SCANNED MAY 0 4 2022

Form 990 (Rev January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2019

▶ 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.

Open to Public Inspection

A F	or the	\simeq 2019 calendar year, or tax year beginning $$ JUL $1,$ 2019 $$ and en	nding J	UN 30, 2020	
В	Check if	C Name of organization		D Employer identific	cation number
	Addre	FLORIDA CULTURAL GROUP, INC.			
	chang	(FORMERLY THE MANATEE PLAYERS, INC.)			
X	Name change	Doing business as		59-11960	43
느	Initial return		oom/suite	E Telephone number	•
L_	Final			941-749-	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,122,583.
	Amend	BRADENION, FL 34205		H(a) is this a group re	etum
	Applic tion pendir	F Name and address of principal officer UANGING M AMICK		for subordinates	? Yes X No
	pendii	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		empt status X 501(c)(3) 501(c) () ((insert no.) 4947(a)(11 or		If "No," attach a	list (see instructions)
		e: > HTTP: //WWW.MANATEEPERFORMINGARTSCENTER.		H(c) Group exemptio	
		organization: X Corporation	L Year	of formation, 1948 N	State of legal domicile; FL
P	art I	Summary			
a	1			E PERFORMING	
Governance				ES AND STRIV	
Ë	2	Check this box if the organization discontinued its operations or disposed			<u> </u>
ŏ	3		CEIV	EU 3	15
ن •خ	4	Number of independent voting members of the governing body (Part V dip e 1b)		$\frac{1}{2}$	15
es	5	Total number of individuals employed in calendar year 2019 (Part V, III (23) MAY	$^{\prime}$ 182	2021 5	27
Activities &	6	Total number of volunteers (estimate if necessary)		$ \mathcal{S} $	327
Act	7a	Total unrelated business revenue from Part VIII, column (C), line 12	DEN.		0.
	Ь	Net unrelated business taxable income from Form 990-T, line 39	DEIA'		0.
	_	O	-	Prior Year	Current Year
ě	8	Contributions and grants (Part VIII, line 1h)	-	708,270.	1,028,887.
Revenue	9	Program service revenue (Part VIII, line 2g)	\vdash	1,336,686.	901,799.
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	129.	78.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	\vdash	287,472.	191,819.
_	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,332,557.	2,122,583.
	ı	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	-	683,153.	618,442.
Expenses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		003,133.	0.
Ë	ı	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	⊸ ا	0.	
Ä	ı	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	- -	2,013,482.	1,958,071.
-	1		-	2,696,635.	2,576,513.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12	<u> </u>	-364,078.	-453,930.
50		Trevenue less expenses Subtract line 10 nont line 12		eginning of Current Year	End of Year
ets (20	Total assets (Part X, line 16)	100	17,175,019.	16,687,316.
Assets	21	Total liabilities (Part X, line 26)		5,873,553.	5,839,780.
Set .	3	Net assets or fund balances Subtract line 21 from line 20		11,301,466.	10,847,536.
	art II	Signature Block			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules ai	nd statem	ents, and to the best of my	knowledge and belief, it is
		t, and complete declaration of preparer other than object) is based on all information of which			/
7		lanenell Houch as CED		10/2	28/2020
Sign	a	Signature of officer		Date /	
Her		JANENE M AMICK, CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	. [Date Check	PTIN
Paid	i	BYRON E. SHINN BYRON E. SHINN	Ь	0/22/20 if self-employ	P00235828
Pre	parer	Firm's name CARR, RIGGS & INGRAM, LLC			72-1396621
Use	Only	Firm's address 1001 3RD AVENUE W., STE 500			
		BRADENTON, FL 34205		Phone no. 94	1.747.0500
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	01 01-2		s.		Form 990 (2019)

Form	1990 (2019) (FORMERLY THE MANATEE PLAYERS, INC.) 59-1196	043	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	FLORIDA CULTURAL GROUP, INC. AND ITS VENUE, MANATEE PERFORMING A	RTS	
	CENTER, ARE THE CULTURAL ANCHOR AND ECONOMIC DRIVERS IN THE FLOR		
	GULF COAST REGION. WE PROVIDE FOR ALL AGES AFFORDABLE, HIGH-QUAL	ITY	
	AND THOUGHT-PROVOKING ENTERTAINMENT, AS WELL AS, PERFORMANCE AND		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by ex	penses	
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to others, the total expirations are required to report the amount of grants and allocations to other and the property of the grants are required to report the amount of grants and allocations are required to report the amount of grants and allocations are required to report the grants and allocations are required to report the amount of grants are required to report the grants are required to require the grants are required to report the grants are required to report	•	d
	revenue, if any, for each program service reported		_
4a	(Code) (Expenses \$ 1,263,541. including grants of \$) (Revenue \$	627,5	597.
	NOT ONLY DID OUR PRODUCTION PROGRAM PRODUCE 18 IN-HOUSE PRODUCTI		
	HUNDREDS OF VOLUNTEER ACTORS TO DISCOVER THEIR PASSIONS IN ACTIN	-	
	THEATER LIGHTING, AND TECHNICAL DESIGN WE ALSO HOSTED 13 PROFESS		ΤY
	PRODUCED PRODUCTIONS WHICH INCLUDED CONCERTS, MUSICALS, AND BAND		
		OME 1	ro
	THE CENTER AND ENJOY LIVE ENTERTAINMENT. THE CENTER IS PROUD TO		
	FREE AND AFFORDABLE HIGH QUALITY LIVE ENTERTAINMENT TO THE AREA'		
	AT-RISK YOUTH AND THEIR FAMILIES THROUGH OUR FOR KIDS BY KIDS PR		<u> </u>
	OUR ACTION THROUGH ACTING INITIATIVE ALLOWS THE CENTER TO PRESEN		
		HROUG	
		RE TO	
		SSUES	
4b	05.256	246,4	
40		ROUGI	
	OUR RENTAL PROGRAM FOR REHEARSAL SPACE, NONPROFIT FUNDRAISERS,	10001	<u> </u>
	COMMUNITY MEETINGS/FORUMS, LEADERSHIP AND TEAM BUILDING TRAINING	C	
	WEDDINGS, AND MORE. WE ARE THE PROUD HOME TO THE BRADENTON KIWAN		
	CLUB, WHO MEET AT THE CENTER FOR THEIR WEEKLY MEETINGS.	<u> </u>	
	ODD WIND THAT THE CONTENT ON THEIR WORLD HEEL THOU		
4c	(Code) (Expenses \$ 32,225 • including grants of \$) (Revenue \$	27 '	730.
70	THE CENTER'S CONSERVATORY FOR THE PERFORMING AND TECHNICAL ARTS		
	CONSISTS OF YEAR-ROUND THEATRICAL EDUCATION OPPORTUNITIES FOR AG		
	3-90. DIRECTED BY OUR PROFESSIONAL ARTISTS AND DIRECTORS; PARTIC		rs
		MPROV	
	SELF-ESTEEM, AND BOOST CONFIDENCE THROUGH PARTICIPATION IN LIVE	111 110 1	
	THEATER. MUSICAL CAMPS ARE A MINIMUM OF 2 WEEKS AND ARE AVAILABLE	F	
	THROUGH-OUT THE YEAR. THROUGH THE PROGRAM PARTICIPANTS LEARN HOW		
	AUDITION, PARTICIPATE IN REHEARSALS, AND ARE A PART OF A MINIMUM		
	FULL-STAGED PERFORMANCES. ONE OF THE PRIMARY GOALS OF THIS PROGR		
	TO BUILD A COMMUNITY OF YOUNG PERFORMERS AND PROVIDE A SAFE ENVI		21A.T.
	FOR CHILDREN TO DEVELOP TEAMWORK SKILLS AND CONFIDENCE IN FRONT		777
	LIVE AUDIENCE. OUR TECH/THEATRE MANAGEMENT PROGRAM IS DESIGNED T	O OF	EK
4d	1 -9		
	[Expenses \$ 891,121. including grants of \$) (Revenue \$ 191,819.)	
_ <u>4e</u> _	Total program service expenses ▶ 2,272,263.		00
		Form 9	90 (2019

