | 15,037. | 15,037. | | |
| DISABILITY PAY | 5,000. | | 5,000. | |
| DUES AND SUBSCRIPTIONS | 13,520. | 13,520. | | |
| EXPENDABLE SUPPLIES | 5,521. | 4,969. | 552. | |
| FIRE PREVENTION | 5,322. | 5,322. | | |
| MISCELLANEOUS | 10,829. | 3,230. | 7,599. | |
| ON-SCENE SUPPORT | 2,503. | 2,503. | • | |
| PENSION FUND CONTRIBUTIONS | 480. | • | 480. | |
| PHYSICALS & HEPATITIS SHOTS | 3,500. | 3,500. | | |
| POSTAGE AND SHIPPING | 531. | • | 531. | |
| RESCUE EQUIP & SUPPLIES | 4,019. | 4,019. | | |
| SANITATION | 2,040. | 1,836. | 204. | |
| TELEPHONE | 2,093. | 1,884. | 209. | |
| TRAINING AND EDUCATION | 11,208. | 11,208. | | |
| UNIFORMS | 10,245. | 10,245. | | |
| TOTAL | \$ 95,651. | | \$ 14,780. | \$ 0. |

2023

FEDERAL EXEMPT ORGANIZATION TAX SUMMARY

PAGE 1

DANA FIRE & RESCUE DEPARTMENT

| | 2023 | 2022 | DIFF |
|---|--|---|--|
| REVENUE CONTRIBUTIONS AND GRANTS PROGRAM SERVICE REVENUE INVESTMENT INCOME OTHER REVENUE | 19,893 1,343,898 669 76,761 | 72,576 943,854 1,021 23,736 | -52,683 400,044 -352 53,025 |
| TOTAL REVENUE | 1,441,221 | 1,041,187 | 400,034 |
| EXPENSES SALARIES, OTHER COMPEN., EMP. BENEFITS OTHER EXPENSES | 586,568 482,560 | 550,442 417,161 | 36,126 65,399 |
| TOTAL EXPENSES | 1,069,128 | 967,603 | 101,525 |
| NET ASSETS OR FUND BALANCES REVENUE LESS EXPENSES TOTAL ASSETS AT END OF YEAR TOTAL LIABILITIES AT END OF YEAR NET ASSETS/FUND BALANCES AT END OF YEAR. | 372,093 2,860,342 248,105 2,612,237 | 73,584 2,535,443 295,299 2,240,144 | 298,509 324,899 -47,194 372,093 |

| 20 | 22 |
|----|----|
| ΖU | 23 |

GENERAL INFORMATION

PAGE 1

DANA FIRE & RESCUE DEPARTMENT

| E | n | DI | ЛS | N | FF | DE | 'n | FO | R | TH | ıs | RF | Τl | IR | N | ı |
|---|---|----|----|----|----|----|----|----|---|----|----|----|----|-----|---|---|
| _ | | | | 14 | | | | | | | | 11 | | ,,, | | |

FEDERAL: 990, SCH A, SCH D, SCH O

CARRYOVERS TO 2024

NONE