FLORIDA CULTURAL GROUP, INC. (FORMERLY THE MANATEE PLAYERS, INC.)

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Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	·		
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		J	
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			7.5
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
В	Did the organization maintain collections of works of art, historical treasures, or other similar assets? // "Yes," complete	8	х	
9	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?		1	
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
a	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			х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	• • • •		
	Schedule D. Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	3			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	<u> </u>
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	'''		 -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		X
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	<u> </u>	X
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Form	990 (2019) (FORMERLY THE MANATEE PLAYERS, INC.) 59-1196	043	P	age 4
Par	t IV Checklist of Required Schedules (continued)		1	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			-
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			l
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23		х
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23_		
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		Х
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			İ
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions)	l i		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a	Х	<u> </u>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			.,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	_37_		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	1
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
	Check if Schedule O contains a response or note to any line in this Part V			\Box
	2 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			<u> </u>
ь	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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Form 990 (2019) (FORMERLY THE MANATEE PLAYERS, INC.)

[Part V] Statements Regarding Other IRS Filings and Tax Compliance (continued)

						Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			[海灣	
	filed for the calendar year ending with or within the year covered by this return	2a		27			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?			2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions			Ī		1000	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•		ļ	За		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		tv over, a	Ì	$\neg \neg$		
	financial account in a foreign country (such as a bank account, securities account, or other financial a				4a		X
b	If "Yes," enter the name of the foreign country		<u> </u>				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	s (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		,		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?			5b		X
С	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 th	ne orga	nization soli	cıt			
	any contributions that were not tax deductible as charitable contributions?			l	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or	gifts				
	were not tax deductible?			ļ	6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).					116	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the	payor?	7a	<u> </u>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b_	_X_	<u> </u>
С		as requ	ııred				
	to file Form 8282?		t		7c	53 1 max.	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		1?		7e	<u> </u>	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			ļ	7 f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		-	T I	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			98-C?	7h	94. K-3	#4 (40) A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	9	ł			222
_	sponsoring organization have excess business holdings at any time during the year?		B	-	8	N.M.	7665353
9	Sponsoring organizations maintaining donor advised funds.		C3F				
a	Did the sponsoring organization make any taxable distributions under section 4966?			ŀ	9a		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			ŀ	9b	\$APRIX	33.60.5
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	1 40-	l	ļ			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a					
11	Section 501(c)(12) organizations. Enter	_100					
a	Gross income from members or shareholders	11a					
	Gross income from other sources (Do not net amounts due or paid to other sources against	1					
-	amounts due or received from them)	11b			. 5		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?		12a	No. 121	**********
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			10 S.C		200
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				134	X	
а	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	13b				製品	
c	Enter the amount of reserves on hand	13c	l		製器		339
	Did the organization receive any payments for indoor tanning services during the tax year?			[14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	ıle O		ļ	14b		ļ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eration	or		Į		l
	excess parachute payment(s) during the year?				15	d .4%-	X
	If "Yes," see instructions and file Form 4720, Schedule N				2.0		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incon	ne?	ļ	16	and to the sec	X
	If "Yes," complete Form 4720, Schedule O						
					Form	990	(2019)

Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 15	200	*	77.62
	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.	3		
b	Enter the number of voting members included on line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	332		7
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	<u>8b</u>	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	ļ	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	X	TEASON NO
b	· , · · · · · · · , · · · · · · · · · ·			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	-
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	4.0	v	
13	In Schedule O how this was done Did the organization have a written whistleblower policy?	12c	X	<u> </u>
14		13	X	
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14	Silveria	74.87±
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	1000
	Other officers or key employees of the organization			х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	LEGAL	2322
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		超	聚為
,,,,	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	102	á PEG	275000
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	\$2000Z2913	2231366
Sec	tion C. Disclosure	100	L	
17	List the states with which a copy of this Form 990 is required to be filed ▶FL			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply	,,	u / uu	
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	statements available to the public during the tax year.	(194) [1	- /	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JEFFREY EVANS - (941) 749-1111		-	
	502 THIRD AVENUE WEST, BRADENTON, FL 34205-7815			
932006	01-20-20	Form	990	(2019)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above

(A)	(B) (C)							d any current officer, director, or trustee (D) (E)				
Name and title	Average			Pos	ition			Reportable	(E) Reportable	(F) Estimated		
Name and the	hours per					than d		compensation	compensation	amount of		
	week					or/trus		from	from related	other		
	(list any	衰		l .				the	organizations	compensation		
	hours for	i di	بو			E E		organization	(W-2/1099-MISC)	from the		
	related	rstee	truste		92	Suad		(W-2/1099-MISC)		organization		
	organizations below	ualtr	hona		gloy	E al	L			and related organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations		
(1) RON LENNON, PH.D	0.00				Γ							
CHAIR		X	<u> </u>	X				0.	0.	0.		
(2) JOHN C. DIEM	0.00											
TREASURER		X	L	X		<u> </u>		0.	0.	0.		
(3) SUSAN ROMINE	0.00											
SECRETARY		X		Х	<u> </u>			0.	0.	0.		
(4) RONALD ALLEN	0.00											
BOARD MEMBER	ļ	X	L_		L	_		0.	0.	0.		
(5) STEVE BAYARD	0.00											
VICE CHAIR		X	L_	X	L	_		0.	0.	0.		
(6) NANCY CHRISTIAN	0.00											
BOARD MEMBER		X					Ш	0.	0.	0.		
(7) JOHN CONTE	0.00											
BOARD MEMBER		X	L.		_			0.	0.	0.		
(8) VERNON DESEAR	0.00											
BOARD MEMBER		X			<u> </u>	ļ.,		0.	0.	0.		
(9) JACK HAWKINS	0.00											
BOARD MEMBER		X	_				Щ	0.	0.	0.		
(10) EILEEN HOFFNER	0.00	ļ						_	_			
BOARD MEMBER		X	<u> </u>				Щ	0.	0.	0.		
(11) JON SEELEY, PHD.	0.00											
BOARD MEMBER		X			L	L_	Щ	0.	0.	0.		
(12) ALVIN STEINBERG	0.00											
BOARD MEMBER		X	_			L	Щ	0.	0.	0.		
(13) JOHN TUCKER, JR.	0.00											
BOARD MEMBER		Х	_			L.	Щ	0.	0.	0.		
(14) JOHN HARGREAVES	0.00											
BOARD MEMBER		X	_	_			Ш	0.	0.	0.		
(15) CAROL COUSE	0.00											
BOARD MEMBER		X			<u> </u>	_	Щ	0.	0.	0.		
(16) JANENE M. AMICK	40.00			x				84,446.				
CEO									0.	7,956.		

932007 01-20-20

Form 990 (2019)

Page 8

Name and title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	a	(F) stimate mount other	of
	hours for related organizations below	Individual trustee or director	Institutional trustee	<u>.</u>	Хеу етрюуее	Highest compensated employee	ıa	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or a:	mpensa from the ganizate nd relate ganizate	e ion ed
	line)	MIPUL	Insul	Officer	yey e	Highe empto	шло Ј					
												
												
1b Subtotal c Total from continuation sheets to Part VII	, Section A						> >	84,446. 0. 84,446.	C		7,9	0.
d Total (add lines 1b and 1c) Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	 		•]		0
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su		ee, k	еу е	mpl	oye	e, or	hıgi	hest compensated emp	loyee on	3	Yes	No X
For any individual listed on line 1a, is the sur and related organizations greater than \$150.	m of reportabl								he organization	4		X
5 Did any person listed on line 1a receive or as rendered to the organization? If "Yes," comp Section B. Independent Contractors	-				•		elate	ed organization or individual	dual for services	5		X
Complete this table for your five highest con the organization. Report compensation for the	•									sation f	rom	
Name and business a	address	NC	ONE	3			_	(B) Description of s	ervices		(C) ensatio	n
							_				, <u></u>	
												
							\dashv	<u></u>				

13301022 794202 76-01732.000

' Form 990 (2019)

Form 990 (2019) (FORMERLY THE MANATEE PLAYERS, INC.)
Part VIII Statement of Revenue

Total revenue Related or exampt Convellated Convel			1 97	Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
2 a ADMISSIONS/DUES				Oncome Solicos	5. No 10 10 11 1 11 11	(A)	Related or exempt	Unrelated	Revenue excluded from tax under
2 a ADMISSIONS/DUES	25 25	1	a	Federated campaigns 1a					
2 a ADMISSIONS/DUES	rant			· -					
2 a ADMISSIONS/DUES	2 0			· · · · · · · · · · · · · · · · · · ·				Company of the control of the contro	
2 a ADMISSIONS/DUES	ifts		ď		——————————————————————————————————————				A to be desired Holles
2 a ADMISSIONS/DUES	S, G		e	<u> </u>	45,591.				
2 a ADMISSIONS/DUES	Sign		f			1.5			
2 a ADMISSIONS/DUES	buti				983,296.				
2 a ADMISSIONS/DUES	Ē		g	-	-		10 m		
2 a ADMISSIONS/DUES	Som		h	Total. Add lines 1a-1f		1,028,887.			
B					Business Code	36.06.065.00g	Surprise the second	e le la company	
a Total. Add lines 2a 2f 901, 799	ø,	2	а	ADMISSIONS/DUES	711110	627,597.			
a Total. Add lines 2a 2f 901, 799	ءِ ج		b	RENTALS					
a Total. Add lines 2a 2f 901, 799	S		С						
a Total. Add lines 2a 2f 901, 799	exe		d	CONSERVATORY PROGRAMS	711110	27,730.	27,730.		
a Total. Add lines 2a 2f 901, 799	ogi		e						
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents 6 b Less rental expenses 6 b B	ō.		f		L <u></u>		de latina de la frança de la fr	to without a second to be the new lifetime.	on any Stateman Stateman Stateman Constitution
other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 6 a Gross rents b Less rental expenses c Rental income or (loss) d Not rental income or (loss) To a discos amount from sales of assets other than inventory b Less cust or other basis and sales expenses c Gain or (loss) d Not gain or (loss) To a discos income from fundraising events (not including \$\frac{1}{10}\$ Contributions reported on line 1c) See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of niventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory b Less cost of goods sold c Net income or (loss) from sales of inventory b Less cost of goods sold c Net income or (loss) from sales of inventory b Less cost of goods sold c Net income or (loss) from sales of inventory b Less cost of goods sold c Net income or (loss) from sales of inventory b Less cost of goods sold c Net income or (loss) from sales of inventory c All lother revenue e Total Add lines 11a-11d 191, 819.		-				901,799.			
A Income from investment of tax exempt bond proceeds Royalties (i) Real (ii) Personal (iii) Personal (iiii) Personal (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		3	3	, -	st, and	7.0			7.0
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6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses d Net gain or (loss) 7 d Net gain or (loss) 7 d Net gain or (loss) 7 d Net gain or (loss) 8 a Gross income from fundraising events (in) other including \$\$ of contribution is reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less circle expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 11 a OTHER INCOME PROGRAM ADVERTISING 541800 16,300. 159,300.				•	roceeds				
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e Total. Add lines 11a-11d	e eo	11							
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2019.04030 FLORIDA CULTURAL GROUP, I 76-01731

Form **990** (2019)

932009 01-20-20

Form 990 (2019) (FORMERLY THE Rart X Statement of Functional Expenses

	Check if Schedule O contains a respon			(2)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				SPACE AND SPACE
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	 			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
_	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			7 / A	
5	Compensation of current officers, directors,	02 402	64 000	16 176	10 100
_	trustees, and key employees *	92,402.	64,098.	16,176.	12,128
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	•			
7	persons described in section 4958(c)(3)(B)	422,679.	256,777.	122,492.	43,410
7 8	Other salaries and wages Pension plan accruals and contributions (include	444,013.	450,111.	144,474.	43,410
0	section 401(k) and 403(b) employer contributions)	8,106.	4,924.	2 340	823
9	Other employee benefits	52,248.	31,741.	2,349. 15,141.	833 5,366
10	Payroll taxes	43,007.		12,463.	4,417
11	Fees for services (nonemployees)	13/00/0	20,121,	12,103.	1,11,
	Management				
b	Legal				
С	Accounting	24,169.	5,000.	19,169.	- -
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		Cell District		
f	Investment management fees				-
g	Other (If line 11g amount exceeds 10% of line 25,	•			
_	column (A) amount, list line 11g expenses on Sch O.)	21,103.	14,179.	4,991.	1,933
12	Advertising and promotion	42,355.	42,095.	260.	
13	Office expenses	20,591.	18,311.	1,790.	490
14	Information technology	25,425.	23,314.	1,904.	207
15	Royalties	90,935.	90,935.		
16 .	Occupancy	202,031.	194,798.	5,133.	2,100
17	Travel	7,184.	7,184.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	 			
19	Conferences, conventions, and meetings				
20	Interest	275,469.	265,607.	6,997.	2,865
21	Payments to affiliates	(1) 100	604 105		
22	Depreciation, depletion, and amortization	616,466.	604,136.	6,165.	6,165
23	Insurance -	56,525.	54,501.	1,436.	588
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)	201 000	200 410	1 200	
a	CONTRACT LABOR RENTAL EXPENSES	391,808.	390,418.	1,390.	
b	OUTLET VENUE DISBURSEME	33,465.	33,465.		
C	SHOP SUPPLIES	29,063. 22,652.	29,063.	6.	
d		98,830.	22,646. 92,944.	2,289.	2 507
	All other expenses	2,576,513.	2,272,263.	2,289.	3,597
!5 6	Total functional expenses. Add lines 1 through 24e	4,570,513.	4,414,403.	440,131.	84,099
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	check here from if following SOP 98-2 (ASC 958-720)			-	•

Form 990 (2019)

59-1196043 Page 10

INC.)

Form 990 (2019)

(FORMERLY THE MANATEE PLAYERS,

	4.00	Balance Sheet	· · · · · · · · · · · · · · · · · · ·		
—		Check if Schedule O contains a response or note to any line in this Part X	1		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	345,428.	1	444,824
- {	2	Savings and temporary cash investments	5,557.	2	5,636
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	6,659.	4	6,110
	5	Loans and other receivables from any current or former officer, director,	AFFECT STATE		
		trustee, key employee, creator or founder, substantial contributor, or 35%	77 77 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		50 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined	2. XI. 2. W. 2. X		
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ğ.	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges		9	30,000
	10a	Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D 10a 20, 178, 960.			
	Ь	Less accumulated depreciation 10b 3,980,631.	16,814,795.	10c	16,198,329
	11	Investments - publicly traded securities		11	
- }	12	Investments - other securities See Part IV, line 11		12	
- 1	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	2 417
	15	Other assets. See Part IV, line 11	2,580.	15	2,417
	16	Total assets. Add lines 1 through 15 (must equal line 33)	17,175,019.	16	16,687,316
	17	Accounts payable and accrued expenses	55,967.	17	40,909
	18	Grants payable	477,240.	18	287,895
	19	Deferred revenue	4//,240.	19	201,093
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%		28.2	370.500.300.000.000
<u> </u>	00	controlled entity or family member of any of these persons	5,340,346.	22	5,377,768
- 1	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	3,340,340.	23 24	3,311,100
	25	Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	0.	25	133,208
	26	Total liabilities. Add lines 17 through 25	5,873,553.	26	5,839,780
寸		Organizations that follow FASB ASC 958, check here X		1447.	79254
s		and complete lines 27, 28, 32, and 33.			
ဋ္ဌ	27	Net assets without donor restrictions	11,295,909.	27	10,841,900
<u>a</u>	28	Net assets with donor restrictions	5,557.	28	5,636
ᅙᅵ		Organizations that do not follow FASB ASC 958, check here		33.5	
Ī		and complete lines 29 through 33.	M. Marie S. S. S.		April 1 Page 18 Control
ğ	29	Capital stock or trust principal, or current funds	STEAR ST.	29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	-
ASS	31	Retained earnings, endowment, accumulated income, or other funds		31	
•			11 201 466		10 047 536
Net Assets or Fund Balances	32	Total net assets or fund balances	11,301,466.	32	10,847,536

Both consolidated and separate basis

X

Х

2c

За

X Separate basis

Act and OMB Circular A-133?

Consolidated basis

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2019

Open to Public . Inspection

Name of the organization **Employer identification number** FLORIDA CULTURAL GROUP, INC. (FORMERLY THE MANATEE PLAYERS, INC.) 59-1196043 Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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) (iv) Is the organization listed (iii) Type of organization (i) Name of supported (II) EIN (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

C. ; * .

- 59-1196043 Page 2 Schedule A (Form 990 or 990-EZ) 2019 (FORMERLY THE MANATEE PLAYERS INC.) Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from Section B. Total Support (c) 2017 (e) 2019 (f) Total Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (d) 2018 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line,6, column (f) divided by line 11, column (f)) 14 15 15 Public support percentage from 2018 Schedule A, Part II, line 14 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifiés as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circu/nstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets/the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2019

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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

Sec	ction A. Public Support	olow, piease comp	ete Fait II)				
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and				•		
	membership fees received. (Do not						
	include any "unusual grants.")	910,364.	1624171.	1001312.	773,120.	979,341.	5288308.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		981,482.				5193566.
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2035354.	2605653.	1848954.	2024805.	1967108.	10481874.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
	emount on line 13 for the year Add lines 7a and 7b						0.
							10481874.
	Public support. (Subtract line 7c from line 6)	L	<u> </u>		L		FOZOTO/Z.
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	2035354.	2605653.	1848954.	2024805.	1967108.	10481874.
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						676,816.
ŀ	Unrelated business taxable income						
-	(less section 511 taxes) from businesses			·			
	acquired after June 30, 1975			ii			
,	Add lines 10a and 10b	77,567.	150,023.	154,445.	155,606.	139.175.	676,816.
-	Net income from unrelated business activities not included in 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)	19,765.	23,895.	20,067.	34,440.	16,300.	114,467.
13	Total support. (Add lines 9, 10c, 11, and 12)	2132686.	2779571.	2023466.	2214851.		11273157.
14		r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3) organiza	ation,
	check this box and stop here				·		
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2019 (I			column (f))		15	92.98 %
16	Public support percentage from 2018	• • • • • • • • • • • • • • • • • • • •	•			16	93.29 %
Se	ction D. Computation of Inves						
17	Investment income percentage for 20	19 (line 10c, colur	mn (f), divided by lii	ne 13, column (f))		17	6.00 %
18	Investment income percentage from	•	•	`"		18	5.63 %
198	33 1/3% support tests - 2019. If the		•	on line 14, and line	15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box ar	-					\triangleright [X]
ŧ	33 1/3% support tests - 2018. If the						ınd
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	is a publicly suppo	rted organization	▶ □
20	Private foundation, If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	
	23 09-25-19						or 990-EZ) 2019

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Part V Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- 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
- 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
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- 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
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? 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
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b 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.)

	Yes	No T
		(A)
	4.7	
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Schedule A (Form 990 or 990-EZ) 2019 (FORMERLY THE MANATEE PLAYERS, INC.) 59-1196043 Page 5 Rart V Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. All Type III Supporting Organizations Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s) 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). а __ The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? 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.

	dule A (Form 990 or 990-EZ) 2019 (FORMERLY THE MANATEE PI			9-1196043 Page 6
P.d.	Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying			art VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must con	mplete S	ections A through E	
Sect	ion 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		<u> </u>
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	A TOWN		A CHANG OF THE COURT OF THE COU
	instructions for short tax year or assets held for part of year).			
` a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other	3.65		
	factors (explain in detail in Part VI)	27.		ACTION OF A CONTRACT
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 1-1/2% 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 035	6	,	
7	Recoveries of prior-year distributions	7		
_8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	Description of the second	
2	Enter 85% of line 1.	2	PARAGO PERSONAL	
_3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	运用加热之间的2.34	
4	Enter greater of line 2 or line 3.	4	THE SECTION AS	
5	Income tax imposed in prior year	5	2017/245 3B1 537/400	,
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		17.14.16.17.4.014.17.3.	
	emergency temporary reduction (see instructions)	6	100000000000000000000000000000000000000	
7	Check here if the current year is the organization's first as a non-functionall	y integra		nization (see
	instructions).		,, ,, _, , ,, ,, _, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	•

Schedule A (Form 990 or 990-EZ) 2019

	dule A (Form 990 or 990-EZ) 2019 (FORMERLY THE Type III Non-Functionally Integrated 509)			9-1196043 Page 7
	on D - Distributions		COMMINGEO	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019	Andreas San		
а	From 2014		######################################	
b	From 2015	military management of the state of the stat		
c	From 2016			
d	From 2017			
е_	From 2018			
f	Total of lines 3a through e			25%的3数次次至25%的
g	Applied to underdistributions of prior years	District Annual Control		20000000000000000000000000000000000000
h	Applied to 2019 distributable amount	预求是从套线的	CARREL TO SECURITY HERE	
i	Carryover from 2014 not applied (see instructions)			KANDA TATAK
i	Remainder, Subtract lines 3g, 3h, and 3i from 3f.		外野女2000000000000000000000000000000000000	
4	Distributions for 2019 from Section D,			24 St. 3 St.
	line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount	## Commence of the commence of	TO THE PARTY OF TH	
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2019. Subtract lines 3h		645462 Karayayaya	
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2020. Add lines 3j	,		
	and 4c			
В	Breakdown of line 7			
а	Excess from 2015			KESTATIAN TANDAKS MA
ь	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
	Excess from 2019	Thinking of the manner of the state of	THE WAS TRUE TO BE A MINUS AND A SECOND	and the work the property of the second continues.

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-l	EZ) 2019	(FORM	ERLY	THE	MANATEE	PLAYERS,	<pre>INC.)</pre>	<u> 59-1196043</u>	Page 8
Part VI	Part IV, Section A line 1, Part IV, Se Section D, lines 5	I Inforn A, lines 1, i ction D, lii 5, 6, and 8	nation. P 2, 3b, 3c, 4 nes 2 and 3	rovide th b, 4c, 5a 3. Part IV.	e expla , 6, 9a, Sectio	nations required 9b, 9c, 11a, 11b n E. lines 1c. 2a	l by Part II, line 10 o, and 11c, Part IV . 2b. 3a. and 3b. F	, Part II, line 17 /, Section B, lin Part V, line 1, P	a or 17b, Part III, Ime 12; es 1 and 2, Part IV, Section (art V, Section B, Ime 1e, Part ditional information	Э,
	(See instructions)					-			
										
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

FLORIDA CULTURAL GROUP, INC.

FORMERLY THE MANATER PLAVERS TNC Employer identification number 1106042

Pai	t I Organizations Maintaining Donor Advised		or Accounts. Comple	te if the
	organization answered "Yes" on Form 990, Part IV, line			
		(a) Donor advised funds	(b) Funds and other	accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advise	ed funds	
	are the organization's property, subject to the organization's e		 -	es 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?		Y	es No
Pa	rt II Conservation Easements. Complete if the org	janization answered "Yes" on Form 990, F		
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	🗂 -	a historically important land	darea
	Protection of natural habitat		a certified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ed conservation contribution in the form of	of a conservation easement	on the last
	day of the tax year		1	d of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru	icture included in (a)	2c	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structur	re e	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax	
	year ▶		-	
4	Number of states where property subject to conservation eas	ement is located >		
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements it	holds?	Ye	s 🔲 No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing consi	ervation easements during t	he year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservati	on easements during the ye	ear
	> \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?		☐ Ye	s 🔲 No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	tatement and	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial stateme	nts that describes the	
_	organization's accounting for conservation easements			
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	ner Similar Assets.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	······································	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement ar	d balance sheet works	
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fur	therance of public	
	service, provide in Part XIII the text of the footnote to its finan	icial statements that describes these items	i.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and b	alance sheet works of	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance of public service,	
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$	
	(ii) Assets included in Form 990, Part X		▶ \$	15,098.
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financial	gain, provide	
	the following amounts required to be reported under FASB A	SC 958 relating to these items		
a	Revenue included on Form 990, Part VIII, line 1		> \$_	
ŀ	Assets included in Form 990. Part X		▶ 8	15.098.

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932051 10-02-19

	t III Organizations Maintaining C	Ollections of Art					r Simil		19604.		ige Z
	1 0.34									iuea)	
3	Using the organization's acquisition, accessing	on, and other records	s, cneck i	any or the n	ollowing that	make s	ignilicar	it use of i	is		
	collection items (check all that apply) X Public exhibition					_					
a		d			nange progra	ım					
b	Scholarly research	е		Other							
C	Preservation for future generations		1	6 11. 11							
4	Provide a description of the organization's co			-	-			oose in Pa	art XIII		
5	During the year, did the organization solicit o					ır sımılar	assets	1		T	No
Dat	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arrane							00 0-41	Yes Cor		NO
[F 81	t IV Escrow and Custodial Arranger reported an amount on Form 990, Par		ete it the	organizatioi	n answered "	Yes" on	Form 9	90, Part I	v, line 9, or		
						-44		J			
18	Is the organization an agent, trustee, custodi	an or other intermedi	ary for c	ontributions	s or other ass	ets not	included	, 			No
	on Form 990, Part X?	and namplets the fell	lavina a da	hla					Yes	<u> </u>] NO
ь	If "Yes," explain the arrangement in Part XIII	and complete the loll	lowing ta	IOIA				т			
_	Pogrania halana						-	+	Amoun	<u>. </u>	
2	Additions during the user						10				
-	Additions during the year						10	-1			
e	Distributions during the year						1e				
7-	Ending balance Did the organization include an amount on Fe	arm 000 Dort V line	21 for a			انظمنا خمي			Yes		No
	If "Yes," explain the arrangement in Part XIII		-				ity r		res	⊨) NO
_	t V Endowment Funds. Complete						10				<u> </u>
	T T T T T T T T T T T T T T T T T T T	(a) Current year		nor year	(c) Two year	Ī		e years ba	ck (e) Four	Ware	hack
1-	Beginning of year balance	5,557.	(0) -	552.	(C) TWO year	552.	(a) mie	55		_	552.
1a h	Contributions	79.		5,005.		332.					
b	Net investment earnings, gains, and losses										
q	Grants or scholarships										
	Other expenditures for facilities							-			
•	and programs										
f	Administrative expenses								-+		
	End of year balance	5,636.		5,557.		552.		55	2		552.
g 2	Provide the estimated percentage of the curr		/line 1a		hold oc						
a	Board designated or quasi-endowment	ent year end balance	% %	, coluitiii (a)) rielu as.						
b	Permanent endowment > 100.00		_′°								
-		 ^									
C	The percentages on lines 2a, 2b, and 2c sho										
34	Are there endowment funds not in the posse		tion that	are held an	d administer	ed for th	a organ	uzation			
J.	by	osion or the organiza	illon that	are note an	io administor	CG 101 11	ie organ	nzation	[Yes	No
	(i) Unrelated organizations								3a(i)	1.03	X
	(ii) Related organizations								3a(ii)		X
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Sc	hedule R?					3b		
4	Describe in Part XIII the intended uses of the										
	t VI Land, Buildings, and Equipm										
	Complete if the organization answere). Part IV.	. line 11a. S	ee Form 990	. Part X.	line 10				
	Description of property	(a) Cost or o			or other		ccumul	ated T	(d) Boo	k valu	 B
	- Cook property	basis (investr		• •	(other)		preciati		(2, 200		•
12	Land				7,367.		<u>, </u>		3,91	7.3	<u> </u>
	Buildings				$\frac{7,307}{5,995}$	3 .	345,	963.	$\frac{3,31}{11,17}$		
~	Leasehold improvements				_ ,	<u> </u>			,_,	. ,	
4	Equipment			59	2,091.		397,	559.	19	4,5	32.
	Other				3,507.		337, 237,			$\frac{3}{6}, 3$	
	I. Add lines 1a through 1e. (Column (d) must e	aual Form 990, Port	Y colum				 · /		16.19		

Part VIII In		<u>HE MANATEE PL</u>	AYERS, INC.) 59-1196043 Pag
	vestments - Other Securities.	-		
Co	omplete if the organization answered "Yes"			
(a) Description	of Security or category (including name of security)	(b) Book value	(c) Method of va	aluation Cost or end-of-year market value
I) Financial di				
2) Closely held	d equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)			ļ	
(G)				
(H)				
	nust equal Form 990, Part X, col. (B) line 12.)		9682673622602	
Rart∦VIII In	vestments - Program Related.			
	omplete if the organization answered "Yes" (a) Description of investment	(b) Book value		aluation: Cost or end-of-year market value
	1-1 - 300 iption of invostment	(b) DOOK VAILE	(C) Metriod of V	aldation. Cost or end-or-year market value
(1)			-	
(2)		 	 	
(3)				
(4)	·			
(5)				
(6)				
(7)				
(8)				
(9)				
otal. (Col. (b) m	nust equal Form 990, Part X, col. (B) line 13.)		Constitution of the Constitution of	The state of the s
Part IX O	ther Assets.			
Co	omplete if the organization answered "Yes"	on Form 990, Part IV, line	11d See Form 990, F	Part X, line 15
	(a)	Description		(b) Book value
(1)				
(2)				
(2) (3)				
(2) (3) (4)				
(2) (3) (4) (5)				
(2) (3) (4) (5) (6)				
(2) (3) (4) (5) (6) (7)				
(2) (3) (4) (5) (6) (7) (8)				
(2) (3) (4) (5) (6) (7) (8) (9)				
(2) (3) (4) (5) (6) (7) (8) (9)	(b) must equal Form 990. Part X. col. (B) line	2.15,)		>
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column	ther Liabilities.			DOO Dot V Inc 25
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Cart. X.) O	ther Liabilities. omplete if the organization answered "Yes"		11e or 11f See Form	
(2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column Cor	omplete if the organization answered "Yes" (a) Description of liability		11e or 11f See Form	990, Part X, line 25. (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Cart. X.) O Co	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Cart. X.) O Co	omplete if the organization answered "Yes" (a) Description of liability		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column Column Col (1) Federal	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	
(2) (3) (4) (5) (6) (7) (8) (9) Cart X O Co (1) Federal (2) ACCF	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Cart X O Cart X O (1) Federal (2) ACCF	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) ctal. (Column 2art X O (1) Federal (2) ACCF (3) (4)	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Dtal. (Column Cart. X.) (1) Federal (2) ACCF (3) (4) (5) (6)	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Dart X O Co (1) Federal (2) ACCF (3) (4) (5) (6) (7)	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Dail. (Column Cart. X O (1) Federal (2) ACCF (3) (4) (5) (6) (7) (8)	omplete if the organization answered "Yes" (a) Description of liability I income taxes		11e or 11f See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Cart X O (1) Federal (2) ACCF (3) (4) (5) (6) (7) (8) (9)	omplete if the organization answered "Yes" (a) Description of liability I income taxes	on Form 990, Part IV, line	11e or 11f See Form	(b) Book value

Schedule D (Form 990) 2019

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

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	1			
1	Total expenses and losses per audited financial statements			1	3,542,285.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		\$ 65.65	
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIII)	2d	965,772.		
е	Add lines 2a through 2d			2e	965,772.
3	Subtract line 2e from line 1			3	2,576,513.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b		120000	
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,576,513.
₹ P a	rt XIII Supplemental Information.				

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

PART III, LINE 4:

ORGANIZATION RECEIVED WORKS OF ART TO BE USED IN THEATRICAL PRESENTATIONS AND TO ENHANCE THE AMBIENCE OF THE PROPERTY. COLLECTIONS CONSIST PRIMARILY OF ART AND HISTORICAL MEMORABILIA.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

IN KIND DONATIONS 965,772.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

IN KIND DONATIONS 954,911.

10,861. **FUNDRASING EXPENSES**

TOTAL TO SCHEDULE D, PART XII, LINE 2D

Schedule D (Form 990) 2019

965,772.

3,088,355.

965<u>,772.</u>

0.

2,122,583.

•	FLORIDA C	ULTURAL GRO	UP, INC.			
Schedule D (Form 990) 2019 Part*XIII Supplemental Info	(FORMERLY	THE MANATE	E PLAYERS	INC.)	59-1196043 Pa	age 5
Part*XIII Supplemental Info	rmation (continued	0				
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		·				
						

. SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

Internal Revenue Service Name of the organization

Department of the Treasury

FLORIDA CULTURAL GROUP, INC.

(FORMERLY THE MANATEE PLAYERS,

OMB No 1545-0047

Employer identification number

59-1196043

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			温初
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			2 5
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		. 9	
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
	•			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	733		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
				13.0
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			100
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to	100	* */	
	establish compensation of the CEO/Executive Director, but explain in Part III.	74.0		
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization			
'a	Receive a severance payment or change-of-control payment?	4a		X
b		4b		Х
, с		4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	3892		
	1		4	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	1		07
.5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the revenues of		17:30	
a		5a	et-Passes	X
	Any related organization?	5b		Х
_	If "Yes" on line 5a or 5b, describe in Part III	43.8		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		3.3	
_	contingent on the net earnings of			
а		6a		X
	Any related organization?	6b		X
-	If "Yes" on line 6a or 6b, describe in Part III	36.2	1837	GU.
7				
	not described on lines 5 and 6? If "Yes," describe in Part III	7	annest:	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	Project	Y CYN	
_	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53 4958-6(c)?	9	1 TO	كالمشدشة

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

Schedule J (Form 990) 2019

(FORMERLY THE MANATEE PLAYERS, INC.)

59-1196043

Page 2

Part II.. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii)
Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(I)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

	Γ	(B) Breakdown of W.	W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
				-	other deferred	henefits	(B)(I)(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	compensation		(2) (3)(2)	reported as deferred on onor Form 990
			compensation	compensation				
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Schedule J (Form 990) 2019

FLORIDA CULTURAL GROUP, INC. (FORMERLY THE MANATER PLAYERS, INC.)

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Schedule J (Form 990) 2019

Part III' Supplemental Information

Schedule J (Form 990) 2019		
	i	

. SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ)

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Go to www.irs.gov/Form990 for instructions and the latest information. FLORIDA CULTURAL GROUP, INC.

OMB No 1545-0047

Open To Public

/PODMEDIV MUR MANAMER DIAVEDO

Employer identification number 50-1106043

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified person person and organization (c) Description of transaction	(d) Corr	ected?
(a) Name of disqualified person person and organization (c) Description of transaction	Yes	
		No
2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 S Enter the amount of tax, if any, on line 2, above, reimbursed by the organization S		
Part II Loans to and/or From Interested Persons.	<u> </u>	
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization	zation	
reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) Relationship with organization of loan of lo	d or '''.	Written eement?
	No Ye	s No
		+-
		+-
Part III Grants or Assistance Benefiting Interested Persons.	<u>.</u>	<u></u>
Complete if the organization answered "Yes" on Form 990, Part IV, line 27		
1 (4) (100)		

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

Schedule L (Form 990 or 990-EZ) 2019

Part IV. Business Transactions In	NAMERLY THE MANATEE PLAY INVOIVING Interested Persons. Wered "Yes" on Form 990, Part IV, line 28a, 28		59-1196	043 Pa
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharin organizati revenue Yes
JOHN HARGREAVES	BOARD MEMBER	7,931.	DONATION OF	7
Part V Supplemental Information				···········
	r responses to questions on Schedule L (see ii			
SCH L, PART IV, BUSINES:	S TRANSACTIONS INVOLVIN	G INTERESTE	D PERSONS:	
A) NAME OF PERSON: JOHN	N HARGREAVES			
D) DESCRIPTION OF TRANS	SACTION: DONATION OF IN	-KIND JANIT	ORIAL SUPPL	IES
		·	· · · · · · · · · · · · · · · · · · ·	
				
				
				
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Schedule L (Form 990 or 990-EZ) 2019

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

FLORIDA CULTURAL GROUP, INC.

OMB No 1545-0047 2019

Employer identification number

Open to Public Inspection

(FORMERLY THE MANATEE PLAYERS, INC.) 59-1196043 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROVIDE "ARTISTIC INSPIRATION FOR EVERYONE." OVER THE PAST 5 YEARS, THE ORGANIZATION'S HARDWORKING DEDICATED TEAM HAS WORKED TO POSITION THE CENTER AS AN EDUCATIONAL RESOURCE, AN ECONOMIC DRIVER FOR THE BRADENTON DOWNTOWN DISTRICT, AND A NATIONAL LEADER AMONG ITS PEER ORGANIZATIONS. THE CENTER IS PROUD TO PROVIDE NEARLY 100,000 HOURS OF TRAINING EACH YEAR TO INDIVIDUALS OF ALL AGES. THE CENTER OFFERS UNIQUE SPACES TO LOCAL NONPROFITS, COMPANIES, AND INDIVIDUALS FOR HOSTING EVENTS FROM SPECIAL CELEBRATIONS FOR A DOZEN GUESTS, OR COMPANY GALAS FOR A COUPLE HUNDRED. THE DEDICATED STAFF AND HIGHLY TRAINED VOLUNTEERS WORK TIRELESSLY TO ENSURE THAT WE DELIVER A LEVEL OF EXCELLENCE IN ALL WE DO FOR ALL AGES, THROUGH THE TALENT WE PRESENT, THE SERVICES WE OFFER, AND THE EXPERIENCES WE CREATE. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TECHNICAL-BASED EDUCATION. IN ADDITION, WE EQUIP THE COMMUNITY WITH AMPLE MEETING, EVENT AND PRODUCTION SPACE. WE ARE COMMITTED TO BEING THE COMMUNITY'S PREMIER THEATER AND THE REGION'S CENTER FOR CULTURAL, EDUCATION, AND ARTISTIC EXPRESSION. OUR TEAM WORKS TIRELESSLY TO ENSURE THAT WE DELIVER ENGAGING EXCELLENCE FOR ALL AGES, THROUGH THE TALENT WE PRESENT, THE SERVICES WE OFFER AND THE EXPERIENCES WE CREATE. OUR GOAL IS NOT JUST TO ENTERTAIN YOU...WE WANT TO INSPIRE YOU.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

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

Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization FLORIDA CULTURAL GROUP, INC.	Employer identification number
(FORMERLY THE MANATEE PLAYERS, INC.)	59-1196043
TO OUR COMMUNITY AND SURROUNDING AREAS.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMEN	NTS:
STUDENTS A PRE-PROFESSIONAL EXPERIENCE IN TECHNICAL DESIGN	N OR THEATRE
MANAGEMENT. OUR DRAMATURE PROGRAM CONSISTS OF ACTORS AGES	55+ THAT
PERFORM IN VARIOUS STYLES OF PRODUCTIONS AND PROVIDE NUMER	ROUS COMMUNITY
OUTREACH PROGRAMS IN A VARIETY OF VENUES.	-
OUTHER TROUBLE IN IT VIEWED I OF VERVEED.	· -
FORM 990, PART VI, SECTION B, LINE 11B:	
BOARD REVIEW AND APPROVAL AT A BOARD MEETING.	
SOURCE REPORTED IN TROVIDE AT A BOARD MEETING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ANNUAL REVIEWS TO DISCLOSE CONFLICTS ARE COMPLETED AT THE	BEGINNING OF THE
FISCAL YEAR.	BBSIMIING OF THE
TIOCH THAK.	
FORM 990, PART VI, SECTION B, LINE 15A:	
NON PROFIT SUMMARY OF REGIONAL COMPENSATIONS REPORT.	
MON TROTT DOMERKT OF REGIONAL COMPENDATIONS REPORT.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND	FINANCIAL
STATEMENTS ARE PROVIDED ONLINE AT THE GIVING PARTNER AND O	

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
OF
THE MANATEE PLAYERS, INC.

) APR 15 Mi 6: 36

THE MANATEE PLAYERS, INC. a not-for-profit corporation (the "Corporation") organized and existing under the laws of the State of Florida, under its corporate seal and the hands of its Chair and Secretary, hereby certify that at a meeting duly and regularly held on March 26, 2020, the Board of Directors of the Corporation voted to amend and restate the Article of Incorporation of the Corporation by deleting in their entirety the present Articles of Incorporation and by substituting; therefore, the following, which supersede the original Articles of Incorporation and all amendments thereto. The Board of Directors do hereby join and associate ourselves together for the purpose of creating and becoming a corporation, non-profit in nature and purpose, in accordance with the laws of the State of Florida, and do jointly and severally subscribe to these Articles of Incorporation.

ARTICLE I NAME OF CORPORATION OFFICE AND INITIALIZEGISTERED AGENT

The name of this Corporation, hereinafter called the Corporation, shall be FLORIDA CULTURAL GROUP, INC. The street address of the office and the initial agent is 502 3rd Avenue West, Bradenton, Florida, 34205, and the name of the registered agent is Janene M. Amick.

ARTICLE II OBJECTIVES AND POLICIES

The general objectives and policies of this Corporation will be consistent with the Corporation's mission "To represent, educate, enrich and promote diverse art forms and serve as a cultural and economic driver for the communities we support." General Objectives and policies shall be:

- 1. To engage and enrich the community's participation in live entertainment; collaborate and create an atmosphere that empowers artists; champions the arts and build understanding of their importance; encourage audiences, volunteers and staff to make a difference in the communities we support; develop and expose students to the performing arts and performances; to be supportive overall to the Tampa Bay region cultural economic efforts and function actively as a vibrant community development partner and, all other matters incident thereto, with the authority granted under the laws of the State of Florida, in Manatee County, Florida for the purpose of:
 - (a) Allowing qualified Officers and Directors as described in the Bylaws of this Organization to organize themselves and coordinate their combined and individual efforts toward establishment of programs selected in accordance with the Bylaws of this organization.
 - (b) Raising funds through activities sanctioned by the Corporation, which will promote a perpetual series of programs.
 - (c) Raising funds to support operational, capital, and endowment needs.
- 2. To educate the general public by providing and advancing knowledge and appreciation of the cultural aspects of life such as drama, music, dance, and film.

- 3. To enter into contractual agreements including but not limited to lease, purchase and sale of any and all kinds of personal property which may be necessary or appropriate for any of the foregoing uses and purposes and enter into agreements with persons or agents for the provisions of professional services relating to the foregoing uses and purposes and services.
- 4. To employ the foregoing general purposes and objectives as guidelines, not to be construed as limitations. Said purposes may from time to time be changed through lawful procedures as directed by a vote of the Corporation members in accordance with its published or adopted Bylaws. This Corporation shall also have other powers as are previded by the laws of the State of Florida under which this Corporation is organized.

ARTICLE III TERM OF EXISTENCE

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The term for which the Corporation is to exist shall be perpetual, unless dissolved according to law. Distributions upon the dissolution of the Corporation shall be made according to the terms set forth in Article VIII.

ARTICLE IV OFFICERS AND DIRECTORS OF THE CORPORATION

The affairs of this Corporation shall be managed by a Board of Directors that shall be elected as prescribed by the Bylaws of the Corporation. Vacancies on the Board of Directors may be filled until the next Annual Meeting, in such manner as provided by the Bylaws. The officers shall be: Chair, Vice Chair, Secretary, Treasurer. CEO and such other officers as may be provided in the Bylaws of the Corporation. They shall be elected by the Board of Directors. The officers and members of the Board of Directors shall perform such duties, hold office for such terms, and take office at such times as shall be provided by the Bylaws of the Corporation.

ARTICLE V BYLAWS

The Bylaws of this Corporation shall be made, altered, or rescinded from time to time in whole or in part by a majority vote of the Board of Directors of the Corporation present at any meeting at which a quorum is present and notice of the proposed action with respect to the Bylaws has been waived by a majority of the members of the Board of Directors, or provided to the members at least ten (10) days prior to the time of such meeting.

ARTICLE VI AMENDMENT OF THE ARTICLES

The Articles of the Corporation may be altered, amended, or repealed in whole or in part by the majority vote of the Board at any regular or special meeting held pursuant to written notice provided to all Board members not less than ten (10) days prior to such meeting, setting forth such proposed changes as are to be voted upon. The Amendments, upon the approval by the Secretary of State of Florida and upon filing in the office of the said Secretary of State and paying all required filing fees, shall become and be taken as part of these Articles of Incorporation.

ARTICLE VII DISTRIBUTION UPON DISSOLUTION

In the event the Corporation is dissolved by either voluntary or involuntary means, all assets of the Corporation shall be dedicated and distributed to one or more exempt entities qualifying as such pursuant to Section 501(c)(3) of the Internal Revenue Code of 1954 or any corresponding provisions of any subsequent Federal tax laws.

ARTICLE VIII EFFECTIVE DATE

The effective date of these Amended and Restated Articles of Incorporation is May 1, 2020.

IN WITNESS WHEREOF, the Corporation has caused these Articles to be executed by the Chair of the Board of Directors of the Corporation on March 26, 2020.

FLORIDA CULTURAL GROUP, INC.

Ron Lennon, Ph.D., Chair, Board of Directors

ACKNOWLEDGEMENT OF REGISTERED AGENT

By execution hereof, the undersigned accepts appointment as Registered Agent of the Corporation, is familiar with, and accepts, the obligation of that position.

IN WITNESS WHEREOF, the undersigned has executed this Acknowledgement of Registered Agent as of the Execution Date March 26, 2020.